

# Certificate of Insurance and Statement Of Service

HSBC Premier World Elite Mastercard®, HSBC Metal World Elite Mastercard®  
and HSBC World Elite Mastercard® Cardholders

## DEFINITIONS

Throughout this document, all capitalized terms have the specific meaning provided below:

**Accident** means a sudden, unexpected and unforeseeable cause of injury from an external source.

**Accidental Bodily Injury** means bodily injury caused by an Accident that:

1. occurs while the insurance evidenced by this Certificate of Insurance is in force;
2. results directly in any of the losses to which the insurance applies within 365 days after the date of the Accident; and
3. independent of any disease, bodily infirmity, bodily malfunction or any other cause.

**Accidental Damage** means damage caused by an unexpected and unintentional external event such as drops, cracks, and spills that occur during normal daily usage of a Mobile Device as the manufacturer intended.

**Account** means the Primary Cardholder's HSBC Mastercard Account which is in Good Standing with the Policyholder.

**Administrator** means the Insurer and/or the service provider(s) arranged by the Insurer to provide claims payment and administrative services under the Policy.

**Cardholder** means the Primary Cardholder and any supplemental Cardholder, who is a natural person, resident in Canada and who is also issued an HSBC Mastercard and whose name is embossed on the card. Cardholder may also be referred to herein using "You" and "Your."

**Car Sharing** means a vehicle rental club which gives its members 24-hour access to its own fleet of vehicles parked in a convenient location and does not include agencies or online marketplace services which facilitate the rental of privately-owned vehicles, or other similar services.

**Check-In** means the moment the Cardholder registers at the Hotel/Motel.

**Check-Out** means the moment the Cardholder vacates the Hotel/Motel room.

**Common Carrier** means any land, air or water conveyance, which is licensed to carry passengers without discrimination and for hire, excluding courtesy transportation provided without a specific charge.

**Dependent Child** means Your unmarried natural, adopted or step-children who are dependent on You for maintenance and support and who are either:

1. under 21 years of age; or
2. 21 years of age or over and
  - a) mentally or physically challenged and incapable of self-support; or
  - b) in full-time attendance at a governmentally accredited or recognized institution of higher learning and not have reached the age of 26.

**Dollars** and "\$" means Canadian dollars.

**Eligible Expenses** mean charges for any of the following travel arrangements which have been booked or reserved prior to Trip departure:

1. cost of transportation by a Common Carrier;
2. cost of hotel or similar accommodations; and
3. cost of a package tour which has been sold as a unit and includes at least two of the following:
  - a) transportation by a Common Carrier;
  - b) car rental;
  - c) hotel or similar accommodation;
  - d) meals;
  - e) tickets or passes for sporting events or other entertainment, exhibition or comparable event; or
  - f) lessons or the services of a guide.

**Emergency Medical Treatment** means treatment necessary for the immediate relief of a Medical Emergency.

**Essential Items** mean the minimum essential clothing and toiletries, the purchase of which is rendered absolutely necessary and indispensable due to the delay of an Insured Person's checked luggage.

**Full Cost** means the entire cost of an item of personal property or fare for travel (including taxes) and does not include any reduced cost resulting from the redemption of store credits, gift cards, or reward points programs, with the exception of HSBC Rewards Program.

**GHIP** means the government health insurance plan of an Insured Person's province or territory of residence in Canada.

**Good Standing** means, with respect to an Account, that the primary Cardholder has not advised the Policyholder to close it, it is in compliance with all terms of the Cardholder Agreement and the Policyholder has not suspended or revoked credit privileges or otherwise closed the Account.

**Grey Market Products** means legitimate/original products sold through non-authorized distribution channels including, but not limited to, websites and brick-and-mortar retail or wholesale locations.

**Hospital** means an institution which is licensed to provide, on an inpatient basis, medical care and treatment of sick and injured persons through medical, diagnostic and major surgical facilities, under the supervision of a staff of Physicians and with 24-hour-a-day service. Hospital does not include any institution or part of an institution which is licensed or used principally as a clinic, a continued care or extended care facility, a convalescent home, a rest home, a nursing home or home for the aged, a health spa or a treatment centre for drug addiction or alcoholism.

**Hotel/Motel** means an establishment that provides lodging for the general public, and usually meals, entertainment, and various personal services. Hotel/Motel does not include a privately-owned residence offered for rental through an online marketplace service, or other similar online service.

**Household Member** means a spouse, parents, stepparents, grandparents, grandchildren, in-laws, natural or adopted children, stepchildren, siblings, and step-siblings whose permanent residence and address is the same as the Cardholder.

**HSBC Mastercard** means an HSBC Premier World Elite Mastercard and/or an HSBC Metal World Elite Mastercard and/or an HSBC World Elite Mastercard issued by the Policyholder.

**HSBC Rewards Program** means a Rewards program made available to eligible Cardholders by the Policyholder.

**Immediate Family Member** means the Cardholder's Spouse, child, parent, parent-in-law, or sibling.

**Immediate Relative** means the Primary Cardholder's Spouse, child, step-child, child-in-law, parent, step-parent, parent-in-law, sibling, step-sibling, sibling-in-law, grandparent, step-grandparent, grandchild, or step-grandchild.

**Insured Person** means a Cardholder and certain other eligible persons, as specified under the applicable coverage.

**Medical Condition** means any illness, injury or symptom, whether diagnosed or not.

**Medical Emergency** means any unforeseen illness or Accidental Bodily Injury which occurs during a Trip and requires immediate medical care or treatment from a Physician. A Medical Emergency ends when the illness or Accidental Bodily Injury has been treated such that the Insured Person's condition has stabilized. Treatment provided, when medical evidence indicates that an Insured Person could delay treatment or return to Canada for such treatment, is not considered a Medical Emergency and is not covered.

**Mobile Device** means a new or, if purchased directly from an original equipment manufacturer or Provider, a refurbished cellular phone, smartphone or tablet (portable single-panel touchscreen computer), which has Internet-based and/or wireless communication capabilities, and which has not been purchased by a business and/or used for business or for commercial purposes.

**Mysterious Disappearance** means an article of personal property cannot be located and the circumstances of its disappearance cannot be explained or do not lend themselves to a reasonable inference that a theft occurred.

**Occupying** means in or upon or entering into or alighting from.

**Original Manufacturer's Warranty** means an express written warranty valid in Canada and issued by the original manufacturer of personal property, excluding any extended warranty offered by the manufacturer or any third party.

**Other Insurance/Protection** means all other insurance, indemnity, warranty, or protection that is available to the Cardholder in respect of a loss subject to a claim under this Certificate of Insurance and includes group and individual insurance (including home insurance and renter's insurance), credit card coverage (whether group or individual), manufacturer or retailer product protection plans and extended warranties, and any other similar insurance, protection or reimbursement plans.

**Physician** means a Physician or surgeon who is registered or licensed to practice medicine in the jurisdiction where the medical treatment or service is provided, and who is not related by blood or marriage to the Insured Person to whom the service is rendered.

**Plan** means a fixed-term contract offered by a Provider.

**Purchase Price** means the Total Cost paid and charged to the Account if purchasing the Mobile Device outright, or the Total Cost the Cardholder will pay if funding the purchase of a Mobile Device through a Plan.

**Pre-existing Condition** means any Medical Condition for which symptoms appeared or for which an Insured Person sought the attention of a Physician, had investigated, diagnosed, treated, had treatment or further investigation recommended or for which medication was prescribed or altered, in the case where the Insured Person is under 65 years of age, in the 180 days prior to the Trip departure date, and in the case where the Insured Person is 65 years of age or older, in the 365 days prior to the Trip departure date. A Pre-existing Condition does not include a Medical Condition which is controlled by the consistent use of medications prescribed by a Physician, provided that, during the 180-day period or 365-day period, as applicable, before the Insured Person's departure, there has been no other treatment or investigation recommended and there has been no change in medication. A new medication or increase/decrease in dosage constitutes a change.

**Primary Cardholder** means the principal applicant for an Account who is a natural person, resident in Canada, and to whom the Policyholder has issued an HSBC Mastercard.

**Provider** means Canadian wireless service provider.

**Reasonable and Customary Charges** mean charges which do not exceed the general level of charges made by other providers of similar standing in the locality or geographical area where the charges are incurred, when furnishing comparable treatment, services or supplies for a similar Medical Emergency.

**Rental Agency(ies)** means an auto Rental Agency registered or licensed to rent vehicles. For greater certainty, the term Rental Agency refers to traditional auto Rental Agencies and Car Sharing programs. Rental Agency does not include agencies or online marketplace services which facilitate the rental of

privately-owned vehicles, or other similar services.

**Rescheduling Expenses** means the additional charges associated with Eligible Expenses, including administrative and change fees, which result from rescheduling a Trip prior to departure, and which have been charged to Your Account.

**Spouse** means the person who is lawfully married to the Cardholder, or the person who is living with the Cardholder for a continuous period of at least one year and who is publicly represented as the Cardholder's spouse.

