



INTER PARTNER ASSISTANCE S.A.

Insurance and Reinsurance Company
General Agency for Italy

MULTI-RISK TRAVEL INSURANCE POLICY

"TRIPY EQUALIZZATORE"

Policy Summary

Last updated in January 2019



Inter Partner Assistance S.A.
Compagnia di Assicurazioni e Riassicurazioni
Rappresentanza Generale per l'Italia - Via Carlo Pesenti 121 - 00156 Roma - Tel.06/42118.1
Sede legale Bruxelles - Avenue Louise 166 - Capitale sociale € 31.702.613 interamente versato - 100% AXA Partners Holding S.A.
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GLOSSARY

Insured: the individual, mentioned in the policy, whose interests are covered and protected by the insurance.

Insurance: the insurance contract.

Assistance: timely assistance or help, in money or in kind, provided that the insured person is in difficulties following the occurrence of an accident, organised through the Operations centre.

Baggage: clothing, sporting goods and personal hygiene item, photographic and video equipment suitcase, handbag, a backpack that may contain them and which the Insured may take with him/her on the trip.

Operations Centre: the organisational structure of Inter Partner Assistance SA - General Agent for Italy - Via Carlo Pesenti 121 - 00156 Rome - made up of human resources and equipment, available 24 hours of every day of the year, providing telephone contact with the Insured, organising intervention in-situ and to carry out, with costs borne by the Company, any assistance provided for in the Policy.

Travelling companion: the insured person who, while not having family ties with the insured who suffered the incident, is listed on the same journey of the Insured.

Acts of terrorism: public domain action, including serious forms of unlawful violence against a community (or part thereof) and related assets, designed to strike terror in members of an organized community and / or destabilize the established order and / or restrict individual freedoms (including religious), through bombings, kidnappings, hijackings of airplanes, ships etc. and provided that such acts liable to endanger the lives of individuals.

Insured Party: the person who takes out the insurance. In the case of a natural person, a person of legal age with legal capacity to act.

Destinations: The list of individual countries per destination zone is available on the website www.tripny.net prior to subscription.

Address: the place in Italy where the Insured lives or has established the headquarters of his business and interests.

Day hospital: a hospital stay not involving an overnight admission, but documented by medical records, at a medical facility authorised having beds devoted to hospital use.

Italy: the territory of the Republic of Italy, including the Republic of San Marino and the Vatican City.

Abroad: all countries of the world, except Italy.

Event: the event that caused or has given rise, directly or indirectly, to one or more claims.

Family: means a person related by kinship to the insured (spouse, children, father, mother, brothers, sisters, grandparents, in-laws, son-in-laws, daughters in-laws, uncles, cousins, nephews) and persons permanently living together with him/her in a family unit.

Excess: fixed amount, in absolute number, to be paid by the insured person in the event of a claim or claims.

Theft: an offence committed by anyone who takes possession of the personal property of others, in order to gain profit for oneself or others as regulated by articles 624a and 624b from the Penal Code.

Mechanical failure: the sudden and unexpected mechanical or hydraulic, event that puts the vehicle in such a way as to not be able to continue the planned trip or it puts in abnormal or dangerous traffic conditions in terms of safety of the persons or vehicles. The following are considered faults: breaking or perforation of the tire, fuel exhaustion, battery failure, blocking of the theft alarm/immobiliser.

Fire: Free flame combustion of tangible assets outside of appropriate burning point that can expand and propagate by itself

Traffic accident: the accident occurred to the vehicle while moving in traffic, including the impact or the collision with a mobile or stationary obstacle, with other vehicles, identified or not, the overturning or running off the road, even if it is due to the incompetence, neglect and failure to comply with the traffic rules and regulations (as defined by law), such as to cause damage which leads to the immobilisation of the vehicle itself or allow the driving with the risk of aggravating the damage which does not allow him the independent displacement in normal safety conditions.

Compensation or indemnification: the sum payable by the Company in event of a claim covered by the guarantees of the policy.

Injury: casualty due to fortuitous, violent and external causes that produces objectively noticeable bodily harm, which, as a consequence, result the death, permanent injury or disability or temporary disability.

Care institution: University college hospital, hospital, nursing home, day hospital, diagnostic and / or therapeutic clinic, duly authorized for diagnosis and treatment. The following are not commonly considered as health facilities for diagnosis and care spas, mainly those for dietary purposes, for wellness, rehabilitation, convalescence, hospital stays or long stays, facilities for the elderly.

Illness: any noticeable impairment of health not due to the injury sustained.

Maximum: the maximum amount, established in the Policy, guaranteed by the Company in the event of a claim.

Medicines: Considered to be those entered in the Italian Register of Medicines. The following are not considered to be pharmaceutical products: homoeopathy, cosmetics, dietary, galenic preparation, etc., Even if prescribed by a doctor.

Policy: the document which proves the insurance has been taken out.

Premium: the amount owed by the Contractor to the Insurer.

Statute of Limitations: the expiry of the time to exercise the same right within the time allowed by law.

Robbery: the theft of movable objects from the owner, with violence or threat to his/her person.

Residence: the place where the Insured has established his/her dwelling as a result the certificate of residence.

Admission/hospitalisation: staying in care institutions duly authorized for the provision of hospital care, covering at least one night, or a day hospital stay.

Deadline: the date on which the effects of the contract cease.

Burglary: forcing, removal or breaking of locks or means of protection of rooms or safes or cabinets containing the insured property, such as to cause the subsequent inability of the regular operation in place before the damaging event.

Mugging: Stealing things by snatching them out of the hand of or from the person the hands or

Deductible: The part of indemnifiable damage under the terms of the policy, calculated as a percentage, that remains the responsibility of the insured per claim.

Claim: the occurrence of the damaging event, uncertain future, for which insurance has been given.

Company: INTER PARTNER ASSISTANCE S.A. General Agent for Italy - Via Carlo Pesenti 121 - 00156 Rome.

Third parties mean any person not falling within the definition of "family".

Travel: a trip, stay or location resulting from the relative contract or travel document.

SPECIAL CONDITIONS OF INSURANCE

Territorial extension

The insurance is valid for the following sections:

- Travel assistance, Medical expenses during travelling, Baggage, Travel Accidents, Flight Accidents, Third Party Liability - TPL, Legal Protection: destination chosen in the policy.

Exclusions common to all sections

Excluded from the terms of this insurance are all the services for which the Insured has not sought prior approval from the Operations Centre helpline.

The following are also excluded from any compensation, services, consequences and / or event arising directly or indirectly from:

- a) situations of armed conflict, invasion, acts of foreign enemies, hostilities, war, civil war, rebellion, revolution, insurrection, martial law, military or usurped power or attempts to usurp power;
- b) acts of terrorism in general, including the use of any type of nuclear or chemical bomb; This exclusion is not operating for the travel assistance, medical expenses while travelling and trip cancellation all risks;
- c) ionising radiation or radioactive contamination from nuclear fuel, or arising from phenomena of transmutation of the nucleus or radioactive, toxic, explosive, or other dangerous features of nuclear equipment and its components;
- d) tornadoes, hurricanes, earthquakes, volcanic eruptions, flooding, nuclear explosions and other natural disasters;
- e) air, water, soil, subsoil, or any other environmental damage;
- f) search and rescue expenses of the Insured in the sea, lake, mountain or desert;
- g) willful or gross misconduct of the Insured;
- h) suicide or attempted suicide.

No (re)insurer will be required to provide coverage, to pay a claim or provide a service in any capacity in the event that the provision of such coverage, payment of the claim or the provision of this service exposes the (re) insurer to any penalty or restriction pursuant to a resolution of the United Nations or under the sanctions, laws or economic and trade embargoes of the European Union, the United Kingdom or the United States of America.

Limitations common to all sections

In the event of multiple claims covered by the policy and caused by the same event that involved more than one policyholder at the same time, the aggregate policy ceiling for all claims cannot exceed € 20,000,000.00.

In the event that the total amount of claims exceeds € 20,000,000.00, the sums to be paid to the Insured will be reduced on a proportional basis, if possible.

