



# With Allied World Travel Protector, enjoy comprehensive coverage and travel with complete peace of mind.

See the world to your heart's content, insuring inconveniences such as baggage loss, flight delays, trip cancellation, medical emergencies and more.

#### **Great Features include:**

- Protection for a wide range of activities such as scuba diving, trekking, bungee jumping, hang gliding, tandem parachuting and skiing
- Receive up to \$1,000,000 in Personal Accident benefit on public transport
- Up to \$500,000 in Overseas Medical Expenses
- Coverage for travel cancellation due to insolvency of licensed travel agency
- Includes all types of travel including day trips to Malaysia or Indonesia
- Convenience for purchase of Group policy for multiple individuals
- Full terrorism coverage (including Nuclear, Chemical & Biological means)
- Unlimited emergency medical evacuation and repatriation coverage
- 24-hour FREE world wide emergency assistance
- Passive War Coverage

#### **ABOUT ALLIED WORLD**

Allied World is an international business founded on personal relationships.

Today, we have over 1,400 employees in 20 offices around the world, and we continue to build innovative solutions for individuals, small businesses and large corporations.

We'll take the time to talk, listen and develop long-term relationships. The better we understand your needs, the better we can serve you. We're nimble and responsible, yet large enough to be experienced and financially secure.

## **CONTACTS**

# Allied World Assurance Company, Ltd

60 Anson Road #08-01 Mapletree Anson Singapore 079914 UEN: T09FC0142D

**T**. (65) 6423 0888

**F**. (65) 6423 0798

**E.** sg.customerservice@awac.com www.alliedworldinsurance.com/Singapore

# TRAVEL PROTECTOR PREMIUM TABLE

ASEAN	Brunei, Camb	odia, Indonesia,	Laos, Malaysia,	Myanmar, Philip	ppines, Thailand	and Vietnam
Length of trip (days)	Pla	n 1	Plan 2		Plan 3	
Length of trip (days)	Individual	Family	Individual	Family	Individual	Family
1-3	\$26	\$54	\$33	\$75	\$46	\$99
4-6	\$33	\$72	\$42	\$96	\$58	\$133
7-10	\$41	\$90	\$55	\$119	\$76	\$168
11-14	\$52	\$113	\$69	\$159	\$96	\$221
15-18	\$63	\$137	\$83	\$192	\$116	\$269
19-22	\$75	\$154	\$95	\$230	\$133	\$307
23-27	\$83	\$174	\$105	\$255	\$147	\$340
28-31	\$94	\$188	\$114	\$275	\$160	\$385
Each additional week	\$22	\$43	\$26	\$58	\$37	\$79
Annual Plan	NA	NA	NA	NA	NA	NA

ASIA PACIFIC			lia, Bangladesh, I dives, Mongolia,			g Kong, India, ri Lanka, Taiwan
Longth of twin (days)	Plan 1		Plan 2		Plan 3	
Length of trip (days)	Individual	Family	Individual	Family	Individual	Family
1-3	\$33	\$74	\$43	\$93	\$60	\$130
4-6	\$41	\$99	\$55	\$119	\$76	\$168
7-10	\$51	\$123	\$68	\$149	\$95	\$209
11-14	\$65	\$156	\$86	\$189	\$120	\$264
15-18	\$78	\$172	\$104	\$228	\$145	\$320
19-22	\$89	\$196	\$119	\$262	\$167	\$366
23-27	\$99	\$217	\$131	\$289	\$184	\$405
28-31	\$107	\$234	\$142	\$313	\$199	\$437
Each additional week	\$26	\$53	\$33	\$71	\$45	\$97
Annual Plan	\$266	\$481	\$284	\$512	\$418	\$788

WORLDWIDE		ASEAN and A	sia Pacific count	tries and the res	t of the world	
Longth of this (done)	Pla	n 1	Plan 2		Plan 3	
Length of trip (days)	Individual	Family	Individual	Family	Individual	Family
1-3	\$44	\$97	\$59	\$135	\$82	\$181
4-6	\$62	\$136	\$75	\$165	\$105	\$231
7-10	\$78	\$170	\$89	\$206	\$124	\$274
11-14	\$98	\$214	\$112	\$261	\$158	\$346
15-18	\$118	\$261	\$129	\$300	\$181	\$398
19-22	\$135	\$298	\$147	\$342	\$206	\$455
23-27	\$149	\$329	\$164	\$380	\$228	\$503
28-31	\$162	\$356	\$177	\$410	\$247	\$543
Each additional week	\$33	\$74	\$40	\$98	\$56	\$124
Annual Plan	\$368	\$663	\$392	\$706	\$549	\$989