**Ticket** means evidence of fare paid for travel on a Common Carrier, which has been charged in full to the Account.

**Total Cost** means the cost of a Mobile Device, including any applicable taxes, and less any Trade-In Credit(s) and costs for fees associated with the Mobile Device purchased such as insurance premiums, customs duty, delivery and transportation costs, or similar costs and fees.

**Trade-In Credit(s)** means an in-store credit or certificate issued by a retailer or Provider to the Cardholder when the Cardholder trades-in an old mobile device.

**Travel Companion** means a person booked to travel with You and/or Your Spouse on a Trip, and who has prepaid accommodations and/or transportation arrangements for the same Trip.

**Trip** means a scheduled period of time during which an Insured Person is away from their province or territory of residence in Canada.

### **Certificate of Insurance**

Amended and Restated Effective February 1, 2023  
Master Policies: HSBC0617 and HSBC0617

#### **IMPORTANT NOTICE - READ CAREFULLY BEFORE YOU TRAVEL**

Your credit card includes travel coverage – what's next?

We want You to understand (and it is in Your best interest to know) what Your Certificate of Insurance includes, what it excludes, and what is limited (payable but with limits). Please take time to read through Your Certificate of Insurance before You travel. Capitalized terms are defined in the Definitions section on page 1.

- Travel insurance covers claims arising from sudden and unexpected situations (i.e.: accidents and emergencies).
- To qualify for this insurance, You must meet all the eligibility requirements.
- This insurance contains limitations and exclusions (e.g.: Medical Conditions that are not stable, Trip commenced against the advice of a Physician, pregnancy, child born on trip, high risk activities, etc.).
- This insurance may not cover claims related to Pre-Existing Conditions, whether disclosed or not.
- Contact the Insurer before seeking Emergency Medical Treatment or Your benefits may be limited or denied.
- In the event of a claim, Your prior medical history may be reviewed.

**IT IS YOUR RESPONSIBILITY TO UNDERSTAND YOUR COVERAGE. IF YOU HAVE QUESTIONS, CALL 1-800-668-8680.**

**This Certificate of Insurance contains clauses which may limit the amount payable. Additionally, this Certificate of Insurance contains provisions removing or restricting the right of the Insured Person to designate persons to whom or for whose benefit insurance money is payable.**

This Certificate of Insurance contains information about Your insurance. Please read it carefully and keep it in a safe place. You should carry this Certificate of Insurance with You when You travel. Refer to the Definitions section on page 1 and the paragraph following this one for the meaning of all capitalized terms.

Purchase Assurance, Extended Warranty, Mobile Device, Car Rental Collision/Loss Damage, Personal Effects, Hotel/Motel Burglary, Trip Cancellation, Trip Interruption/Delay, Flight Delay, and Baggage Delay or Loss Insurance are insurance coverages underwritten by American Bankers Insurance Company of Florida; and Common Carrier Accidental Death/Dismemberment, Car Rental Accidental Death/Dismemberment, and Emergency Travel Medical Insurance are insurance coverages underwritten by American Bankers Life Assurance Company of Florida (hereinafter collectively referred to as "Insurer") under Master Policy numbers HSBC0617 and HSBC0617 (hereinafter collectively referred to as the "Policy") issued by the Insurer to HSBC Bank Canada (hereinafter called the "Policyholder").

Claim payments and administrative services under the Policy are arranged by the Insurer.

The terms, conditions and provisions of the Policy are summarized in the Certificate of Insurance, which is incorporated into and forms part of the Policy. All benefits are subject in every respect to the Policy, which alone constitutes the agreement under which benefits will be provided. You, or a person making a claim under the Certificate of Insurance, may request a copy of the Policy and/or a copy of Your application for this insurance (if applicable) by writing to the Insurer at the address shown below.

In no event will a corporation, partnership or business entity be eligible for the insurance coverage provided by the Certificate of Insurance.

American Bankers Insurance Company of Florida and American Bankers Life Assurance Company of Florida – Canadian head office is located at 5000 Yonge Street, Suite 2000, Toronto, Ontario, M2N 7E9.

## **PURCHASE ASSURANCE AND EXTENDED WARRANTY INSURANCE**

Purchase Assurance and Extended Warranty Insurance are available only to the Cardholder. No other person or entity shall have any right, remedy or claim, legal or equitable, to the benefits.

**There is a lifetime maximum benefit of \$60,000 per Account.**

### **Purchase Assurance**

#### **Benefits**

Purchase Assurance coverage automatically protects most new personal items purchased anywhere in the world for 90 days from the date of purchase in the event of loss, damage or theft when the Full Cost of such items is charged to the Account, subject to the Limitations and Exclusions below.

If a covered item is lost, stolen or damaged, upon approval and as directed by the Administrator, You can proceed with the repair or replacement of the covered item. You will then be reimbursed the repair or replacement cost, not exceeding the covered item's original price charged to the Account, subject to the terms, exclusions, limitations, and limits of liability set out in this Certificate of Insurance.

Reimbursement will be issued upon the Administrator receiving evidence that the covered item was repaired or replaced, and the cost of repair or replacement has been charged to the Account. If replacing the covered item, the replacement MUST be an identical item. If an identical item is not readily available, the replacement item must be of like kind and quality with comparable features as the original covered item.

Under certain circumstances, the Administrator may, at their sole discretion, choose to reimburse You the covered item's original price charged to the Account.

#### **Limitations and Exclusions**

Purchase Assurance benefits are not available in respect of the following:

1. traveller's cheques, cash (whether paper or coin), bullion, precious metals, tickets, documents, stamps, negotiable instruments or property of a similar nature
2. animals or living plants;
3. golf balls or other sports equipment lost or damaged during the course of normal use;
4. mail order, Internet, telephone purchases or any purchase being shipped until delivered and accepted by You in new and undamaged condition;
5. services, including delivery and transportation costs of items purchased;
6. automobiles, motorboats, airplanes, motorcycles, motor scooters, e-bikes, snowblowers, riding lawn mowers, golf carts, lawn tractors, any other motorized vehicles (except for miniature electrically powered vehicles intended for recreational use by children), or any of their respective parts or accessories that do not function independently from the motorized vehicle;
7. unmanned or remotely operated aircraft systems such as, but not limited to, drones;
8. any consumable good such as, but not limited to, food, liquor, cosmetics, fragrances, and in-home test kits (whether medically necessary or not);
9. jewellery and gems stored in baggage unless such baggage is hand carried under the personal supervision of the Cardholder or the Cardholder's Travelling Companion with the Cardholder's knowledge;
10. used or previously owned or refurbished items;
11. one-of-a-kind items, antiques, collectibles and fine arts; or
12. items purchased and/or used by or for a business or for commercial gain.

Purchase Assurance does not provide benefits for:

1. losses caused by or resulting from fraud, misuse or lack of care, improper installation, hostilities of any kind (including war, terrorism, invasion, rebellion or insurrection), confiscation by authorities, risks of contraband, illegal activities, normal wear and tear, flood, earthquake, radioactive contamination, Mysterious Disappearance, or product defects which would not have been covered by the Original Manufacturer's Warranty; or
2. bodily injury, property damage, consequential damages, punitive damages, exemplary damages and legal fees.

Purchase Assurance is not shipping insurance. Items ordered by mail, internet, telephone, or any purchased item being shipped to You is not eligible for coverage under Purchase Assurance until delivered and accepted by You in new and undamaged condition.

### **Extended Warranty**

#### **Benefits**

Extended Warranty coverage automatically and without registration, provides You with double the period of repair services otherwise provided by the Original Manufacturer's Warranty, to a maximum of 1 additional year, on most personal items purchased new when the Full Cost of such items is charged to the Account, subject to the Limitations and Exclusions below.

In all cases, Extended Warranty coverage is limited to personal items with an Original Manufacturer's Warranty of 5 years or less.

Extended Warranty coverage applies to any parts and/or labour costs resulting from mechanical breakdown or failure of a covered item where such obligation was specifically covered under the terms of the Original Manufacturer's Warranty.

Upon approval, and as directed by the Administrator, You can proceed with the repair or replacement of the covered item. You will then be reimbursed the repair or replacement cost, not exceeding the covered item's original price charged to the Account, subject to the terms, exclusion, limitations, and limits of liability set out in this Certificate of Insurance.

Reimbursement will be issued upon the Administrator receiving evidence that the covered item was repaired or replaced, and the cost of repair or replacement has been charged to the Account. If replacing the covered item, the replacement MUST be an identical item. If an identical item is not readily available, the replacement item must be of like kind and quality with comparable features as the original covered item.

Under certain circumstances, the Administrator may, at their sole discretion, choose to reimburse You the covered item's original price charged to the Account.

### **Limitations and Exclusions**

Extended Warranty coverage ends automatically upon the date when the original manufacturer ceases to carry on business for any reason whatsoever.