PURPOSE OF THE INSURANCE

The Company, through its Operating Centre, provides the guarantees specified in the following sections:

A. TRAVEL ASSISTANCE ALL RISKS

B. MEDICAL EXPENSES WHILE TRAVELLING

C. TRIP CANCELLATION

D. BAGGAGE

E. TRAVEL ACCIDENTS

F. FLIGHT ACCIDENTS

G. THIRD PARTY LIABILITY - TPL

H. LEGAL PROTECTION

The Insured has the opportunity to compose his own policy by using the available modules and by choosing the guarantees and their maximum amounts listed in the table below:

TABLE 2.1 – MAXIMUM GUARANTEES

GUARANTEES	MAXIMUM - in Euros The warranties and pre-established maximum amounts are only valid if they have been invoked on the insurance certificate and the suitable premiums were paid								THAT CAN BE ACQUIRED INDIVIDUALLY
	Maximum amounts that cannot be modified, specified inside the guarantees								
ALL RISKS TRAVEL ASSISTANCE									YES
MEDICAL EXPENSES WHILE TRAVELLING* <i>TRIPS UP TO 35 DAYS</i>	10.000	30.000	50.000	100.000	150.000	300.000	500.000	1.000.000	Only in combination with the "All Risk Travel Assistance" Guarantee
MEDICAL EXPENSES WHILE TRAVELLING* <i>TRIPS FROM 36 AND UP TO 100 DAYS - INSURED PERSONS THAT HAVE NOT REACHED AN AGE OF 70 YEARS AT THE DATE OF START OF THE TRIP</i>	10.000	30.000	50.000	100.000	--	--	--	--	Only in combination with the "All Risk Travel Assistance" Guarantee
TRIP CANCELLATION	Trip value indicated on the policy certificate								YES
BAGGAGE	500	750	1.000	1.250	1.500	1.750	2.000	2.500	Only in combination with the "All Risk Travel Assistance" Guarantee
TRAVEL ACCIDENTS	10.000	25.000	50.000	100.000	150.000	300.000	400.000	500.000	YES
FLIGHT ACCIDENTS	10.000	25.000	50.000	100.000	150.000	300.000	400.000	500.000	YES
THIRD PARTY LIABILITY – RCT	10.000	25.000	50.000	100.000	150.000	300.000	400.000	500.000	YES
LEGAL PROTECTION	2.500				5.000				YES

***MEDICAL EXPENSES WHILE TRAVELLING**

- a) the guarantee in the Group 1 countries is limited to € 10,000
- b) the guarantee in the Group 2 countries can be purchased up to a ceiling of € 100,000
- c) for the countries of Group 3 and Group 4 with a travel time of up to 35 days, the guarantee can be purchased up to a ceiling of € 1,000,000
- d) for the countries of Group 3 and Group 4 with a travel time between 36 and 100 days, the guarantee can be purchased up to a ceiling of € 100,000
- e) for trips with a duration of more than 35 days, only persons who are less than 70 years old at the starting travel date can be insured. However, for persons who reach this age (70 years) during the contract the Medical Expenses guarantee remains valid until the Policy expiry date.

A. TRAVEL ASSISTANCE – ALL RISKS

A.1- Definitions of the section details:

Assistance: The Company, for the entire duration of the policy or for the duration of the trip, is committed to providing immediate assistance within the limits agreed, in the event of difficulties caused by the occurrence of unexpected events and incidental findings affecting the Insured himself, his family members (though not travelling with the insured) and his possessions.

Family: the person bound by a family relationship with the Insured (exhaustive list: spouse, cohabiting partner, children, father, mother). The definition of the family includes other relatives permanently living with the Insured as well as resulting from the family status (exhaustive list: brothers, sisters, grandparents, sons-in-law, daughters-in-law, uncles, cousins, nephews).

Insured goods: vehicles / motorcycles and home, located in Italy, owned by the Insured.

A.2- PURPOSE OF THE INSURANCE:

The company, following the "ALL RISKS" principle in case of any unforeseeable and unpredictable event that occurs during the trip, and affecting:

- the Insured party;
- the Family of the Insured;
- the Goods of the Insured;

organises and provides 24 hours of 24, through the Helpline, all the necessary assistance for the state of necessity that has arisen, except as expressly provided in certain exclusions indicated in art. A.4 or exclusions common to all sections of art. 2.2. The Company, before the release of any provision of assistance, has the right to request at its own discretion all the necessary supporting evidence for the actual occurrence of the unforeseeable and unexpected event that gave rise to the claim.

A.2.1- Following the accident of the Insured during the trip, the Company guarantees, **by way of example only**, the following Assistance services:

- **MEDICAL CONSULTATION BY PHONE;**
- **SENDING A DOCTOR OR AMBULANCE;**
- **INDICATION OF A SPECIALIST DOCTOR;**
- **RETURN OF THE TRAVELING COMPANIONS;**
- **JOURNEY OF A FAMILY MEMBER FOR THE RETURN OF MINORS TO THEIR HOME IF NEEDED;**
- **SENDING MEDICINES ABROAD;**
- **INTERPRETER AVAILABLE IN CASE OF HOSPITALISATION;**
- **TRANSLATION OF MEDICAL RECORDS;**
- **TRAVEL OF A FAMILY MEMBER IN CASE OF HOSPITALISATION;**
- **EXTENSION OF STAY DUE TO HOSPITALISATION;**
- **SENDING URGENT COMMUNICATIONS;**
- **EARLY RETURN IN CASE OF ILLNESS OF A FAMILY MEMBER;**
- **ADVANCED AMOUNTS FOR THE PURCHASE OF ESSENTIAL GOODS ABROAD IN CASE OF THEFT, MUGGING, ROBBERY OR LOSS OF THE MEANS OF PAYMENT;**
- **BLOCKING OF CREDIT CARDS;**
- **ADVANCE PAYMENT OF EXPENSES FOR LEGAL ASSISTANCE ABROAD;**
- **ADVANCE FOR BAIL ABROAD.**

Maximum added **€ 15,000 per event** related to the Assistance services regarding accidents, illness, or death;

Maximum added **€ 1,500 per event** related to the Assistance services regarding events other than accidents, illness, or death;

Travel assistance guarantees are valid for family members and a fellow traveler as long as they are policyholders.

It also specifies that, with respect to the insured person present in the policy, the company delivers with **UNLIMITED maximum amount** the following services:

- **MEDICAL REPATRIATION;**
- **RETURN OF THE DECEASED;**
- **RETURN OF CONVALESCING PATIENT FOLLOWING HOSPITALISATION.**

In case of Medical Repatriation the following are not included in the assistance services:

- illnesses or injuries which, in the opinion of the medical service of the Operations Centre, can be treated on site or at least do not prevent the continuation of the trip;
- infectious diseases if transportation implies violation of national or international health requirements;

A.2.2- As a result of an accident involving a family member not travelling with the insured and/or the goods of the same, the company will ensure, **by way of example**, the following assistance services:

- **MEDICAL ASSISTANCE TO THE FAMILY BACK HOME;**
- **SENDING A CRAFTSMAN FOLLOWING ANY DAMAGE TO THE DWELLING;**
- **SENDING A BABY-SITTER FOR CHILDREN LEFT UNATTENDED;**
- **ROADSIDE ASSISTANCE IN CASE OF BREAKDOWN OR ACCIDENT;**

Please note that the guarantees under section A.2.2 shall be provided only in Italy.

Maximum added **€ 3,000 per claim and per policy**.

A3 - Start date and operation

The guarantee runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date.

A.4 - Special exclusions applicable to this section (in addition to the common exclusions)

The assistance will not be provided in the following cases:

1. if the Insured (or his/her representative) ignores the indications of the Operations Centre, that is where he/she requests to be discharged from the facility when admitted, against the advice of the doctors of the same facility; or if he/she refuses sanitary transportation or repatriation. In this last case, the Company will immediately suspend assistance and coverage of additional medical expenses accrued from the day following the refusal of transport / repatriation to Italy.
2. direct organisation, or otherwise, without the prior permission of the Operations Centre, of any kind of assistance;
3. the medical expenses except for those specified in section B – Medical expenses when travelling.
4. pandemic (declared by WHO), of such a severity and virulence with a high mortality, i.e. restrictive measures are required to reduce the risk of transmission to the civilian population;
5. planned trip:
 - a trip made towards an area where, at the time of departure, there is a ban or limitation (even temporary) issued by a competent public authority;
 - a trip made for the purpose of undergoing medical / surgical treatment;
 - if the destination is to be or is declared to be under quarantine.
 - for medical rehabilitation and physiotherapy;
 - for the purchase, application, maintenance and repair of prostheses and therapeutic devices;
 - for the treatment or removal of physical defects or congenital malformations, for aesthetic applications, for thermal and slimming treatments, dental treatments;
 - for voluntary termination of pregnancy, assisted reproduction and their complications;
 - for explants and/or organ transplants;
6. practice of air sports and the aerial activities in general, extreme sports if done outside sports organisations and without the required safety criteria;
7. any sport carried out professionally or which, however, leads to direct or indirect remuneration;