	MAX	IMUM BENEFITS	s (S\$)
SUMMARY OF BENEFITS	Plan 1	Plan 2	Plan 3
PERSONAL ACCIDENT BENEFITS			
1. Personal Accident			
- Insured Person (under age 75 years)	150,000	250,000	500,000
- Insured Person (from age 75 years to age 80 years) - Insured Child	37,500 75,000	62,500 125,000	125,000 250,000
2. Personal Accident On Public Conveyance			·
- Insured Person (under age 75 years)	300,000	500,000	1,000,000
- Insured Person (from age 75 years to age 80 years) - Insured Child	75,000	125,000 250,000	250,000 500,000
3. Child Education Benefit	150,000	230,000	300,000
Pays for each dependent child as a result of Insured's Death and Permanent Disablement	5,000	5,000	5,000
MEDICAL AND TRAVEL BENEFITS	21000	21000	21000
4. Overseas Medical Expenses			
- Insured Person (under age 75 years)	200,000	500,000	500,000
- Insured Person (from age 75 years to age 80 years)	50,000	125,000	125,000
- Insured Child  5. Post Journey Medical Expenses	100,000	250,000	250,000
- Insured Person (under age 75 years)	10,000	30,000	50,000
- Insured Person (from age 75 years to age 80 years)	2,500	7,500	12,500
- Insured Child	5,000	15,000	25,000
6. Traditional Chinese Medicine and Physician	100	- 222	500
Covers treatment by traditional Chinese Medical Practitioner	100	300	500
7. Hospitalisation Allowance Pays \$250/24 hours for your hospitalisation overseas	10,000	30,000	50,000
8. Post Journey Hospitalisation Allowance	10,000	30,000	30,000
Pays \$100/24 hours for your hospitalisation in Sinagpore	500	1,000	1,000
9. Emergency Medical Evacuation		1,000	.,,,,,
Covers Medical Evacuation expenses	Unlimited	Unlimited	Unlimited
10. Repatriation			
Covers expenses incurred in returning the Insured's mortal remains to Singapore or Home Country	Unlimited	Unlimited	Unlimited
11. Emergency Travel Expenses			
Pays for the visit of any relative or friend if you are hospitalised for more than 5 days	3,000	5,000	10,000
12. Compassionate Visit			
Pays for sending any relative or friend to assist in the repatriation arrangement of the Insured's remains overseas	3,000	5,000	10,000
13. Child Protector			
Pays for sending any relative or friend to accompany the Insured's children following the Insured's hospitalisation	3,000	5,000	10,000
14. Emergency Telephone Charges			
Reimburses for telephone charges incurred during medical emergency	100	100	250
15. Automatic Extension Of Coverage			
Automatic extension up to 30 days due to the Insured's hospitalisation and/or quarantine overseas. Automatic extension up to 14 days if any scheduled Public	Yes	Yes	Yes
Transport in which you are travelling in is being unavoidably delayed			
16. Credit Card Indemnity			
Pays outstanding balance of credit card for expense incurred during the trip in the event of death or permanent disablement during the trip	5,000	5,000	5,000
17. Rehabilitation Counselling			
Reimburses necessary expenses as a result of death or permanent total disablement sustained whilst overseas	2,500	2,500	2,500
TRAVEL INCONVENIENCE BENEFITS			
18. Travel Cancellation			
Covers loss of travel and accommodation expenses prior to the departure from Singapore	5,000	10,000	15,000
19. Travel Postponement And Rearrangement	500	4 000	2.000
Covers additional administrative charges prior to the departure from Singapore  20. Travel Curtailment	500	1,000	2,000
Covers loss of travel and accommodation expenses after the commencement of the trip	5,000	10,000	15,000
Covers loss of traverand accommodation expenses after the commencement of the trip	3,000	10,000	ייייייייייייייייייייייייייייייייייייייי