Extended Warranty does not cover the following:

1. aircraft (including unmanned aircraft systems such as, but not limited to, drones), automobiles, motorboats, e-bikes, motorcycles, motorscooters, snowblowers, snowmobiles, riding lawn mowers, golf carts, lawn tractors, or any other motorized vehicles (except for miniature electrically powered vehicles intended for recreational use by children), or any of their respective parts or accessories;
2. services of any kind;
3. items purchased and/or used by or for a business or for commercial gain; or
4. used or refurbished items.

Extended Warranty does not provide benefits for:

1. losses caused by or resulting from fraud, misuse or lack of care, improper installation, hostilities of any kind (including war, invasion, rebellion or insurrection), confiscation by authorities, risks of contraband, illegal activities, normal wear and tear, flood, earthquake, radioactive contamination;
2. product defects which would not have been covered by the Original Manufacturer's Warranty; or
3. bodily injury, property damages, consequential damages, punitive damages, exemplary damages and legal fees.

### **General Provisions for Purchase Assurance and Extended Warranty Insurance**

#### **Gifts**

Eligible items that You give as gifts are covered. In the event of a claim, You, not the recipient of the gift, must make the claim for benefits.

#### **Pair or Set**

When the covered item is part of a pair or set, You will receive no more than the value of the particular part or parts lost or damaged regardless of any special value that the item may have as part of an aggregate purchase price of such pair or set. The Insurer, at its sole option, may elect to:

1. repair, rebuild or replace the item lost or damaged (whether wholly or in part); or
2. pay You for said item, not exceeding the lesser of the original purchase price, the replacement price or the repair cost thereof and subject to the exclusions, terms and limits of liability as stated in this Certificate of Insurance.

#### **Other Insurance/Protection**

Benefits are in excess of all Other Insurance/Protection available to You in respect of the covered item subject of the claim. Once all Other Insurance/Protection has been claimed under and exhausted, the Insurer's liability is only for the amount of the loss or damage not covered by Other Insurance/Protection and for the amount of any applicable deductible, subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance.

This coverage will not apply as contributing insurance, notwithstanding any provision in any Other Insurance/Protection.

#### **How to Claim**

Immediately after learning of any loss or occurrence and PRIOR to proceeding with any action, repair services, or replacement of the covered item, You must notify the Administrator by initiating a claim online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com) or calling 1-800-668-8680 from Canada and the United States or 416-977-6066 collect from elsewhere in the world.

You MUST keep ORIGINAL copies of all documents required to file a valid claim. Where a claim is due to, or suspected to be caused by, fraud, malicious acts, burglary, robbery, theft or attempt thereat, You MUST give immediate notice to the police or other authorities having jurisdiction.

You must complete and sign the claim form which must contain the time, place, cause and amount of loss, and include the following:

1. Account statement showing Your name, account number, and charge for the covered item;
2. original vendor's sales receipt showing the vendor information, date, description of the item purchased, and total cost;
3. copy of written repair estimate (for Purchase Assurance damage and Extended Warranty claims);
4. photographs of the damaged item (for Purchase Assurance damage claims);
5. copy of the police report (for Purchase Assurance theft claims);
6. a copy of the Original Manufacturer's Warranty (for Extended Warranty Claims);
7. copy of a loss report or other report from the location of the occurrence, issued at the location where the covered item was lost, stolen, or damaged (for Purchase Assurance claims);
8. copy of Your homeowner's or renter's insurance policy or any document detailing Other Insurance/Protection or protection and/or reimbursements received for the occurrence;
9. any other information reasonably required by the Administrator.

**You are responsible for any charges incurred for the completion of all forms and the provision of all required documentation.**

At the sole discretion of the Administrator, You may be required to send, at your own expense, the damaged item on which a claim is based to the Administrator in order to support Your claim. Payment made in good faith will discharge the Administrator to the extent of the claim. Your failure to provide proof of loss within 90 days from the date of loss or damage may result in denial of the related claim.

## MOBILE DEVICE INSURANCE

### Eligibility

You are eligible for Mobile Device Insurance when You purchase a Mobile Device anywhere in the world, and You:

1. charge the Total Cost to Your Account. If the Mobile Device is equipped with cellular data technology, You must also activate Your Mobile Device with a Provider; or
2. charge any portion of the Total Cost that is required to be paid up-front to Your Account, fund the balance of the Total Cost through a Plan, and charge all monthly wireless bill payments to Your Account for the duration of Your Plan; or
3. fund the Total Cost through a Plan and charge all the monthly wireless bill payments to Your Account for the duration of the Plan.

### Coverage Period

Mobile Device coverage takes effect on the later of:

1. 30 days from the date of purchase of Your Mobile Device; and
2. the date the first monthly wireless bill payment is charged to Your Account.

Mobile Device coverage ends on the earliest of:

1. two years from the date of purchase;
2. the date ONE monthly wireless bill payment was not charged to Your Account, if You are funding the Total Cost of Your Mobile Device through a Plan;
3. the date the Account ceases to be in Good Standing; and
4. the date You cease to be eligible for coverage.

### Benefits

If a Mobile Device is lost, stolen or suffers mechanical breakdown or Accidental Damage, upon approval, and as directed, by the Administrator, You can proceed with the repair or replacement of Your Mobile Device. You will then be reimbursed the repair or replacement cost, not exceeding the depreciated value<sup>†</sup> of Your Mobile Device at date of loss, less the deductible<sup>††</sup>, to a maximum of \$1,000, subject to the terms, exclusions, and limitations set out in this Certificate of Insurance.

Reimbursement will be issued only upon the Administrator receiving evidence that the Mobile Device was repaired or replaced, and the cost of repair or replacement has been charged to the Account. A replacement Mobile Device must be of the same make and model as the original Mobile Device, or in the event the same make and model is not available, of like kind and quality with comparable features and functionality as the original Mobile Device.

<sup>†</sup> The depreciated value of Your Mobile Device at date of loss is calculated by deducting from the Purchase Price of Your Mobile Device, the depreciation rate of 2% for each completed month from the date of purchase.

<sup>††</sup> The amount of the deductible is based on the Total Cost of Your Mobile Device less any applicable taxes, as determined from the following table:

Total Cost (Less Taxes)	Applicable Deductible
\$0 – \$200	\$25
\$200.01– \$400	\$50
\$400.01 – \$600	\$75
\$600.01 or more	\$100

For example: If You purchase a Mobile Device for a Purchase Price of \$800 (\$700 + \$100 in applicable taxes) on May 1, and file a claim on January 21 of the following year, the maximum reimbursement will be calculated as follows:

1. Calculation of the depreciated value of Your Mobile Device:

Purchase Price	\$800
Less depreciation cost 2% x 8 months x \$800 =	<u>- \$128</u>
<b>Depreciated value</b>	<b>\$672</b>

2. Calculation of the maximum reimbursement:

Depreciated value	\$672
Less deductible (based on Total Cost)	<u>- \$100</u>
<b>Maximum reimbursement</b>	<b>\$572</b>

In the event You file a valid repair claim and the cost of repair is \$500, including applicable taxes, upon approval of Your claim, the maximum reimbursement available to You will be \$500.

In the event Your Mobile Device is lost or stolen and, upon approval of Your claim, You purchase a replacement Mobile Device for a price of \$800 including applicable taxes, the maximum reimbursement available to You will be \$572.

All claims are subject to the terms, conditions, exclusions, and limitations set out in this Certificate of Insurance.

### Limitations and Exclusions

This coverage complements but does not replace the manufacturer's warranty or warranty obligations. This coverage does, however, provide certain additional benefits for which the manufacturer may not provide coverage. Parts and services covered by the manufacturer's warranty and warranty obligations are the responsibility of the manufacturer only.

The maximum number of claims under Your Account is limited to one claim in any 12 consecutive month period and two claims in any 48 consecutive month period.

Mobile Device Insurance does not cover:

1. accessories, whether included with Your Mobile Device in the original manufacturer's package or purchased separately;
2. batteries;
3. Mobile Devices purchased for resale, professional or commercial use;
4. used or previously owned Mobile Devices;
5. refurbished Mobile Devices (unless provided as a replacement for Your Mobile Device under the manufacturer's warranty or purchased directly from an original equipment manufacturer or Canadian Provider);
6. Mobile Devices that have been modified from their original state;
7. Mobile Devices being shipped, until received and accepted by You in new and undamaged condition; or
8. Mobile Devices stolen from baggage unless such baggage is hand-carried under the personal supervision of the Cardholder or the Cardholder's travelling companion with the Cardholder's knowledge.

No benefits are payable for:

1. losses or damage resulting directly or indirectly from:
  - a) fraud, misuse or lack of care, improper installation, hostilities of any kind (including war, invasion, rebellion or insurrection), confiscation by authorities, risks of contraband, illegal activities, normal wear and tear, flood, earthquake, radioactive contamination, Mysterious Disappearance or product defects which would not have been covered by the Original Manufacturer's Warranty;
  - b) power surges, artificially generated electrical currents or electrical irregularities;
  - c) any occurrence that results in catastrophic damage beyond repair, such as the device separating into multiple pieces;
  - d) cosmetic damage that does not affect functionality;
  - e) software, cellular/wireless service provider or network issues; or
  - f) theft or intentional or criminal acts by the Cardholder or Household Members; and
2. incidental and consequential damages including bodily injury, loss of use, property, punitive and exemplary damages and legal fees.