8. purchase and repair of glasses, contact lenses;
9. natural delivery or caesarean section;
10. morbidity due to pregnancy beyond the 26th week of pregnancy and childbirth;
11. abuse of alcohol or drugs and the use of narcotics and hallucinogens;
12. attempted suicide or suicide;
13. car racing, motorcycle racing, motorboat racing and related tests and workouts;
14. all the professional activities involving the use of mines, weapons and/or dangerous substances, access to mines, quarries and excavation and/or mining activities on land and sea;
15. bankruptcy of the carrier or of the travel agent;
16. errors or omissions at the time of booking or inability to obtain a visa or passport;
17. mental illness, schizophrenia, bipolar disorders, psychosis, major depression in the acute stage.
18. if you need assistance at home:
 - it excludes the costs related to equipment and/or the spare parts required for repair;
 - the services cannot be provided abroad;
19. in case of roadside assistance, vehicles are excluded:
 - with a total weight at full load higher than 35 quintals;
 - with a foreign plate, not registered in Italy;
 - with the date of the first registration exceeding 15 years;
 - not regularly insured for the compulsory RCA coverage;
 - used for public use, driving instruction and taxi and electric vehicles, vehicles with three wheels camper vans/motor homes and caravans, trailers and car trailers;
20. the Roadside Assistance services are not operating:
 - if the vehicle is located in a place which is not accessible by means of ordinary aid;
 - for the recovery, transfer and storage of personal effects and the transported goods;
 - for rentals of motor cars exceeding 1,200 cc, for periods longer than 3 days and if the insured is not able to guarantee the security deposit, required by the car rental companies, in the form of a credit card. It excludes fuel costs, as well as the non-filling of the tank at the time of delivery to the renter, the drop-off (the return of the vehicle in a country other than where it was taken over), the optional insurance, the deductible theft and Kasko, the tolls in general (highways, ferries, etc.), any fines, and the time exceeding the guaranteed days;
 - for the immobilisation of the vehicle for carrying out the periodic service check and in the case of the recall.
21. in case of provision of hotel services, all charges other than the bed and breakfast are not included.

A.5 – Provisions and limitations

The Company reserves the right not to deliver the required services following an event, or to suspend at any moment the execution if it is blatantly or reasonably impossible, impractical or feasible only through illegal channels or by invading the privacy or by breaching the national or international laws or the ethical and moral standards.

The Insured and any other persons entitled to the benefits of free assistance by professional secrecy, for the sole events object of this insurance and exclusively including the Company, the doctors and other health care professionals who have visited them or they have acquired sensitive information about their health state.

The Company will provide the Roadside Assistance only in the following countries: Albania, Andorra, Armenia, Austria, Belarus, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Denmark, Estonia, Russia, Finland, France, Germany, Great Britain, Georgia, Gibraltar, Greece, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Malta, Rep. Moldova, Montenegro, Netherlands, Monaco, Norway, Poland, Portugal, Romania, Czech Rep., Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey, Hungary, Ukraine.

The Company takes no responsibility for events resulting from:

- failure to contact the helpline or otherwise, without prior authorisation;
- extreme trips in remote areas accessible only with the use of special means of rescue.

Please note also that:

- a) the provision of assistance, in accordance with the specific operating conditions, is carried out in consideration of the state of health and the state of necessity, using the means and facilities that the Company believes, in its sole discretion, most appropriate for the purpose;
- b) the Company may not be held responsible for:
 - delays or impediments in the services agreed resulting from Acts of God, to the provisions of the local authorities or contrary to rules and regulations applicable at the place of payment of benefits;
 - errors arising from inexact communications received by the Insured or on his/her behalf;
- c) the Company is not required to pay an indemnity to replace the guarantees of assistance due;
- d) in the event of Insured's hospitalisation, the travel arrangements for family members to be at the side of the Insured is limited to 2 persons;
- e) nursing is valid only within 7 days after the return from the trip;
- f) the costs/bail advances are paid exclusively abroad within the limit of € 5,000 per claim and per policy and the guarantee will become effective at the time when, in Italy, the helpline receives the adequate bank refund guarantees. The Insured will have to repay, to the Company, the sums advanced within thirty (30) days of the payment of the same. This service is not available:
 - in countries where there are no branches or correspondents of the Company;
 - when the Insured is not able to provide adequate bank guarantees of return of funds, or considered as such at the sole discretion of the Company;
 - in cases where transfers of currency abroad infringe existing rules on foreign exchange in Italy or in the country where the Insured is.
- g) the Company, regarding the extension of the stay, will bear the hotel expenses (bed and breakfast) for the Insured and the travelling companions, provided that they are insured, within the limit of € 1,500.00 per incident and per policy;
- h) in case of return of the convalescent Insured to his home, the organisation of a trip for a companion is limited to one person;
- i) in case of return of the convalescent Insured to his home, the organisation of a trip for a companion is limited to one person;
- j) the medical records released as a result of hospitalisation during the trip will be translated into Italian from English, French, Spanish or German. The translation will only occur with the consent of the Insured in respect of the provisions of the current legislation in Italy on the processing of personal data.

A.6 - Obligations of the Insured in the event of assistance request

The Insured must contact personally the Helpline, unless he is objectively unable to do so, and he must provide his personal data, the policy number and the type of service required.

B. MEDICAL EXPENSES WHILE TRAVELLING

B.1 - Purpose of the insurance:

The Company, in the event of an illness or an accident of the Insured while travelling, provides the following services:

TRIPS UP TO 35 DAYS

MEDICAL EXPENSES WHILE TRAVELLING <i>The indicated thresholds must be understood for the Insured, claim and the insurance period, given the sub limits set out below.</i>	Maximum
BY DIRECT PAYMENT - only if the Operations Centre has been contacted beforehand.	
a) If the insured incurs medical expenses / hospital care or urgent and unavoidable surgery which cannot be postponed, received in situ during the trip, during the period of validity of the guarantee, the Company shall bear the costs with direct payments made by the Operations Centre. The guarantee will be paid until the date of discharge or until such time as the Insured shall be deemed, in the opinion of the doctors of the Company, in condition to be repatriated. Where the Company cannot make direct payment, the expenses will be reimbursed provided they have been authorized, in advance by the Operations Centre prior to the period of hospitalisation. No refund will be made without prior contact with the Operations Centre helpline.	Maximum amount indicated on the policy certificate
TO BE REFUNDED - Even without prior authorisation from the Operations Centre, within the indicated sub-limits, upon the presentation of appropriate both clinical and tax documentation	€ 5,000
a) The Company will reimburse the cost of transport from the scene of the event to the medical centre emergency room or first admission.	
b) The Company shall reimburse the expenses for medical and/or pharmaceutical visits pursuant to the medical prescription, diagnostic tests, ambulatory care and/or first admission (including the day hospital), incurred following an accident or illness occurred while travelling.	€ 1,500
c) <u>Dental care</u> : The Company will reimburse the expenses for urgent dental treatment while travelling. <u>Treatment following an accident</u> : In the event of an accident occurring while travelling the Company will also reimburse the expenses for medical and diagnostic tests, provided they are performed within 30 days after the return from the trip.	€ 500
d) The Company shall provide the refund of the expenses, including the physiotherapy, incurred following an accident or illness occurring while travelling and which resulted in a hospital admission. The guarantee covers, exclusively, the expenses incurred in the hospital or during the recovery period immediately following the admission and, in any case, prior to the return from the trip.	€ 500

B.2 - Effective start date and operation of the section of Travel Medical Expenses

The guarantee runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date.

The guarantee is given within the limits of capital and the assistance in situ where the event occurred, always included in the "destination" chosen in the policy.

B.3- Exclusions (In addition to common exclusions)

The assistance will not be provided in the following cases:

- if the Insured (or his/her representative) ignores the indications of the Operations Centre, that is where he/she requests to be discharged from the facility where admitted, against the advice of the doctors of the same facility; or if he/she refuses sanitary transportation or repatriation. In this last case, the Company will immediately suspend the assistance and coverage of the additional medical expenses accrued from the day following the refusal of the transport / repatriation to Italy.
- pandemic (declared by WHO), of a high severity and virulence with a high mortality, i.e. requiring restrictive measures to reduce the risk of transmission to the civilian population;
- a trip made towards an area where, at the time of departure, there is a ban or limitation (*even temporary*) issued by a competent Public Authority;
- a trip made for the purpose of undergoing medical / surgical treatment;
- if the destination is to be or is declared to be under quarantine during the trip.

Additionally:

B.3.2- Medical Expenses while Travelling

The Company will not accept responsibility for expenses arising from:

- rehabilitation and physiotherapy services other than those referred to in the Medical Expenses while Travelling Section, at point d);
- mental illness, schizophrenia, bipolar disorders, psychosis, major depression in the acute stage.
- the purchase, application, maintenance and repair of prostheses and therapeutic devices;
- treatment or removal of physical defects or congenital malformations, for aesthetic applications, for thermal and slimming treatments;
- abortion;
- practice of air sports and the aerial activities in general, extreme sports if done outside sports organizations and without the required safety criteria;
- any sport carried out professionally or which, however, leads to direct or indirect remuneration;
- purchase and repair of glasses, contact lenses;
- follow-up visits in Italy for situations resulting from illnesses which started while travelling.

The guarantee also does not apply to accidents caused by or due to:

- natural delivery or caesarean section;
- morbidity due to pregnancy beyond the 26th week of pregnancy and childbirth;
- malice of the insured;
- abuse of alcohol or drugs and the use of narcotics and hallucinogens;
- attempted suicide or suicide.