	MAX	IMUM BENEFITS	(S\$)
SUMMARY OF BENEFITS	Plan 1	Plan 2	Plan 3
TRAVEL INCONVENIENCE BENEFITS			
21. Travel Delay			
Pays \$100 for the first 6 consecutive hours and \$20 for each and every subsequent full hour thereafter	1,000	1,000	1,000
22. Flight Diversion			
Pays \$100 for the first 6 consecutive hours and \$20 for each and every subsequent full hour thereafter	1,000	1,000	1,000
23. Travel Misconnection			
Pays for misconnection of conveyance whilst overseas for at least full 6 consecutive hours	200	200	500
24. Overbooked Flight, Voyage Or Train			
Pays \$100 in the event the insured fails to board the scheduled conveyance whilst overseas due to an overbooking	100	100	100
25. Baggage			
Covers loss or damage sustained overseas to baggage, clothing, personal effects	3,000	5,000	5,000
26. Jewellery Coverage			
Covers the loss of jewellery whilst overseas due to robbery, burglary or theft	250	500	750
27. Delayed Baggage			
Pays \$250 for the first 6 consecutive hours and \$20 for each and every subsequent full hour thereafter	1,000	1,000	1,000
28. Money and Credit Cards			
Covers: - Loss of money due to reported robbery or theft or burglary (max \$300 for loss of money) - Unauthorised charges on stolen credit card	1,000	1,000	1,000
29. Travel Document			
Pays for travel and accommodation expenses incurred for obtaining replacement of essential travel documents whilst overseas	3,000	5,000	5,000
30. Hijack, Kidnap And Detention			
Pays \$250 for each full 24 hours of unlawful seizure	3,000	5,000	10,000
31. Personal Liability			
Covers against liability to third parties or damage to property caused by negligence	500,000	1,000,000	1,000,000
BONUS BENEFITS			
32. Golf Benefit			
- Hole in one	50	150	250
- Loss of use on green fees, hire fees of equipment or tuition fees for coaching	50	150	250
33. Home Protection			
Pays for damage to household contents due to fire or theft	3,000	5,000	5,000
34. Rental Vehicle Excess			
Pays for insurance excess of rental vehicle whilst overseas	250	500	750
35. Pet Care			
Pays \$50 for each full 6 consecutive hours of delay while returning to Singapore resulting in extension of length of stay for Insured's pet in a kennel/cattery/or pet hotel	100	250	500
36. Loss of Use of Entertainment Ticket			
Pays for unused portion of entertainment ticket	100	250	500
37. Quarantine Allowance			
Outside of Singapore (\$50 each day)	No	300	500
38. Quarantine Allowance			
Within Singapore (\$50 each day)	No	300	500
39. Travel Cancellation			
Due to insolvency of licensed travel agent	1,000	3,000	5,000

# **Major Exclusions**

- Pre-existing medical or physical conditions
  On duty in a manual job occupation or flying as an aircrew, cabin crew or tour guide
  Participation in professional sports
  HIV/Aids, childbirth, pregnancy, self-injury, suicide
  Flying other than a fare-paying passenger on a regular scheduled airline or licensed charter aircraft

# TRAVEL PROTECTOR PROPOSAL FORM

Pursuant to Section 25(5) of the Insurance Act (Cap.142), you are to disclose in this Proposal Form, fully & faithfully, all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.

TYPE OF COVERAGE							
Individual	Single Trip		Anr	nual			
Family	Single Trip		Anr	nual	No. of Children:		
Choice of Plan	Plan 1		Plar	12	Plan 3		
TRAVEL REGION							
ASEAN	Asia Pacific		Wo	rldwide	Country(ies) you are travelling to:		
PERIOD OF INSURAN	CE						
Policy Start Date (DD/MM/	YYYY):			Policy End	Date (DD/MM/YYYY)	:	
Duration:					Day.	s (Inclusive of start and e	nd dates)
PREMIUM PAYABLE							
S\$						(No GST	required)
INSURED'S PERSONA	L PARTICU	LARS					
Name as in NRIC/Passport:							
NRIC/Passport No:			Nation	nality:			
Date of Birth (DD/MM/YYY	Y):						
Occupation/Type of Business:							
Correspondence Address:							
Tel (H):		Tel (O):			Mobile:		
Email:							
INSURED TRAVEL PA	RTNER'S PA	RTICULAR	S.		(A	pplicable to family cover	rage only)
Name as in NRIC/Passport:							
NRIC/Passport No:			Natio	nality:			
Date of Birth (DD/MM/YYY	Y):		Gend	er: Male	Female		
Relationship:							

## **DECLARATION**

I/We declare to the best of my/our knowledge and belief that:

- a. all the answers given in this Proposal are true
- b. all material information affecting the assessment of the risk have been disclosed
- c. all persons proposed are residents of Singapore
- d. all persons proposed are in good health, free from any physical defect or infirmity, are not receiving medical treatment of any kind and are not suffering nor have suffered from a recurring illness.