#### **How to Claim**

PRIOR to proceeding with any action or repair services or replacement of the Mobile Device, You must first obtain the Administrator's approval. Failure to do so will make Your claim ineligible.

Immediately after a loss or an occurrence which may lead to a loss covered under Mobile Device Insurance occurs, but in no event later than 30 days from the date of loss, You must notify the Administrator by initiating a claim online at [cardbenefits.assurant.com](https://cardbenefits.assurant.com) or by calling 1-800-668-8680.

In the event of loss or theft, You must notify Your Provider to suspend Your wireless services within 48 hours of the date of loss. In addition, in the event of theft, You must also notify the police within seven days of the date of loss.

You must submit a completed claim form containing the time, place, cause and amount of loss, and provide documentation to substantiate Your claim including:

1. the original sales receipt or similar document detailing the date of purchase, description of Your Mobile Device, and any pay upfront amounts and trade-in credits;
2. a copy of your Wireless Service Agreement or similar document indicating the date, a description of Your Mobile Device and the non-subsidized retail cost of Your Mobile Device;
3. the date and time you notified Your Provider of loss or theft;
4. a copy of the original manufacturer's warranty (for mechanical failure claims) may be required;
5. a copy of the written repair estimate (for mechanical failure and Accidental Damage claims). You must obtain a written estimate of the cost to repair Your Mobile Device by a repair facility authorized by the original Mobile Device manufacturer;
6. if You purchased Your Mobile Device outright, Your Account statement showing the Purchase Price;
7. if Your Mobile Device was funded through a Plan, Your Account statement showing any portion of the Total Cost paid up-front, if applicable, and Your Account statements for up to 12 months immediately preceding the date of loss showing Your monthly wireless bill charged to Your Account;
8. a copy of any document detailing any Other Insurance/Protection or protection and reimbursements received for this occurrence;
9. a police report, fire loss report, or other report of the occurrence, from the location where Your Mobile Device was lost, stolen, or damaged;
10. any other information reasonably required by the Administrator.

At the sole discretion of the Administrator, You may be required to send the damaged Mobile Device which a claim is based on, to the Administrator, at Your own expense, in order to support Your claim.

### **CAR RENTAL INSURANCE**

Car Rental Insurance includes Car Rental Collision/Loss Damage Insurance, Personal Effects Insurance, and Car Rental Accidental Death and Dismemberment Insurance as outlined below.

Car Rental Insurance is only available when You charge at least 75% of the cost of a vehicle rental to the Account and/or pay such costs with points redeemed under the HSBC Rewards Program.

#### **Car Rental Collision/Loss Damage Insurance**

For this coverage, Insured Person means the Cardholder.

#### **Eligibility**

You are eligible for Car Rental Collision/Loss Damage Insurance when You rent most passenger vehicles from a Rental Agency on a daily or weekly

basis for a period NOT to exceed 31 consecutive days, provided that:

1. You initiate the rental transaction by booking or reserving the vehicle rental with Your HSBC Mastercard and by providing Your HSBC Mastercard as payment guarantee prior to the time You take possession of the vehicle;
2. You decline the Rental Agency's collision damage waiver (CDW) or loss damage waiver (LDW), or similar provision; and
3. You rent the vehicle in Your name and charge at least 75% of the cost of the vehicle rental to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

Rental vehicles which are part of a Car Sharing program are eligible for coverage provided all eligibility requirements are met. Rental vehicles which are part of pre-paid travel packages are eligible for coverage if at least 75% of the total cost of the travel package was charged to the Account and all other requirements are met.

"Free Rentals" are also eligible for benefits when received as the result of a promotion conditioned on Your making previous vehicle rentals, if each such previous rental met the eligibility requirements of this Certificate of Insurance.

***The length of time You rent a vehicle under this insurance must not exceed 31 consecutive days, which includes instances where You are renting one vehicle immediately after the other. If the rental period exceeds 31 consecutive days, coverage even for the first 31 days will not be provided.***

#### **Benefits**

Subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance, You are provided with the same protection against losses arising from the contractual liability assumed when renting and operating a rental vehicle as You would have if You accepted the Rental Agency's collision or loss damage waiver (or similar provision) up to the actual cash value of the damaged or stolen rental vehicle as well as any reasonable, valid and documented loss of use, reasonable and customary towing charges and administration charges resulting from damage or theft occurring while the rental vehicle is rented in Your name. Coverage is limited to one vehicle rental during any one period. If, during the same period, more than one vehicle is rented by the Cardholder, only the first rental will be eligible for coverage.

In some jurisdictions the law requires that Rental Agencies include CDW/LDW in the price of the vehicle rental. In these locations, Car Rental Collision/Loss Damage Waiver Insurance under the Policy will only provide coverage for any deductible that may apply, provided all the requirements outlined in this Certificate of Insurance have been met and You have waived the Rental Agency's deductible waiver. No CDW/LDW premiums charged by the Rental Agencies will be reimbursed under the Policy. This coverage is available on a 24-hour basis anywhere in the world, except where prohibited by law, or where the coverage is in violation of the terms of the rental contract in the jurisdiction in which it was formed. (See the section "**Know Before You Go**" for tips on how to avoid having use of this coverage challenged.)

**This coverage does not provide any form of third-party automobile property damage or personal injury liability insurance.**

**Important:** Check with Your personal insurer and the Rental Agency to ensure that You have adequate personal property, personal injury and third-party liability coverage. The Policy only covers loss or damage to a rental vehicle, as stipulated herein.

#### **"Know Before You Go"**

While Car Rental Collision/Loss Damage Waiver Insurance provide coverage on a worldwide basis (except where prohibited by law), and the coverage is well received by Rental Agencies, there is no guarantee that this coverage will be accepted at every facility. Some Rental Agencies may resist Your declining their CDW/ LDW coverage. They may try to encourage You to take their coverage. If You refuse, they may insist You provide a deposit. Before booking a vehicle, confirm that the Rental Agency will accept this Car Rental Collision/Loss Damage Waiver Insurance without requiring a deposit. If they won't, find one that will, and try to get written confirmation. If arranging vehicle rental through a travel agency, let them know You want to take advantage of this Car Rental Collision/Loss Damage Waiver Insurance and have them confirm the Rental Agency's willingness to accept this coverage. You will not be compensated for any payment You may have to make to obtain the Rental Agency's CDW/LDW.

Check the rental vehicle carefully for scratches, dents and windshield chips and point out any damage to the Rental Agency representative before You take possession of the vehicle. Have them note the damage on the rental agreement (and take a copy with You) or ask for another vehicle. If the vehicle sustains damage of any kind, immediately phone the Administrator at one of the numbers provided. Advise the Rental Agency that You have reported the claim and provide the Administrator's address and phone number.

**Do not sign a blank sales draft to cover the damage and loss of use charges.**

#### **Coverage Period**

Insurance coverage begins as soon as the Cardholder or any other person who is authorized to operate the rental vehicle under the rental agreement takes control of the vehicle, and ends at the earliest of:

1. the time the Rental Agency assumes control of the rental vehicle, whether it be at its place of business or elsewhere;
2. the date the Account is cancelled, closed or ceases to be in Good Standing; and
3. the date the Cardholder ceases to be eligible for coverage.

#### **Types of Vehicles Covered**

The types of rental vehicles covered include cars, sport utility vehicles and mini-vans (as defined below).

Mini-vans are covered provided they:

1. are for private passenger use with seating for no more than 8 occupants including the driver;
2. do not exceed a "3/4 ton" rating; and
3. are not to be used for hire by others.

#### **Types of Vehicles NOT Covered**

Vehicles which belong to the following categories are NOT covered:

1. any vehicle with a manufacturer's suggested retail price, excluding taxes, over \$65,000 at the time and place of loss;
2. vans (except as defined above);
3. trucks, pick-up trucks or any vehicle that can be reconfigured into a pick-up truck;



4. campers or trailers or recreational vehicles;
5. off-road vehicles;
6. motorcycles, mopeds or motorbikes;
7. expensive or exotic vehicles;
8. customized vehicles;
9. antique vehicles; and
10. leased vehicles.

An antique vehicle is one which is over 20 years old or its model has not been manufactured for 10 years or more.

Limousines that have been stretched or altered from the original factory design are excluded. However, standard production models of these vehicles that are not used as limousines are not excluded.