B.4 - Provisions and limitations

- For insured persons who have already reached 70 years of age, if the ceiling chosen for Medical Travel Expenses is equal to € 300,000, € 500,000 or € 1,000,000, the same will be considered limited to € 100,000, in the case of claim caused by pre-existing diseases of an evolutionary nature and their complications.
- The Insured person releases from professional secrecy, exclusively for the events covered by this insurance and exclusively to the Company, the doctors who visited him and the persons involved in the policy conditions.
- For amounts over Euro 1,000, the Company will reimburse the medical expenses incurred, only if the Insured makes the payment of the same by bank transfer or credit card.

TRIPS FROM 36 AND UP TO 100 DAYS

<p>MEDICAL EXPENSES WHILE TRAVELLING <i>The indicated thresholds must be understood for the Insured, claim and the insurance period, given the sub limits set out below.</i></p>	<p>Maximum</p>
<p>BY DIRECT PAYMENT – only if the Operations Centre has been contacted beforehand.</p> <p>a) If the insured incurs medical expenses / hospital care or urgent and unavoidable surgery which cannot be postponed, received in situ during the trip, during the period of validity of the guarantee, the Company shall bear the costs with direct payments made by the Operations Centre. The guarantee will be paid until the date of discharge or until such time as the Insured shall be deemed, in the opinion of the doctors of the Company, in condition to be repatriated. Where the Company cannot make direct payment, the expenses will be reimbursed provided they have been authorized, in advance by the Operations Centre prior to the period of hospitalisation. No refund will be made without prior contact with the Operations Centre helpline.</p>	<p><i>Maximum amount indicated on the policy certificate</i></p>
<p>TO BE REFUNDED - Even without prior authorisation from the Operations Centre, within the indicated sub-limits, upon the presentation of appropriate both clinical and tax documentation</p>	<p>€ 5,000</p>
<p>a) The Company will reimburse the cost of transport from the scene of the event to the medical centre emergency room or first admission.</p>	<p>€ 1,500</p>
<p>b) The Company shall reimburse the expenses for medical and/or pharmaceutical visits pursuant to the medical prescription, diagnostic tests, ambulatory care and/or first admission (including the day hospital), incurred following an accident or illness occurred while travelling.</p>	<p>€ 500</p>
<p>c) <u>Dental care</u>: The Company will reimburse the expenses for urgent dental treatment while travelling. <u>Treatment following an accident</u>: In the event of an accident occurring while travelling the Company will also reimburse the expenses for medical and diagnostic tests, provided they are performed within 30 days after the return from the trip.</p>	<p>€ 500</p>
<p>d) The Company shall provide the refund of the expenses, including the physiotherapy, incurred following an accident or illness occurring while travelling and which resulted in a hospital admission. The guarantee covers, exclusively, the expenses incurred in the hospital or during the recovery period immediately following the admission and, in any case, prior to the return from the trip.</p>	<p>€ 500</p>

B.2 - Effective start date and operation of the section of Travel Medical Expenses

The guarantee runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date.

The guarantee is given within the limits of capital and the assistance in situ where the event occurred, always included in the "destination" chosen in the policy.

B.3- Exclusions (In addition to common exclusions)

The assistance will not be provided in the following cases:

- a) if the Insured (or his/her representative) ignores the indications of the Operations Centre, that is where he/she requests to be discharged from the facility where admitted, against the advice of the doctors of the same facility; or if he/she refuses sanitary transportation or repatriation. In this last case, the Company will immediately suspend the assistance and coverage of the additional medical expenses accrued from the day following the refusal of the transport / repatriation to Italy.
- f) pandemic (declared by WHO), of a high severity and virulence with a high mortality, i.e. requiring restrictive measures to reduce the risk of transmission to the civilian population;
- c) a trip made towards an area where, at the time of departure, there is a ban or limitation (*even temporary*) issued by a competent Public Authority;
- d) a trip made for the purpose of undergoing medical / surgical treatment;
- e) if the destination is to be or is declared to be under quarantine during the trip.

Additionally:

B.3.2- Medical Expenses while Travelling

The Company will not accept responsibility for expenses arising from:

- a) **medical conditions that are a direct consequence of chronic or pre-existing pathological conditions at the beginning of the trip;**
- b) rehabilitation and physiotherapy services other than those referred to in the Medical Expenses while Travelling Section, at point d);
- c) mental illness, schizophrenia, bipolar disorders, psychosis, major depression in the acute stage.
- d) the purchase, application, maintenance and repair of prostheses and therapeutic devices;
- e) treatment or removal of physical defects or congenital malformations, for aesthetic applications, for thermal and slimming treatments;
- f) abortion;
- g) practice of air sports and the aerial activities in general, extreme sports if done outside sports organizations and without the required safety criteria;
- h) any sport carried out professionally or which, however, leads to direct or indirect remuneration;
- i) purchase and repair of glasses, contact lenses;
- j) follow-up visits in Italy for situations resulting from illnesses which started while travelling.

The guarantee also does not apply to accidents caused by or due to:

- natural delivery or caesarean section;
- morbidity due to pregnancy beyond the 26th week of pregnancy and childbirth;
- malice of the insured;
- abuse of alcohol or drugs and the use of narcotics and hallucinogens;
- attempted suicide or suicide.

B.4 – Provisions and limitations

- a) **For trips with a duration of more than 35 days, persons can be insured only if they have not reached an age of 70 years at the date of start of the trip. However, for those who reach this age (70 years) during the contract the Medical Expenses guarantee remains valid until the expiry of the Policy.**
- b) **The Insured person releases from professional secrecy, exclusively for the events covered by this insurance and exclusively to the Company, the doctors who visited him and the persons involved in the policy conditions.**
- c) **For amounts over Euro 1,000, the Company will reimburse the medical expenses incurred, only if the Insured makes the payment of the same by bank transfer or credit card.**

C. TRIP CANCELLATION

The company provides the guarantees specified below:

C.1. TRAVEL CANCELLATION ALL RISKS

CANCELLATION/CHANGING OF THE TRIP – PENALTY REFUND	Maximum	Excess/Compensation limits			
<p>The company shall reimburse the penalty applied under a contract by a tour operator or airline or sailing company for the cancellation or changing of the trip brought about by causes or events objectively verifiable and unpredictable at the time of booking, which affect the insured, their family members, or the joint holder of the company/associated office.</p> <p>The refund of penalty as well:</p> <ul style="list-style-type: none"> management costs; the fees of the agency; visas; the non-refundable airport taxes; the fuel adjustments already planned at the issue date of the policy and incorporated into the overall cost of the insured trip. <p>When purchasing the air tickets, the airport taxes refunded by the carrier are excluded</p> <p>The Company will reimburse the penalty charged:</p> <ul style="list-style-type: none"> to the Insured; <p>and as long as they are insured and registered on the same policy:</p> <ul style="list-style-type: none"> to all his family; to one of his travelling companions. <p>Trip cancellation due to acts of terrorism</p> <p>The warranty is also active as a result of acts of terrorism that took place after the booking of the trip, provided that such acts take place within 30 days before departure and within 100 km:</p> <ul style="list-style-type: none"> from the first intended destination resulting from the reservation of the insured trip; from the destination airport only in case of purchase of a travel ticket. 	<p><i>Trip value indicated on the policy certificate</i></p>	The company will reimburse the cancellation with an overdraft on compensation as follows:			
		In case of	Excess	Minimum	
		Death or hospital admission (Day Hospital or emergency room excluded) of the insured, family members and the company/associated office.	0%	--	
		Other causes, if the claim has been notified within midnight (24.00 hours) of the day following the event having caused the cancellation	20%	€ 50.00	
		Other causes, if the claim has been notified after midnight (24.00 hours) of the day following the event having caused the cancellation	30%	€ 50.00	
		In case of illness or injury it is given the option to physicians of the Company to carry out a check in order to certify that the Insured's condition is such as to prevent his participation to the trip.			
<p>PASSENGER RE-protection expenses. The company shall reimburse the Insured at a rate of 50% of any further costs incurred to purchase new tickets (by air, sea or rail), to replace those that cannot be used because of the late arrival of the insured at the place of departure determined by unforeseeable causes or events at the time of booking, which has affected the insured, their family members, or the joint holder of the company/associated office.</p>	<p>€ 500 per insured</p>	The company shall reimburse the costs incurred within the fixed maximum amount provided that the purchased tickets are used for services previously booked.			

C.1.1 - Start date and operation

The guarantee starts from the date of booking / purchase of the trip and it is operative until the fruition of the first service for the trip provided by the contract.