I/We agree that this Proposal and Declaration shall be deemed incorporated in such contract, subject to the Terms and Conditions of the Policy. No insurance will be in force until this Proposal has been accepted by Allied World Assurance Company, Ltd (Singapore Branch).

I/We further declare that I/we are not travelling contrary to the advice of a Medical Practitioner, or for the purpose of obtaining medical treatment. If this Proposal has not been completed by me personally, I declare also that I have read the completed form and accept full responsibility for the answers.

I consent to Allied World Assurance Company, Ltd (Singapore Branch) collecting, using, processing and disclosing my personal data

including disclosing my personal data to Allied World Singapore's outside of Singapore.		
I consent to Allied World sending me marketing, promotional or o	ther messages via tele	phone:
Voice call Text message		
Please note if you decide you no longer wish to receive offers from by submitting a request via our website at www.alliedworldinsura Protection Officer via sg.customerservice@awac.com or at (65) 64	nce.com/Singapore. F	
Signature of Proposer/Authorised Representative		Date
PAYMENT INSTRUCTION		
BY CREDIT CARD Please charge S\$:		to my Visa/MasterCard
Card No:	CVV2 No.:	(last 3 digits behind Credit Card)
Name of Issuing Bank:		Expiry Date:
(If the Proposer is not the Cardholder, the Cardholder has to fully complet	e and sign this portion of	
(If the Proposer is not the Cardholder, the Cardholder has to fully complete Name of Cardholder:	e and sign this portion of	
	e and sign this portion of	f the form.)
	e and sign this portion of	f the form.)
Name of Cardholder:	d Assurance Company	(if different from insured)  (as on your credit card)  (A Ltd (Singapore Branch) to charge the
Name of Cardholder:  Signature:  I/We agree to pay the premium and hereby authorise Allied Worlstate premium to the above credit card/bank account. Where a the	d Assurance Company ird party credit card is	(if different from insured)  (as on your credit card)  (b), Ltd (Singapore Branch) to charge the sused, I/we declare that the Cardholder has
Name of Cardholder:  Signature:  I/We agree to pay the premium and hereby authorise Allied Worl state premium to the above credit card/bank account. Where a thauthorised and consented to its use.  I/We understand and agree that in the event of refund from the Consented to the c	d Assurance Company ird party credit card is	(if different from insured)  (as on your credit card)  (b), Ltd (Singapore Branch) to charge the sused, I/we declare that the Cardholder has
Name of Cardholder:  Signature:  I/We agree to pay the premium and hereby authorise Allied Worl state premium to the above credit card/bank account. Where a thauthorised and consented to its use.  I/We understand and agree that in the event of refund from the Cothe Policy.	d Assurance Company ird party credit card is	(if different from insured)  (as on your credit card)  (b), Ltd (Singapore Branch) to charge the sused, I/we declare that the Cardholder has
Name of Cardholder:  I/We agree to pay the premium and hereby authorise Allied Worl state premium to the above credit card/bank account. Where a thauthorised and consented to its use.  I/We understand and agree that in the event of refund from the Cothe Policy.  BY CHEQUE	d Assurance Company ird party credit card is ompany, payment will	(if different from insured)  (as on your credit card)  (A. Ltd (Singapore Branch) to charge the sused, I/we declare that the Cardholder has  I be made to the Insured/Policyholder stated in
Name of Cardholder:  Signature:  I/We agree to pay the premium and hereby authorise Allied Worlstate premium to the above credit card/bank account. Where a thauthorised and consented to its use.  I/We understand and agree that in the event of refund from the Cothe Policy.  BY CHEQUE  I enclose my Cheque / Bank No.:	d Assurance Company ird party credit card is ompany, payment will	(if different from insured)  (as on your credit card)  (A. Ltd (Singapore Branch) to charge the sused, I/we declare that the Cardholder has  I be made to the Insured/Policyholder stated in



alliedworldinsurance.com/Singapore