#### **Limitations and Exclusions**

Car Rental Collision/Loss Damage insurance does not cover any loss caused or contributed to by:

1. operation of the rental vehicle:
  - a) in violation of the law or any terms and conditions of the rental agreement/contract;
  - b) by any driver not so authorized under the rental agreement;
  - c) by any driver not in possession of a driver's license that is valid in the rental jurisdiction;
  - d) on other than regularly maintained roads;
  - e) at any time while intoxicated (where the driver's blood alcohol concentration is equal to or over the blood alcohol concentration limit for impaired driving under the Criminal Code of Canada or the jurisdiction in which the vehicle rental occurred, if lower,) or the driver is charged for impaired driving;
  - f) at any time while under the influence of any narcotic;
2. nuclear reaction, radiation or radioactive contamination;
3. damage to tires unless in conjunction with an insured cause;
4. wear and tear, gradual deterioration, mechanical breakdown of vehicle;
5. any damage caused by moving or transporting cargo;
6. insects or vermin;
7. inherent vice or damage;
8. war, hostile or warlike action, insurrection, rebellion, revolution or civil war;
9. seizure or destruction under quarantine or customs regulations or confiscation by any government or public authority;
10. transporting contraband or illegal trade;
11. transportation of property or passengers for hire; or
12. any dishonest, fraudulent or criminal act committed or attempted by the Cardholder and/or any authorized driver.

#### **Car Rental Collision/Loss Damage does NOT include coverage for:**

1. vehicles rented for a period that exceeds 31 consecutive days, whether or not under one or more consecutive rental agreements;
2. a replacement vehicle for which Your personal automobile insurance, car dealer, repair shop, or other party is covering all or part of the rental cost;
3. loss occurring when the rental vehicle is being operated by someone other than the Insured Person;
4. loss or theft of personal belongings in the vehicle, including but not limited to cellular telephones, portable computers, electronic and communication devices;
5. expenses assumed, waived or paid or payable by the Rental Agency or its insurer;
6. third party liability (injury to anyone or anything inside or outside the vehicle); or
7. any amount payable by Your employer or employer's insurance coverage, if the rental car was for business purposes.

#### **How to Claim**

Within 48 hours of the damage or theft having occurred, You MUST notify the Administrator by calling **1-800-668-8680** from within Canada and the United States or **416-977-6066** locally or collect from elsewhere in the world to initiate Your claim with a representative. Failure to report a claim within 48 hours may result in denial of the claim or reduction of Your benefit. The representative will provide You with a claim form or You may also access a claim form and submit the required documentation online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com).

***If the vehicle sustains losses reasonably estimated to exceed \$1,000, You must obtain a police report.***

You will be required to submit a completed claim form including, but not limited to, the following documentation:

1. a copy of the driver's license of the person who was driving the vehicle at the time of the loss;
2. a copy of the loss/damage report You completed with the Rental Agency;
3. a copy of a police report, required when the loss results in damage or theft over \$1,000;
4. a copy of Your sales receipt, and Your Account Statement showing the rental charge;
5. the front and back of the original opened and closed-out rental agreement;
6. a copy of the itemized repair estimate, final itemized repair bill and parts invoices;
7. original receipt(s) for any repairs for which You may have paid;
8. if loss of use is charged, a copy of the Rental Agency's complete daily utilization log from the date the vehicle was not available for rental, to the date the vehicle became available to rent;
9. any other information reasonably required by the Administrator.

Claims submitted with incomplete or insufficient documentation may not be paid until all required documentation is received and provided the claim can be assessed on the basis of the information provided.

#### **Personal Effects Insurance**

For this coverage, Insured Person means the Cardholder and Immediate Family Members travelling with the Cardholder who rented the vehicle.

#### **Benefits**

Personal Effects coverage is provided for loss, theft or damage to personal effects while such personal effects are in transit or in any hotel or other building en route during a trip with a covered rental vehicle, for the duration of the vehicle rental period, as outlined in the Car Rental Collision/Loss

Damage Insurance section above.

Coverage is provided for the personal effects of the Cardholder when the Cardholder rents a vehicle and the personal effects of any Immediate Family Member travelling with the Cardholder.

Benefits during such rental period will be the actual cash value of the personal effects up to a maximum of \$1,000 per occurrence for each Insured Person. Total benefits for all Insured Persons during each vehicle rental period are limited to \$2,000 per Account

#### Limitations and Exclusions

Personal Effects coverage does not cover money (whether paper or coin), bullion, bank notes, securities, documents, memorabilia, collectibles, medals or other property of a similar nature. Benefits are not paid if loss results from Mysterious Disappearance.

#### Other Insurance/Protection

Benefits are in excess of all Other Insurance/Protection available to You in respect of the covered item subject of the claim. Once all Other Insurance/Protection has been claimed under and exhausted, the Insurer's liability is only for the amount of the loss or damage not covered by Other Insurance/Protection and for the amount of any applicable deductible, subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance.

This coverage will not apply as contributing insurance, notwithstanding any provision in any Other Insurance/Protection.

#### How to Claim

You may initiate a claim, obtain a claim form, and submit the required documentation online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com) or call 1-800-668-8680.

#### Car Rental Accidental Death and Dismemberment Insurance

For this coverage, Insured Person means the Cardholder and Immediate Family Members while Occupying the rental vehicle.

#### Benefits

Car Rental Accidental Death and Dismemberment coverage is provided in the event an Insured Person sustains an Accidental Bodily Injury while Occupying a covered rental vehicle during the vehicle rental period, as outlined in the Car Rental Collision/Loss Damage Insurance section above. The applicable benefit specified for the resulting loss will be paid according to the following Schedule of Insurance:

Schedule of Insurance	Amount of Benefit	
	Cardholder*	Each Other Occupant
Loss of life	\$200,000	\$20,000
Loss of both hands or both feet	\$200,000	\$20,000
Loss of one foot or one hand and the entire sight of one eye	\$200,000	\$20,000
Loss of sight of both eyes	\$200,000	\$20,000
Loss of one hand and one foot	\$200,000	\$20,000
Loss of speech and hearing	\$200,000	\$20,000
Loss of one hand or one foot	\$100,000	\$10,000
Loss of sight of one eye	\$100,000	\$10,000
Loss of speech	\$100,000	\$10,000
Loss of hearing	\$100,000	\$10,000
Loss of thumb and index finger on the same hand	\$100,000	\$10,000

\* In this Schedule of Insurance, Cardholder means the Cardholder who rented the vehicle and whose name appears in the rental agreement. The maximum benefit payable for loss resulting from any one Accident is \$300,000 per Account. If more than one described loss is sustained by an Insured Person, then the total benefit payable from one Accident to such person is limited to the greatest amount payable for any one loss sustained.

#### Beneficiary

Unless otherwise specified by the Cardholder, any amount due under this Certificate of Insurance for loss of life:

- upon the Cardholder's death, will be paid to the Cardholder's Spouse if living, otherwise equally to the Cardholder's living children if any, otherwise equally to the Cardholder's then living parents or parent, otherwise to the Cardholder's estate;
- upon the death of any other Insured Person, will be paid to the Cardholder if then living, otherwise as though it were a sum payable under (1) above.

All other benefits will be paid to the Insured Person suffering the loss.

The beneficiary designation outlined above may be changed in accordance with the Change of Beneficiary provision.

#### Limitations and Exclusions

Coverage will be provided on the same terms, conditions, limitations and exclusions applicable to Car Rental Collision/Loss Damage Waiver (above).

In addition, Car Rental Accidental Death and Dismemberment benefits are not payable for a loss caused by or resulting from:

- intentionally self-inflicted injuries;
- suicide or attempted suicide;
- illness or disease;
- pregnancy or complications of pregnancy, including resulting childbirth or abortion;
- bacterial infection except bacterial infection of an Accidental Bodily Injury;
- death resulting from the accidental ingestion of a substance contaminated by bacteria; or
- the commission or attempted commission of a criminal offence.

#### How to Claim

You may initiate a claim, obtain a claim form, and submit the required documentation online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com) or call 1-800-668-8680.

## TRIP INSURANCE

Trip Insurance includes Trip Cancellation, Trip Interruption/Delay, Flight Delay, Baggage Delay or Loss, Hotel/Motel Burglary, Common Carrier Accidental Death and Dismemberment, and Emergency Travel Medical insurance.

### **Trip Cancellation Insurance (Prior To Departure)**

For this coverage, Insured Person means the Primary Cardholder, the Primary Cardholder's Spouse, and Dependent Children booked to travel on a Trip with the Primary Cardholder and/or the Primary Cardholder's Spouse.

Coverage applies when You charge at least 75% of Eligible Expenses for a Trip to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

### **Benefits**

Should the Insured Person have to cancel a Trip prior to the scheduled departure date due to one of the following Covered Causes for Cancellation, You will be reimbursed for any Eligible Expenses which are not refundable or reimbursable in any manner (the Insurer considers travel credits a reimbursement), up to a maximum limit of \$2,000 per Insured Person and \$5,000 per Trip for all Insured Persons.

It is important that Insured Person cancel travel arrangements with the travel supplier and notify the Administrator within 48 hours following a Covered Cause for Cancellation. Failure to notify the Administrator within 48 hours may reduce the amount payable.