C.1.2 - Exclusions (in addition to the common exclusions)

The Company does not make reimbursements related to cancellations or changes directly or indirectly caused by:

- causes such as death or hospitalisation, not documented;
- causes, except for medical ones, known to the Insured at the time of booking;
- bankruptcy of the carrier or of the travel agent;
- pandemic (declared by WHO), of such a severity and virulence with a high mortality, i.e. restrictive measures are required to reduce the risk of transmission to the civilian population;
- quarantine.

C.1.3 - Compensation criteria

The Company will reimburse the cancellation fee:

- up to the existing percentage on the date on which the event occurred. Civ. (Italian Civil Code) Therefore, if the Insured cancels the trip after the event, the majority of the cancellation penalty will be at his/her cost;
- reserving the right to reduce the compensation by the amount of recoveries received directly by the Insured. The Company has the right to take possession of the un-used tickets.

C.1.4 - Validity

The guarantee is only valid if the policy was entered into:

- by the agency that made the travel reservation;
- at the same time of the reservation/purchase of the trip;

The guarantee is effective for a single application for compensation regardless of the outcome, at the occurrence of which it ceases.

C.2. TRAVEL CANCELLATION LIGHT

CANCELLATION/CHANGING OF THE TRIP – PENALTY REFUND	Maximum	Excess/Compensation limits			
<p>The company shall reimburse the penalty applied under a contract by a tour operator or airline or sailing company for the cancellation or changing of the trip brought about by one of the following causes or events objectively verifiable and unpredictable at the time of booking:</p> <p>a) sickness, accident or death</p> <ul style="list-style-type: none"> of the Insured or one of his family members (see definition); of the co-owner of the company or of the associated studio. <p>b) appointment of the Insured to a juror or his testimony given to the Judicial Authorities;</p> <p>c) material damage to the insured person's home or to the premises where he carries out commercial, professional or industrial activities as a result of fire, burglary or natural disasters, of such severity as to make his presence necessary;</p> <p>d) impossibility to reach the departure point of the trip as a result of:</p> <ul style="list-style-type: none"> accident occurred to the means of transport during the journey; natural disasters; <p>e) certifiable impediments of a professional nature:</p> <ul style="list-style-type: none"> revocation or modification of the Insured's scheduled holidays (exclusively for employees with permanent contracts); dismissal from work, not for disciplinary reasons, of the Insured; new employment, with a regular contract, of the Insured in a different company. <p>The refund of penalty includes as well:</p> <ul style="list-style-type: none"> management costs; the fees of the agency; visas; the non-refundable airport taxes; the fuel adjustments already planned at the issue date of the policy and incorporated into the overall cost of the insured trip. <p>When purchasing the air tickets, the airport taxes refunded by the carrier are excluded</p> <p>The Company will reimburse the penalty charged:</p> <ul style="list-style-type: none"> to the Insured; <p>and as long as they are insured and registered on the same policy:</p> <ul style="list-style-type: none"> to all his family; to one of his travelling companions. 	<p><i>Trip value indicated on the policy certificate</i></p>	<p>The company will reimburse the cancellation with an overdraft on compensation as follows:</p>			
		In case of	Excess	Minimum	
		<p>Death or hospital admission (Day Hospital or emergency room excluded) of the insured, family members and the company/associated office.</p>	0%	--	
		<p>Other causes, if the claim has been notified within midnight (24.00 hours) of the day following the event having caused the cancellation</p>	20%	€ 50.00	
		<p>Other causes, if the claim has been notified after midnight (24.00 hours) of the day following the event having caused the cancellation</p>	30%	€ 50.00	
		<p>In case of illness or injury it is given the option to physicians of the Company to carry out a check in order to certify that the Insured's condition is such as to prevent his participation to the trip.</p>			

C.2.1 - Start date and operation

The guarantee starts from the date of booking / purchase of the trip and it is operative until the fruition of the first service for the trip provided by the contract.

C.2.2 - Exclusions (in addition to the common exclusions)

The Company does not make reimbursements related to cancellations or changes directly or indirectly caused by:

- causes such as death or hospitalisation, not documented;
- causes, except for medical ones, known to the Insured at the time of booking;
- bankruptcy of the carrier or of the travel agent;
- pandemic (declared by WHO), of such a severity and virulence with a high mortality, i.e. restrictive measures are required to reduce the risk of transmission to the civilian population;
- quarantine.

C.2.3 - Compensation criteria

The Company will reimburse the cancellation fee:

- up to the existing percentage on the date on which the event occurred. Civ. (Italian Civil Code) Therefore, if the Insured cancels the trip after the event, the majority of the cancellation penalty will be at his/her cost;
- reserving the right to reduce the compensation by the amount of recoveries received directly by the Insured. The Company has the right to take possession of the un-used tickets.

C.2.4 - Validity

The guarantee is only valid if the policy was entered into:

- by the agency that made the travel reservation;
- at the same time of the reservation/purchase of the trip;

The guarantee is effective for a single application for compensation regardless of the outcome, at the occurrence of which it ceases.

D. BAGGAGE

D.1 - Territoriality: Pre-chosen destination identified in the policy.

D.2 – Purpose of the Insurance

BAGGAGE <i>The maximum amounts mentioned above are per Insured and accident</i>	Maximum	Limit of indemnity (sub-maximum)
THEFT, MUGGING, ROBBERY, FIRE, NON-DELIVERY OF BAGGAGE. The company indemnifies the Insured for the material and direct damages to him arising from the theft, fire, robbery, mugging, and failure of the air carrier to return the personal baggage. The guarantee is valid also for travel bags, suitcases, pushchairs and prams. The guarantee is only valid for the objects inside the baggage.	Maximum amount indicated on the policy certificate	The guarantee only covers one damage during the term of the policy. The Company will pay the indemnification with the maximum compensation: <ul style="list-style-type: none">per object: 10% of the maximum amount chosen for the "Baggage" guarantee with a minimum of € 100. Please note that all photo-cine-optical material (camera, video camera, camcorder, lenses, flash, batteries, etc.), appliances and any other electronic equipment are considered collectively as a single object. The maximum and the sub-maximum amounts provided shall be reduced by 50% in cases of: <ul style="list-style-type: none">forgetfulness, carelessness, negligence or loss by the Insured;lack of appropriate documentation supporting the value of the asset to be compensated.
DELAYED DELIVERY OF BAGGAGE. After a delay (as compared to the estimated time of arrival), greater than 8 hours, for the delivery of the checked baggage by the carrier, the company shall reimburse, within the limits of the insured sum: <ul style="list-style-type: none">the purchase of essential items (clothing and personal hygiene items);	€ 200	The guarantee only covers one damage during the term of the policy. The Company will not reimburse expenses: <ul style="list-style-type: none">for late delivery of baggage on the flight back to the habitual residence of the Insured;incurred after the date of receipt.
<ul style="list-style-type: none">hiring of pushchairs and prams.	€ 100	

D.3 – Indemnity criteria and limits

The Company indemnifies the Insured within the limits of the maximum sum according to the place of occurrence of the insured event.-

D.4 - Exclusions (in addition to the common exclusions)

The following are excluded from the insurance: computers, mobile phones, media players, sunglasses, televisions, battery chargers, money, precious stones, cheques, stamps, tickets and travel documents, jewellery, precious watches, coins, 'objects d'art', collections, samples, catalogues, goods, food, perishables.

The Company does not indemnify damage:

- facilitated by intent or gross negligence by the Insured or persons of which must respond;
- arising or attributable to breakage and damages;
- occurred when:
 - The baggage has been stowed in the boot of the properly locked vehicle;
 - The vehicle is not parked, at night, between the hours of 20.00 and 07.00, in a public garage for a fee;
 - The theft took place without breaking into the boot of the vehicle;
 - The baggage is carried in motor vehicles even stowed in locked boot;
- occurred during a stay on a camping site.

e) for which a certified copy of the complaint endorsed by the Authority of the place where the Event occurred, containing a detailed list of the stolen and/or destroyed objects, is not submitted.

The following are also excluded:

f) photo-cine-optical kit entrusted to third parties (hoteliers, carriers etc.).

D.5 – Start date and operation

The guarantee for the "Theft, mugging, robbery, fire, non-delivery of baggage" runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date.

The "Delayed baggage" guarantee is operational from the point of first boarding the aircraft (check-in) and it ends before the last check-in

D.6 – Provisions and limitations.

The company decides the compensation:

- according to the market value of the items stolen at the time of occurrence of the event. In the event of apparel purchased during the trip, the refund will be the purchase value, provided it is substantiated by appropriate documentation.
- in all the cases where the Insured is unable to provide appropriate documentation supporting the value of the asset to be compensated, the maximum and the sub-maximum amounts will be reduced by 50%.

E. TRAVEL ACCIDENTS

E.1 - Territoriality: Pre-chosen destination identified in the policy.

E.2. - Purpose of the insurance:

TRAVEL ACCIDENTS <i>The indicated thresholds must be understood for the Insured, claim and the insurance period, given the sub limits set out below.</i>	Maximum	Deductible
Case of death or permanent disability The Company provides the accident insurance (not plane accidents) suffered by the insured during the travel period, and communicated to the Company, and which, within two years from the day on which they occurred; have as a direct result death or permanent disability. The company considers accidents the following: <ul style="list-style-type: none">▪ suffocation without morbid origin;▪ acute poisoning by ingestion or by absorption of substances;▪ drowning;▪ frostbite or freezing;▪ sunburn or heat strokes.	Maximum amount indicated on the policy certificate	Compensation for permanent disability is due solely in the case where the degree of permanent disability is greater than 5 percentage points of the total; in this case, the allowance will be settled only by the percentage of permanent disability in excess of 5 percentage points.

E.3 - Effective start date and operation of Assistance

The guarantee runs from the time the trip begins and it ends at the end of the trip, however not later than the policy's end date.

E.4 - Exclusions (in addition to the common exclusions)

The company does not pay the compensation for injuries resulting directly or indirectly from:

- a) the performance of each professional or paid activity, however and wherever explained;
- b) driving vehicles for which a driving licence of category B is prescribed and motor boats for non-private use;
- c) the use, even if temporary, of aircrafts (including gliders and ultra-light aircrafts);
- d) surgical operations, investigations or medical treatment not resulting from injury;
- e) a suicide attempt or suicide;
- f) the participation, even as a passenger, to sport competitions and related tests with or without the use of motor vehicles unless the same have recreational character;
- g) acts of recklessness and practice of air sports and air generally, speleology, ski jumps with skis or water-skis, acrobatic skiing, mountaineering, free climbing, rafting, bungee jumping, as well as any sport exercised professionally or that involves both direct and indirect remuneration;
- h) drunkenness, abuse of psychoactive drugs, use of drugs, or hallucinogens;
- i) the acquired immune deficiency syndrome (AIDS);
- j) hernias, except for the abdominal effort hernia;
- k) heart attacks generated by any cause.

E.3 - Compensation criteria

The company pays:

- a) the compensation for death or permanent disability even if they occur after the expiry of the insurance, but within two years from the day of the accident. It is understood that the event must be reported to the company at the time of the occurrence;
- b) the compensation for the direct, exclusive and objectively evident consequences of the injury, that are independent of the pre-existing pathological or physical conditions or the ones occurred with respect to the accident;
- c) the amount of damages agreed directly with the Insured or person designated by the investigator. In the event of disagreement either Party may propose that the matter be settled by one or more arbitrators, to be appointed by a special act;
- d) for the case of death, the insured amount to the heirs. The compensation may not be combined with that for permanent disability. If after the payment of the compensation for permanent disability, the insured person dies as a result of the same accident, the company pays to the beneficiaries only the difference between the indemnity for death-whichever is higher-and that already paid for permanent disability;
- e) for the case of permanent disability equal to 100%, the maximum amount for such guarantee;
- f) for the case of permanent disability, the compensation calculated on the insured amount in proportion to the degree of permanent disability which must be ensured in accordance with the criteria and the percentages provided by INAIL Table, referred to in the Presidential Decree of 30 June 1965 no. 1124, amended.

E.6 - Persons for whom the travel guarantee is invalid

This travel accident insurance does is not valid for the insured persons who have already reached the 75 years of age.

E.7 - Provisions/Limitations

The capital sum insured by this policy and by other cumulative injury insurances that include this guarantee, stipulated by the Contractor with the Company, in favour of the same insured persons, cannot exceed the limits of:

- € 500,000.00 per person;
- € 5,000,000.00 per policy;

In the event that the insured capital altogether exceeds the amounts indicated above, the allowances payable in the event of a claim shall be adapted with the proportional reduction and imputation on individual policies, so as not to exceed, altogether, the attributable amount on the basis of the amounts stated above.

F. FLIGHT ACCIDENTS

F.1 - Territoriality: Pre-chosen destination identified in the policy.

F.2. - Purpose of the insurance:

FLIGHT ACCIDENTS <i>The indicated thresholds must be understood for the Insured, claim and the insurance period, given the sub limits set out below.</i>	Maximum	Deductible
Case of death or permanent disability The company shall provide, from the moment when the Insured enters on an aircraft until the moment when he/she disembarks, insurance for the injuries that it suffers as a passenger of scheduled and charter flights (excluding private planes), and that within two years from the day on which they occurred, have as a direct result the death or permanent disability. The company considers accidents the following: <ul style="list-style-type: none">▪ suffocation without morbid origin;▪ acute poisoning by ingestion or by absorption of substances;▪ drowning;▪ frostbite or freezing;▪ sunburn or heat strokes.	Maximum amount indicated on the policy certificate	Compensation for permanent disability is due solely in the case where the degree of permanent disability is greater than 5 percentage points of the total; in this case, the allowance will be settled only by the percentage of permanent disability in excess of 5 percentage points.

F.3 - Effective start date and operation of Assistance-

The guarantee, for the period identified in the policy, works from the moment when the insured enters an aircraft and ends at the moment when he/she disembarks.

F.4 - Exclusions

The company does not pay the compensation for the following injuries:

- a) occurring in any air vehicle that is not considered aircraft in accordance with the law, such as the equipment for sports or leisure flying (hang gliders, ultra lights, autogyros, paragliding, etc.);
- b) occurring on an aircraft other than those used for public transport of passengers, as well as the aircraft owned, affiliated or used by flying clubs;
- c) occurring on aircraft operating in violation of the provisions of the law, regulations, operating rules or of airworthiness and aircraft whose crew does not hold the required licence or valid qualifications, when the violation or irregularities are known by the Insured or they are knowable according to the usual diligence;
- d) occurred during trial flights or competition flights of all kinds and the related preparatory tests;
- e) attributable in whole or in part to the severe negligence of the Insured.

The following are also excluded from any compensation, services, consequences and / or event arising directly or indirectly from:

- f) hernias, except for the abdominal effort hernia;
- g) heart attacks generated by any cause.

F.3 - Compensation criteria

The company pays:

- a) the compensation for death or permanent disability even if they occur after the expiry of the insurance, but within two years from the day of the accident. It is understood that the event must be reported to the company at the time of the occurrence;
- b) the compensation for the direct, exclusive and objectively evident consequences of the injury, that are independent of the pre-existing pathological or physical conditions or the ones occurred with respect to the accident;
- c) the amount of damages agreed directly with the Insured or person designated by the investigator. In the event of disagreement either Party may propose that the matter be settled by one or more arbitrators, to be appointed by a special act;
- d) for the case of death, the insured amount to the heirs. The compensation may not be combined with that for permanent disability. If after the payment of the compensation for permanent disability, the insured person dies as a result of the same accident, the company pays to the beneficiaries only the difference between the indemnity for death- whichever is higher- and that already paid for permanent disability;
- e) for the case of permanent disability equal to 100%, the maximum amount for such guarantee;
- f) for the case of permanent disability, the compensation calculated on the insured amount in proportion to the degree of permanent disability which must be ensured in accordance with the criteria and the percentages provided by INAIL Table, referred to in the Presidential Decree of 30 June 1965 no. 1124, amended.

F.6 - Provisions/Limitations

The capital sum insured by this policy and by other cumulative injury insurances that include this guarantee, stipulated by the Contractor with the Company, in favour of the same insured persons, cannot exceed the limits of:

- € 500,000.00 per person;
- € 5,000,000.00 per aircraft;

In the event that the insured capital altogether exceeds the amounts indicated above, the allowances payable in the event of a claim shall be adapted with the proportional reduction and imputation on individual policies, so as not to exceed, altogether, the attributable amount on the basis of the amounts stated above.

G. THIRD PARTY LIABILITY - TPL**G.1 - Territoriality:** Pre-chosen destination identified in the policy.**G.2 - Purpose of the insurance**

THIRD PARTY LIABILITY – TPL	Maximum	Deductible
<p>The Company is responsible for the sums which the insured is obliged to pay, as the latter is civilly liable in accordance with the law, as compensation (capital, interest and expenses) for damages involuntarily caused to third parties for death, personal injury and damage to property and animals as a result of an accidental fact that occurred during the period of insurance in relation to facts of the private life, with the exclusion of all liability to the professional activity. The guarantee also includes collateral damage:</p> <ul style="list-style-type: none"> ▪ caused by pets; ▪ caused by the ownership and use of cycles, non-motorised vehicles and boats no longer than 6.5 meters, golf cars; ▪ caused by the use of horses and other animals with saddle with the consent of the owner; ▪ caused by playing sports, including races, not exercised at the pro level, leisure activities and camping. 	<p>For damages to people, things and animals, per event and insurance period:</p> <p><i>Maximum amount indicated on the policy certificate</i></p>	<p>With respect to the damage to property and animals, the insurance covers a deductible of € 150 per claim.</p>

G.3 - In case of an event

The Insured or his agent must:

a) notify

- the Company as stipulated in the policy. The failure to comply with this requirement may result in the total or partial loss of the right to compensation (article 1915 Civil Code);
- to all the insurers, in case of stipulation of more policies for the same risk, specifying their names (Article 1910 Civil Code);

b) make available to the Company all the documentation useful for investigations and checks.