If prior to the scheduled departure date, an Insured Person chooses to reschedule a Trip due to one of the following Covered Causes for Cancellation, You will be reimbursed for any Rescheduling Expenses which are not refundable or reimbursable in any manner. The amount payable is the lesser of the Rescheduling Expenses and the amount that would have been paid under this Certificate of Insurance if the Trip had been cancelled outright. Your rescheduled trip will be considered a new Trip under this Certificate of Insurance.

### **Covered Causes for Cancellation (occurring prior to departure)**

#### Covered Causes for Cancellation - Medical

1. death of an Insured Person, an Immediate Relative, or a Travel Companion;
2. Accidental Bodily Injury, or sudden and unexpected sickness, or quarantine of an Insured Person, an Immediate Relative, or a Travel Companion which caused Insured Person to be unable to start the Trip. A Physician must provide confirmation in writing that prior to the scheduled departure date, the Insured Person was advised to cancel the Trip or that the Medical Condition or Accidental Bodily Injury made it impossible for the Insured Person to start the Trip;
3. Accidental Bodily Injury, or sudden and unexpected illness or death of a caregiver with whom the Insured Person has contracted to care for a Dependent Child in their absence which requires the care and attendance of a Physician and the Physician has recommended cancellation of the Trip;
4. complications of the Insured Person's pregnancy within the first 28 weeks of pregnancy;
5. side effects and/or adverse reactions to vaccinations required for the Insured Person's Trip; or
6. hospitalization or the death of an Insured Person's host at destination.

#### Covered Causes for Cancellation - Non-medical

1. a particular situation which prompts the Canadian government to issue a travel advisory to "avoid non-essential travel" or "avoid all travel" to a country, region or city for which a Ticket had originally been issued for a period that includes an Insured Person's Trip;
2. an enforceable call of an Insured Person to jury duty or sudden and unexpected subpoena of an Insured Person to act as a witness in a court of law requiring the Insured Person's presence in court during the Trip, except where the Insured Person is a law enforcement officer;
3. a natural disaster that renders an Insured Person's principal residence uninhabitable;
4. an Insured Person's quarantine or hijacking;
5. a call to service of an Insured Person by government with respect to reservists, military, police or fire personnel;
6. default whereby a contracted travel supplier stops all service completely as a result of bankruptcy or insolvency; and
7. weather conditions delay the Insured Person's connecting schedule carrier for 30% or more of the total duration of the Trip and the Insured Person elects not to continue with the Trip.

### **Limitations and Exclusions**

Benefits are not payable for the cancellation of any Trip resulting directly or indirectly from:

1. any reason other than those listed under Covered Causes for Cancellation;
2. cancellation of a Trip by the travel service supplier;
3. pregnancy, childbirth and/or related complications occurring within 8 weeks of the expected delivery date;
4. intentionally self-inflicted injuries, suicide or any attempt thereat;
5. illness or any injury sustained while under the influence of drugs, medication, alcohol or other intoxicants;
6. participation in a criminal offence;
7. acts of terrorism, insurrection or war, whether declared or undeclared;
8. voluntary participation in a riot or civil commotion;
9. mental or emotional disorders that do not immediately require hospitalization;
10. participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-gliding, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
11. any Trip commenced against the advice of the Insured Person's Physician;
12. failure of any travel supplier through which You contract for services if this supplier was, at the time of booking, in bankruptcy, insolvency or receivership; or in the case of U.S. Air Carriers, under Chapter 11 in the U.S. Bankruptcy Code. No protection is provided for failure of travel agents, agencies or brokers; or
13. non-presentation of required travel documents, i.e., visa, passport, inoculation vaccination reports.

### **How to Claim**

Within 48 hours of a Covered Cause for Cancellation occurring, You must notify the Administrator by calling **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world to initiate Your claim with a representative. Failure to notify the Administrator within 48 hours may reduce the amount payable. The representative will provide You with a claim form or You may also access a claim form and submit required

documentation online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com). You will be required to submit a completed claim form and provide documentation to substantiate Your claim including, but not limited to, the following:

1. original tickets (including any unused coupons), original vouchers, original itinerary, invoices, and receipts;
2. Your Account statement and any other documentation necessary to confirm that the costs of Eligible Expenses were charged to Your Account;
3. proof satisfactory to the Administrator that the cancellation or interruption of the Covered Trip resulted from a covered Cause for Cancellation;
4. name, address and policy numbers for all other insurance coverage You and/or the Insured Person may have, including health insurance and credit card coverage (whether group or individual);
5. any other information reasonably required by the Administrator.

Claims submitted with incomplete or insufficient documentation may not be paid until all required documentation is received and provided the claim can be assessed on the basis of the information provided.

#### **Trip Interruption/Trip Delay Insurance (After Trip Departure)**

For this coverage, Insured Person means the Primary Cardholder, the Primary Cardholder's Spouse, and Dependent Children while travelling with the Primary Cardholder and/or the Primary Cardholder's Spouse.

Coverage applies when You charge at least 75% of Eligible Expenses for a Trip to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

#### **Benefits**

You will be reimbursed the lesser of the additional charges paid by You for a change in ticketing, or the cost of a one-way economy fare to return to point of departure or to get to the next destination point, plus the unused portion of any other Eligible Expenses which are not refundable in any other manner if, as a result of one of the following Covered Causes for Interruption or Delay occurring during the Trip, an Insured Person is prevented from continuing a Trip or returning on their scheduled return date. The maximum amount payable excludes the cost of pre-paid unused return transportation and is subject to a maximum limit of \$2,000 per Insured Person and \$5,000 per Trip.

**Please note:** These coverages will only cover any excess cost (i.e. the administration charges to cancel or change the itinerary) over and above the travel rewards provided by any reward or frequent flyer plan. The value of the loss of reward or frequent flyer plan points are not covered.

#### **Covered Causes for Trip Interruption or Delay - Medical**

1. death of an Insured Person or Travel Companion during the Trip;
2. Accidental Bodily Injury or sudden and unexpected illness of an Insured Person or Travel Companion which, in the sole opinion of the Administrator based on medical advice provided by the attending Physician, requires immediate medical attention and prevents an Insured Person from returning from the Trip on the scheduled return date;
3. death, Accidental Bodily Injury or sudden and unexpected illness of a caregiver with whom the Insured Person has contracted to care for a Dependent Child in their absence, which, in the sole opinion of the Administrator based on medical advice provided by the attending Physician, requires immediate medical attention and prevents an Insured Person from returning from the Trip on the scheduled return date;
4. Accidental Bodily Injury or sudden and unexpected illness of an Immediate Relative during the Trip, which requires immediate hospitalization and which was not known to the Insured Person prior to the Trip departure date;
5. hospitalization or the death of an Insured Person's host at destination.

#### **Covered Causes for Trip Interruption or Delay - Non-medical**

1. a particular situation which prompts the Canadian government to issue a travel advisory to "avoid non-essential travel" or "avoid all travel" to a country, region or city for which a Ticket had originally been issued for a period that includes an Insured Person's Trip;
2. a natural disaster that renders an Insured Person's principal residence uninhabitable;
3. an Insured Person's quarantine or hijacking;
4. a call to service of an Insured Person by government with respect to reservists, military, police or fire personnel; and
5. a delay causing an Insured Person to miss a connection for a Common Carrier or resulting in the interruption of an Insured Person's travel arrangements including the following:
  - a) a delay of an Insured Person's Common Carrier, resulting from the mechanical failure of that carrier;
  - b) a traffic accident or an emergency police-directed road closure (either must be substantiated by a police report); or
  - c) weather conditions.

The benefit under this Covered Cause for Interruption or Delay is the Insured Person's one-way economy air fare via the most cost-effective route to the Insured Person's next destination (inbound and outbound). The outright cancellation of a flight is not considered as a delay.

#### **Limitations and Exclusions**

Benefits are not payable for the interruption or delay of any Trip resulting directly or indirectly from:

1. any reason other than those listed under Covered Causes for Interruption or Delay;
2. pregnancy, childbirth and/or related complications occurring within 8 weeks of the expected delivery date;
3. intentionally self-inflicted injuries, suicide or any attempt thereof;
4. illness or any injury sustained while under the influence of drugs, medication, alcohol or other intoxicants;
5. participation in a criminal offence;
6. acts of terrorism, insurrection or war, whether declared or undeclared;
7. voluntary participation in a riot or civil commotion;
8. mental or emotional disorders that do not immediately require hospitalization;
9. participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-gliding, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
10. any Trip commenced against the advice of the Insured Person's Physician;
11. failure of any travel supplier through which You contract for services if this supplier was, at the time of booking, in bankruptcy, insolvency or receivership; or in the case of U.S. Air Carriers, under Chapter 11 in the U.S. Bankruptcy Code. No protection is provided for failure of travel agents, agencies or brokers; or
12. non-presentation of required travel documents, i.e., visa, passport, inoculation vaccination reports.