G.4 - Exclusions

The following damages are excluded from the insurance resulting from:

- a) malicious acts committed or attempted by the insured;
- b) the exercise of professional activities;
- c) the hunting activities;
- d) theft;
- e) the circulation on public roads or equivalent areas by using motor vehicles, and by navigating on motor boats and using aircraft;
- f) the possession of weapons and their ammunition and from using them;
- g) caused to the property of third parties that the Insured party has taken delivery of and/or has in safekeeping, in any way.
- h) the use of horses and other animals with a saddle.

G.5 - Management of the Third Party Liability event

The Company, as long as it has an interest, will manage disputes both in and out of court, both civil and criminal, on behalf of the Insured Party, designating, where necessary, lawyers or technicians, and availing itself of all the rights and actions to which the Insured Party is entitled. The Insured is obliged to cooperate in order to enable the management of these disputes and to appear in person if the procedure so requires. The company is entitled to claim against the Insured the prejudice created through the breach of such obligations. The costs incurred to resist the action of the damaged party against the insured are paid by the Company within the limits of the quarter of the insured amount. However, in case it is damaged due to an excessive insured amount, the procedural costs are distributed between the company and the insured in proportion to their respective interests.

The Company disclaims any expenses incurred by the Contracting Party for legal or technical expertise that is not designated by it, and is not liable for fines or trial expenses.

K. LEGAL PROTECTION

Special definitions

Travel: the journey resulting from the relative contract or travel document including at least one night in Italy and 2 nights abroad.

K.1 – Territorial extension

In case of seeking compensation for damages from unlawful acts of third parties as well as for criminal defence in proceedings for intentional crimes, the insurance extends to the Insurance cases that arise around the world.

However, the coverage of this Policy excludes the extra-judicial expenses and legal assistance for violations of the law or breaching of rights that occurred in countries or regions where acts of war or revolution take place.

K.2 - Purpose of the insurance

The Company, for the management and the settlement of the events incurred in the context of privacy, except as already regulated by Art. "Operation of the policy", under the conditions indicated below and within the ceiling specified in the policy, valid per claim and per insurance year, ensures the Legal Protection, including the related non-recurring expenses of the other party, necessary for the defence of the Insured's interests in and outside court, in the cases indicated in the policy.

LEGAL PROTECTION	Maximum the amount stated is per Event and per insurance Period	Sub-maximum
<p>This item includes the following:</p> <ul style="list-style-type: none">– the expenses for the intervention of the legal person in charge with the management of the claim;– the costs of the mediation established by the Law;– any legal expenses of the counter party, in case of a transaction authorised by the Company– the costs of the intervention of the Technical Consultant, the Party-Appointed Expert and experts in general, provided they agreed with the Company;– the trial costs in criminal proceedings under Article 535 of the Criminal Procedure Code;– the Unified contribution for the costs of judicial acts, if repeated by the other party in the event of an unfavourable outcome;– the expenses related to the enforcement only for the first two attempts experienced by the Insured;– the investigation expenses for the research and the acquisition of exculpatory evidence;– expenses for the investigation aimed at seeking exculpatory evidence and justification of the Insured;– It is guaranteed the intervention of a single legal representative for every court within the territorial jurisdiction pursuant to Art. "Free choice of law".	<p><i>Maximum amount indicated on the policy certificate</i></p>	<p>Expenses for a second process agent only in judicial phase up to € 2,500.00. Recognised only when the Court of Appeal where the legal proceedings take place is different from that of the residence of the Insured; charges related to the recording of judicial documents up to € 500.00.</p>

K.3 - Guaranteed performance

The costs eligible for compensation provided for in this contract are valid **strictly** for the following cases:

1. The action in civil court (or the possible bringing of a civil action in the criminal proceedings) for contractual disputes with a counterparty such as transport companies or hotel facilities.
2. The action in the civil court (or the possible bringing of a civil action in the criminal proceedings) to obtain the compensation for **damage arising from road accidents** in which the insured persons have been involved as pedestrians or as a cyclists or drivers of rental cars equipped with TPL coverage; or finally as passengers of any motor vehicle or vessel;
3. the defence in a criminal court in **proceedings for intentional crimes** related to damage caused to third parties. The guarantee is also valid before the official drafting of the crime report.

K.4 – Exclusions

The Legal Protection insurance guarantee does not recognise the costs incurred by the Insured for:

- 1) the payment of fines, penalties and sanctions in general;
- 2) the tax burden (stamping of documents and records, registration fees of sentences and acts in general, etc.);
- 3) the expenses for disputes arising from the Insured's Contractor or Insured intentional facts;
- 4) the charges for administrative, fiscal and tax disputes;
- 5) the compensated costs for the civil parties made against the Insured in the criminal proceedings, pursuant to Article No. 541 Criminal Code;
- 6) expenses related to non-registered professionals in the relevant professional register where prescribed by law;
- 7) the payment of expenses connected with the execution of the custodial sentences and the custody of things;
- 8) the enforcement operations over two negative outcomes.

The guarantee is not valid for disputes:

- 9) resulting from the movement of vessels subject to compulsory insurance as well as of aircraft owned, leased or conducted by the insured;
- 10) of a contractual nature (such as lease or sale agreements), also against AXA Assistance and AXA Group, except as provided in art. "Guaranteed Benefits";
- 11) relating to events of pollution in the environment, unless it is determined by an accidental fact;
- 12) related to events caused by explosion, emanation of heat, radiation from the atomic nucleus transmutation, radiation caused by the artificial acceleration of the atomic particles;
- 13) for which it is conceivable the professional liability of its legal representative;
- 14) resulting from civil commotion, civil war, terrorism, riots, vandalism, natural disasters (e.g. earthquake, tidal wave, tsunami), strikes and lock-outs;
- 15) relating to family law and inheritance and donations law;
- 16) relating to patent, trademark, copyright, unfair competition, relations between shareholders and directors and disputes arising from the agency agreement;
- 17) amounting to less than € 250.00
- 18) deriving from disputes for debt recovery;
- 19) for disputes concerning contracts and/or subcontracts;
- 20) for property sale and purchase agreements;
- 21) arising from contractual disputes with the company and/or with the Tour Operator/Agency;
- 22) not expressly mentioned among the items of art. "Guaranteed Benefits".
- 23) relating to offences of child pornography or of pornographic nature;
- 24) relating to acts committed while drunk or under the influence of psychoactive drugs and resulting from the use of narcotics and hallucinogens.

K.5 – Insured persons

The Insured mentioned in the policy.

K. 6 – Guarantee operation

The guarantee is provided for disputes that arise during the period of validity of the contract and generated by operative events also occurred during the period of validity of the insurance as follows:

a) after 24.00 hrs. of the day of commencement of the insurance in case of non-contractual liability or for criminal proceedings.

For the purposes of the preceding paragraph, the facts which generated the dispute are deemed occurred in the initial stage of the policy breach or non-performance; where the fact giving rise to the event continues with additional events, the event itself is deemed occurred at the time when the first act was established.

The disputes brought by or against several persons which relate to identical or related questions, are considered in all respects only one event.

In the case of charges against more people insured, and due to the same fact, the event is considered unique in all respects.

If one or more of Legal Protection Insurances on the same risk exist and they are covered by this Agreement, the guarantee provided by the latter operates after the exhaustion of the amount due from other insurance.

K.7- Obligations of the Insured - Accident reporting

In case of an event, the Insured will:

- notify immediately, and no later than 3 days to the Company all the casualties at the time of occurrence and/or when it becomes aware of them. In any case AXA Assistance must be aware about any new act notified to him within three days from the date of the notification and not later than 24 months from the date of occurrence of the dispute.
- In any case he has to send the complaint and any subsequent act notified to him within three days from the date of notification.
- Otherwise, the Insured will be liable for any additional damages that the delay in the complaint may generate.

The complaint of the case must be complete, true and accompanied by appropriate documentation including any form of evidence available and necessary to allow the Company to protect the interests of the Insured

By way of example, the following will have to be provided:

- the identity and contact details of the counter party;
- the details of the dispute with details of the claims/objections and/or of the counter party and the time references of the situation;
- copies of the correspondence between the parties;
- copies of the relevant documents (contracts, invoices, receipts, records, certificates, photographs etc.);
- witness statements accompanied by a copy of the witness's identity document;
- copy of the guarantee information or any other act notified to the Insured.
- Failing this, the Company may not be held liable for any delays in the assessment of the insurance coverage or the case management, as well as any prescriptions or forfeitures which may occur.