### **How to Claim**

Within 48 hours of a Covered Cause for Interruption or Delay occurring, You must notify the Administrator by calling **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world to initiate Your claim with a representative. Failure to notify the Administrator within 48 hours may reduce the amount payable. The representative will assist You with making the necessary arrangements to return and provide You with a claim form. You may also access a claim form and submit required documentation online at **cardbenefits.assurant.com**. You will be required to submit a completed claim form and provide documentation to substantiate Your claim including, but not limited to, the following:

1. original tickets (including any unused coupons), original vouchers, original itinerary, invoices, and receipts;
2. Your Account statement and any other documentation necessary to confirm that the costs of Eligible Expenses were charged to Your Account;
3. proof satisfactory to the Administrator that the interruption or delay of the covered Trip resulted from a Covered Cause for Interruption or Delay;
4. name, address and policy numbers for all other insurance coverage You and/or the Insured Person may have, including health insurance and credit card coverage (whether group or individual);
5. any other information reasonably required by the Administrator.

### **Flight Delay Insurance**

For this coverage, Insured Person means the Primary Cardholder, the Primary Cardholder's Spouse, and Dependent Children while travelling with the Primary Cardholder and/or Primary Cardholder's Spouse.

Coverage applies when You charge at least 75% of Eligible Expenses for a Trip to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

### **Benefits**

Flight Delay insurance provides a reimbursement to the Primary Cardholder of up to \$250 per day for reasonable and necessary expenses incurred as a result of flight departure delay of 6 hours or more for hotel accommodation, meals, refreshments, Essential Items and other sundry items (such as a magazine, book and other such small items), for a maximum of 48 hours and to an overall maximum of \$500 per Trip for all Insured Persons, provided that:

1. no alternative transportation is made available to the Insured Person within 4 hours of the original scheduled departure time of the original flight; and
2. delay of the flight was the result of strike by airline personnel, quarantine, civil commotion, hijack, natural disaster, inclement weather, mechanical breakdown or denied boarding due to overbooking.

### **Limitations and Exclusions**

Flight Delay insurance does not pay claims for the delay of any flight caused by or resulting from:

1. criminal or fraudulent acts of the Insured Person;
2. war, whether declared or undeclared, civil war, insurrection, rebellion or revolution; or
3. any warlike act by any government or military force.

### **How to Claim**

You may initiate a claim, obtain a claim form, and submit the required documentation online at **cardbenefits.assurant.com** or call 1-800-668-8680.

You will be required to submit a completed claim form and provide documentation to substantiate Your claim including, but not limited to, the following:

1. original plane ticket(s) or the sales receipt for the ticket(s);
2. written statement from the airline confirming and detailing the delay; and
3. itemized original receipts with respect to the necessary and reasonable expenses incurred for hotel accommodations, restaurant meals, refreshments, Essential Items and sundry items.

### **Baggage Delay or Loss Insurance**

For this coverage, Insured Person means the Primary Cardholder, the Primary Cardholder's Spouse, and Dependent Children while travelling with the Primary Cardholder and/or the Primary Cardholder's Spouse.

Coverage applies when You charge at least 75% of Eligible Expenses for a Trip to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

### **Benefits**

Baggage Delay insurance provides a reimbursement to the Primary Cardholder if any Insured Person's accompanying checked-in baggage is not delivered within 6 hours of arrival at the scheduled destination point, for the purchase of Essential Items to a maximum of \$200 per Trip provided that:

1. the baggage was in the custody of a scheduled airline or Common Carrier; and
2. the baggage delay did not occur upon the Insured Person's return to their province or territory of residence in Canada.

Baggage Loss insurance covers the actual cash value for direct physical loss or damage of baggage and personal property contained therein when an Insured Person's baggage is checked with an airline or Common Carrier or carried by the Insured Person on a Common Carrier up to a total loss of \$1,000 per Insured Person for:

1. loss or damage of baggage and/or personal property worn or used by the Insured Person and accompanying the Insured Person during the Trip. Coverage is limited to \$500 per item;
2. theft, burglary, fire or transportation hazards to baggage and/or personal property worn or used by the Insured Person during the Trip. Coverage is limited to \$500 per item;
3. loss or damage to camera equipment during the Trip. Camera equipment is collectively considered one item. Coverage is limited to \$500 per item; and
4. loss or damage to jewellery during the Trip. Jewellery is collectively considered one item. Coverage is limited to \$500 per item.

Payment is based on the actual replacement cost of any lost or stolen article provided the article is actually replaced. Otherwise, payment is based on the actual cash value of the article at the time of loss.

### **Limitations and Exclusions**

Baggage Delay or Loss insurance does not cover, provide service or pay claims resulting from:

1. loss or damage caused by normal wear and tear, gradual deterioration, moths, or vermin;
2. loss or damage to animals, automobiles, (including equipment and contents), trailers, motorcycles, bicycles, boats, motors, other conveyances or their accessories, souvenirs, fragile or collectible items, household effects and furnishings, contact lenses, nonprescription sunglasses, artificial teeth and

3. prostheses, medical equipment and appliances, money, securities, tickets, documents, any property pertaining to a business, profession or occupation; personal computers, software or cellular phones;
4. loss or damage to jewellery or camera equipment stored in baggage, unless such baggage is hand carried under the personal supervision of the Cardholder or such Cardholder's Spouse or Travel Companion with the Cardholder's knowledge;
5. loss, damage or delay of items due to radiation, confiscation by any government authority, war (declared or undeclared) risks, or contraband or illegal transportation or trade; or
6. loss, damage or delay incurred while the Insured Person is performing a negligent act(s) or criminal act(s).

When the protected item is part of a pair or set, You will receive no more than the value of the particular part or parts lost or damaged regardless of any special value that the item may have as part of an aggregate purchase price of such pair or set. The Administrator reserves the right to repair or replace any damaged or lost property with other of like quality and value, and to require submission of property for appraisal of damage, the cost of which is Your responsibility.

#### **Other Insurance/Protection**

Benefits are in excess of all Other Insurance/Protection available to You in respect of the covered item subject of the claim. Once all Other Insurance/Protection has been claimed under and exhausted, the Insurer's liability is only for the amount of the loss or damage not covered by Other Insurance/Protection and for the amount of any applicable deductible, subject to the terms, exclusions and limits of liability set out in this Certificate of Insurance. This coverage will not apply as contributing insurance, notwithstanding any provision in any Other Insurance/Protection.

#### **How to Claim**

You may initiate a claim, obtain a claim form, and submit the required documentation online at [cardbenefits.assurant.com](https://cardbenefits.assurant.com) or call 1-800-668-8680.

#### **Hotel/Motel Burglary Insurance**

For this coverage, Insured Person means the Cardholder and, when travelling with the Cardholder, a Spouse, Dependent Children, and parents residing with the Cardholder.

Coverage applies when You charge at least 75% of the confirmed nightly room rate for the entire stay at the Hotel/Motel (prior to any redeemable travel or other points being applied) to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program.

#### **Benefits**

Hotel/Motel Burglary insurance protects the Insured Person from theft of most items of personal property from a Hotel/Motel room where there is evidence of forceful entry. The maximum benefit payable for all Insured Persons is \$1,000 per occurrence, in excess of Other Insurance/Protection and/or payments made by the Hotel/Motel.

#### **Coverage Period**

Hotel/Motel Burglary insurance coverage begins when You Check-In to the Hotel/Motel and ends on the earliest of:

1. the time You Check-Out from the Hotel/Motel;
2. the date the Account ceases to be in Good Standing; and
3. the date the Insured Person ceases to be eligible for coverage.

No benefits will be paid for losses incurred after coverage has ended, unless otherwise specified.

#### **Excluded Items**

Hotel/Motel Burglary Insurance does not cover:

1. cash;
2. travellers cheques;
3. securities;
4. credit cards or any other negotiable instruments;
5. tickets; and
6. documents.

#### **How to Claim**

You MUST give immediate notice to the police or other authorities having jurisdiction upon discovery of a loss.

As soon as reasonably possible, but in no event later than 45 days from the date of loss, you must initiate a claim online at [cardbenefits.assurant.com](https://cardbenefits.assurant.com) or call 1-800-668-8680.

You must maintain original copies of all documents required.

You will be required to complete a claim form and include copies of:

1. Your HSBC Mastercard charge slip or transaction confirmation;
2. Account statement showing Your name, account number, and charge for the covered item;
3. written statement from the Hotel/Motel confirming the date, time and details of the loss;
4. police report;
5. payout documentation from the Hotel/Motel and/or Other Insurance/Protection carrier, if applicable; and
6. any other information reasonably required by the Administrator to determine coverage eligibility.

If a copy of the police report is not obtainable, You must provide the police department address and telephone number, incident report file number, and contact name on the file.

The completed claim forms together with required documents must be delivered as soon as reasonably possible, but in all events within one (1) year from the date on which the loss occurred.

## **Common Carrier Accidental Death and Dismemberment Insurance**

For this coverage, Insured Person means the Primary Cardholder, and the Primary Cardholder's Spouse and Dependent Children while travelling with the Primary Cardholder.