K.8 - Free choice of the lawyer

If the case results in the need to establish a judicial proceeding, the Insured must choose a lawyer to which he will entrust the protection of his interests, residing in the same place as the headquarters of the competent Judicial Office for the dispute, notifying IPA about his name, together with the report on the event.

If the Insured does not give such indication, the Company may appoint a lawyer directly.

Where the intervention of a second lawyer is deemed necessary, the Company provides to the mandated lawyer the name of the process agent and he recognises the relative costs for the service.

The insured is not allowed to appoint the lawyer by himself, or the technical advisor, without having received prior permission from the IPA, under penalty of exclusion of the compensation right.

K.9 - Provision of evidence and documents required for the provision of the insurance cover

If the Insured requires the insurance coverage he must:

- a) immediately, fully and truthfully inform IPA about the details of the accident, as well as indicate the evidence and documents and, on request, make them available;
- b) mandate the lawyer in charge of the protection of his interests, subject to the approval received from the IPA, as well as inform him fully and truthfully about all the facts, indicate the evidence, provide all possible information and procure the necessary documents.

K.10 - Management of the event

Having received the report on the event, IPA will assess whether the situation to achieve an amicable settlement of the dispute exists. Where possible, manage/settle the dispute out of court regarding the dispute is reserved to IPA that will use, if necessary, the lawyers of their choice.

If the Insured has already given instructions to the lawyers/experts for the management of the out-of-court phase, the costs incurred will be charged to him.

In case the amicable settlement is not successful, or in cases where it is not possible to experience it, if the Insured's claims prove to be legitimate, the case shall be sent to the lawyer chosen in terms of Art. "Obligations of the Insured - the Accident report" and Art. "Free choice of the lawyer."

The insurance guarantee is also paid for each higher degree of process, both civil and criminal, only if the appeal has chances of success. IPA is not responsible for the work of lawyers, technical advisors of the witnesses and experts in general.

The Insured may not possible establish, directly with the other party, any settlement of the dispute, both out of court and judicial, without the prior approval of the IPA, otherwise he will not receive the reimbursement of the legal and expert costs incurred by him, except as provided by the paragraph below.

In case of conflict of interest or disagreement on the handling of claims between the Insured and the Company, without the Insured's right to judicial proceedings, freely choosing his own lawyer, with no legal fees, the decision can be left as an alternative to a referee who decides on an equitable basis, appointed upon the agreement of the Parties or, failing such agreement, by the President of the competent Court in accordance with the Civil Procedure Code. Each Party contributes with half of the arbitration costs, whatever the outcome of the arbitration.

IPA warns the Insured of its right to make use of this procedure.

K.11 - Recovery of sums

The Insured is entitled to obtain the full compensation and in general the amounts recovered or otherwise paid by the other party under the title of capital and interest.

Instead, AXA Assistance, which has borne or anticipated the fees and expenses paid for the trial or agreed amicably and/or out of court, is entitled to all of them.

3 - IN CASE OF CALL FOR ASSISTANCE

The Insured, or someone acting on his behalf, must immediately contact the Operations Centre, providing personal details of the Insured, the policy number and the type of intervention required, as well as indicating:

- **Assistance and Medical Expenses during Travelling** resulting in hospitalisation
 - Temporary telephone number;
 - Hospital details (*Name and telephone number, ward where admitted, name of the doctor who took care of the patient*);
 - Address of any family members / travelling with the Insured.
- **Home assistance**
 - Home address;
 - Telephone number.
- **Roadside assistance**
 - Identification details of the vehicle;
 - The location and telephone number

4 - IN CASE OF A REFUND REQUEST

Trip cancellation

The claim must be notified by telephone or on line using the website www.trippy.net within midnight (24:00 hours) of the day following the event having caused the cancellation. For details of excess applied to compensation, please refer to Article C.1 – “Travel cancellation all risks” and C.2 “Travel cancellation light”, of the Insurance Conditions.

For each refund request, the Insured or the person acting on his behalf, must report the accident to the Company within 30 days after his return, providing the Company regardless of the way in which the complaint was made (i.e. in writing or via the Internet on the site www.trippy.net) the set of documents relevant to the management of the claim, in particular:

- Policy number;
- Receipt of payment of the trip with the route;
- Personal details and tax code of the recipient of the payment, pursuant to Law No. 248 of 4 August 2006;
- Name and address of the Bank, IBAN, SWIFT code in the case of a foreign bank account;
- Name of account holder if different from the owner of the file;
- Place, date and time of the event and the circumstances and the causes that have determined it.

Also providing:

• Refund of medical expenses:

- medical records written on site (medical records, minutes of first aid, medical certificate stating the diagnosis) and related original receipts of incurred medical expenses.

• Travel accidents:

- place, date and time of the event;
- medical certificates attesting the injury;
- thereafter and until healing has occurred, the medical certificates on the evolution of injuries, in original copy.

N.B.: Also, if the accident caused the death of the Insured or when death occurs during the treatment period, the Company must be notified immediately by submitting the death certificate.

• Flight accident:

- place, date and time of the event;
- official documentation confirming the presence of the Insured on the aircraft;
- medical certificates attesting the injury;
- thereafter and until healing has occurred, the medical certificates on the evolution of injuries, in original copy.

N.B.: Also, if the accident caused the death of the Insured or when death occurs during the treatment period, the Company must be notified immediately by submitting the death certificate.

• Theft, mugging, robbery, burning of baggage:

- complaint, in original copy, submitted to the competent authorities of the place where the event occurred, with a detailed list of the stolen or burned items, and documentation certifying their value;
- in the case of theft, also the copy of the complaint sent to the hotel manager or the carrier who was entrusted with the baggage.

• Late or non-delivery of baggage by the airline carrier

- copy of the PIR report (Property Irregularity Report);
- copy of the air ticket and baggage ticket;
- the airline reply stating the date and time of the delayed delivery or failure to find the baggage, and the amount paid under its jurisdiction;
- detailed list of the not returned or removed objects and documentation demonstrating their value at the time of the event, also the brand, model, approximate date of purchase;
- receipts for the purchase of essential goods, in original, with detailed list of purchases;
- copy of the payment receipt attesting the hiring of buggies pushchairs.

• Flight delay

- copy of the travel pass or the last official press release from the airline regarding the timetable;
- documentation demonstrating the actual boarding time.

N.B.: The air carrier must provide a written certification stating the cause and the actual delay compared to the originally scheduled flight and the possible reimbursement and/or services of the same.

• Trip Cancellation All Risks and Light - Penalty refund

- copy of the documentation objectively proving the cause of the waiver/change;
- in the event of illness or accident, first aid and medical certificate reporting the date of the accident or the onset of the disease, the specific diagnosis and prognosis;
- documentation proving the link between the Insured and any other person who has issued the waiver;
- if hospitalised, complete copy of the medical record;
- copy of the catalogue and/or tour program with its regulation regarding the penalty;
- copy of the travel contract with payment records;
- copy of the booking statement of reservation and penalties issued by the organiser of the trip;
- original travel documents, for the 100% penalty.

- Trip rerouting expenses

- original documentation objectively proving the cause of the waiver/change;
- new travel tickets purchased to reach the intended location of the trip and the relevant amount;
- copy of the travel contract with payment records;
- copy of the account statement issued by the agency organising the trip;
- original unused travel tickets.

- Travel interruption

- copy of the documentation demonstrating the cause of interruption: medical certificate stating the diagnosis, medical records, death certificate;
- copy of the booking statement;
- catalogue and/or travel plans proving the cost of the ground services or statement of the agency organising the trip.
- document confirming the booked services that were not used, with non-refundable costs.

- Third Party Liability - TPL

- written request of the other party with the quantification of the damage.
- any possible testimonials.

- Legal protection

- written notification submitted to the competent authority of the place indicating the circumstances of the event, the approximate amount of the damage, specifying any insurance for the same risk, other than the one concluded with the Company.
- a list of damages with respect to the quality, quantity, value, make and model of the lost or damaged objects, making available the records, accounts, invoices, proof of ownership or other documents which may be required by the company or by the experts for the purposes of their investigations and audits.
- the titles of the trip or stay showing the start and end dates of the trip/stay;
- evidence of forced entry, photographs and repair bills generated by the burglary.
- the documentation listed under the Legal Protection section - "Obligations of the insured and Notification of the event".

5 - IMPORTANT REFERENCES

TRIP CANCELLATION

CLAIM NOTIFICATION 24/7
Phone: + 39 06 42115586
On line: www.tripy.net

ASSISTANCE AND MEDICAL EXPENSES WHILE TRAVELLING

OPERATIONS CENTRE 24/7
Phone + 39 06 42115820

REFUND REQUESTS

Claims must be reported as follows:

- on-line at www.tripy.net

or otherwise

- by mail, send to:

Inter Partner Assistance S.A. - Travel - Ufficio Sinistri

Casella Postale 20175

Via Eroi di Cefalonia

00128 Spinaceto - Roma