### **Eligibility**

Coverage is only available when You charge the Full Cost of fare(s) for travel on a Common Carrier to the Account and/or pay such cost with points redeemed under the HSBC Rewards Program. When purchasing a package tour, the amount charged to the Account must be at least as much as the cost of the Common Carrier transportation in order to be eligible for Common Carrier Accidental Death and Dismemberment benefits.

Coverage is in force when an Insured Person is Occupying a Common Carrier to:

1. travel directly to the point-of-departure terminal for the trip shown on the Ticket;
2. make the trip shown on the Ticket; and
3. travel directly from the point-of-arrival terminal for the trip shown on the Ticket to the next destination.

### **Benefits**

If an Insured Person sustains an Accidental Bodily Injury while Occupying a Common Carrier as a fare paying passenger, the applicable benefit specified for the resulting loss will be paid according to the following Schedule of Insurance:

### **Schedule of Insurance**

<b>Loss</b>	<b>Amount of Benefit</b>
Loss of life	\$500,000
Loss of both hands or both feet	\$500,000
Loss of one foot or one hand and the entire sight of one eye	\$500,000
Loss of sight of both eyes	\$500,000
Loss of one hand and one foot	\$500,000
Loss of speech and hearing	\$500,000
Loss of one hand or one foot	\$250,000
Loss of sight of one eye	\$250,000
Loss of speech	\$250,000
Loss of hearing	\$250,000
Loss of thumb and index finger on the same hand	\$125,000

The maximum benefit payable for loss resulting from any one Accident is \$750,000 per Account. If more than one described loss is sustained by an Insured Person, then the total benefit payable from that Accident to such person is limited to the greatest amount payable for any one loss sustained. The maximum benefit payable for loss resulting from any one Accident to such person is limited to the greatest amount payable for any one loss sustained.

For benefits to be payable, the loss must occur within 365 days of the Accidental Bodily Injury that caused the loss.

### **Exposure and Disappearance**

If by reason of an Accident covered by the Policy an Insured Person is unavoidably exposed to the elements and as a result of such exposure suffers a loss, such loss will be covered under the terms of the Policy.

An Insured Person is presumed to have suffered loss of life caused by an Accident when:

1. the Insured Person's body remains unaccounted for after 365 days following the date of a disappearance which was caused by sinking or wrecking of the Common Carrier; and
2. the Insured Person occupied such Common Carrier at the time of the Accident, subject to the terms and conditions of the Certificate of Insurance.

### **Beneficiary**

Unless otherwise specified by the Primary Cardholder, any amount due under this Certificate of Insurance for Loss of life:

1. upon the Primary Cardholder's death, will be paid to the Primary Cardholder's Spouse if living, otherwise equally to the Primary Cardholder's living children if any, otherwise equally to the Primary Cardholder's then living parents or parent, otherwise to the Primary Cardholder's estate;
2. upon the death of any other Insured Person, will be paid to the Primary Cardholder if then living, otherwise as though it were a sum payable under (1) above.

All other benefits will be paid to the Insured Person suffering the Loss.

The beneficiary designation outlined above may be changed in accordance with the Change of Beneficiary provision.

### **Limitations and Exclusions**

Common Carrier Accidental Death and Dismemberment benefits are not payable for a Loss caused by or resulting from:

1. intentionally self-inflicted injuries;
2. suicide or attempted suicide;
3. illness or disease;
4. pregnancy or complications of pregnancy, including resulting childbirth or abortion;
5. bacterial infection except bacterial infection of an Accidental Bodily Injury;
6. death results from the accidental ingestion of a substance contaminated by bacteria;
7. any act of war, declared or not, or civil disorders;
8. an Accident occurring while operating or learning to operate, or serving as a member of the crew of any aircraft;
9. the commission or attempted commission of a criminal offence; or
10. an Accident occurring while Occupying a water conveyance, unless the conveyance itself is involved in an Accident which causes the Loss to the Insured Person.

### **How to Claim**

You may initiate a claim, obtain a claim form, and submit the required documentation online at [cardbenefits.assurant.com](http://cardbenefits.assurant.com) or call 1-800-668-8680.

### **Emergency Travel Medical Insurance**

*Coverage is provided for the first 31 consecutive days of a Trip for Insured Persons under 65 years of age and for the first 21 consecutive days of a Trip for Insured Persons 65 years of age or older.*

For this coverage, Insured Person means the Primary Cardholder, the Primary Cardholder's Spouse, and Dependent Children while travelling with the Primary Cardholder and/or Primary Cardholder's Spouse.

### **Eligibility**

To be eligible for Emergency Travel Medical coverage, all Insured Persons must be residents of Canada and insured by a provincial or territorial GHIP.

### **Coverage Period for Insured Persons under age 65 (on the Trip departure date)**

Only the first 31 consecutive days of a Trip, as determined by the originally scheduled departure and return dates, will be covered. There is no coverage for that portion of a Trip which extends beyond the first 31 consecutive days. In the event of a claim, proof of scheduled Trip duration will be required.

Coverage begins at 12:01 a.m. on the date the Insured Person leaves their province or territory of residence on a Trip. Coverage will terminate on the earliest of the following:

1. the date the Insured Person returns to their province or territory of residence in Canada;
2. the date the Account is cancelled, closed or is no longer in Good Standing;
3. the date the Insured Person has been absent for more than 31 consecutive days (including the day of departure and day of return) from their province or territory of residence in Canada; and
4. the date the Insured Person ceases to be eligible for coverage (For Dependent Children, see the Definitions section for age limits).

### **Coverage Period for Insured Persons age 65 or older (on the Trip departure date)**

Only the first 21 consecutive days of a Trip, as determined by the originally scheduled departure and return dates, will be covered. There is no coverage for that portion of a Trip which extends beyond the first 21 consecutive days. In the event of a claim, proof of scheduled Trip duration will be required.

Coverage begins at 12:01 a.m. on the date the Insured Person leaves their province or territory of residence on a Trip. Coverage will terminate on the earliest of the following:

1. the date the Insured Person returns to their province or territory of residence in Canada;
2. the date the Account is cancelled, closed or is no longer in Good Standing;
3. the date the Insured Person has been absent for more than 21 consecutive days (including the day of departure and day of return) from their province or territory of residence in Canada; or
4. the date the Insured Person ceases to be eligible for coverage (For Dependent Children, see the Definitions section for age limits).

### **Automatic Extension of Coverage**

Coverage will be automatically extended beyond the 31-day limit for Insured Persons under 65 years of age or beyond the 21-day limit for Insured Persons age 65 or older, for up to 3 days following the end of a Medical Emergency.

In addition, Emergency Travel Medical insurance will be automatically extended beyond the 31-day limit for Insured Persons under 65 years of age or beyond the 21-day limit for Insured Persons 65 years of age or older for up to 3 days if an Insured Person's return to their province or territory of residence in Canada is delayed solely as the result of:

1. the delayed departure of a Common Carrier on which the Insured Person is booked;
2. a delayed return as a result of an accident or the mechanical breakdown of an Insured Person's personal vehicle;
3. You must delay Your scheduled return due to a Medical Emergency of another Insured Person.

### **Benefits**

In the event of a Medical Emergency, the Reasonable and Customary Charges for Emergency Medical Treatment will be paid by the Insurer, less any amount payable by or reimbursable under a GHIP, any group or individual health plans, insurance policies or reimbursement programs. Benefits are limited to \$2,000,000 for each Insured Person, subject to the Limitations and Exclusions.

The following expenses are eligible for reimbursement:

### **Emergency Hospital, Ambulance and Medical Expenses**

1. Hospital room and board charges, up to semi-private or the equivalent. If medically required, expenses for treatment in an intensive or coronary care unit are covered;
2. Physician charges;
3. use of an operating room, anesthesia and surgical dressings;
4. the cost of licensed ambulance service;
5. emergency room charges;
6. prescription drugs and medication; and
7. the cost for rental or purchase of minor medical appliances such as wheelchairs and crutches.

**Diagnostic Services**, including laboratory tests, x-rays when prescribed by a Physician. NOTE: magnetic resonance imaging (MRI), computerized axial tomography (CAT scans), sonograms and ultrasound must be authorized in advance by the Administrator.

**Private Duty Nursing Expenses.** Benefits are payable to a maximum of \$5,000 per Insured Person for the professional services performed by a registered nurse (not related to the Insured Person by blood or marriage) during hospitalization when medically necessary and prescribed by a Physician. This includes medically necessary nursing supplies.

**Emergency Air Transportation or Evacuation.** The following are covered expenses provided they are approved and arranged in advance by the Administrator:

1. air ambulance to the nearest appropriate medical facility or to a Canadian Hospital;
2. transport on a licensed airline for emergency return to the Insured Person's province or territory of residence in Canada for immediate medical attention; and
3. a medical attendant to accompany the Insured Person on the flight back to Canada.



**Other Professional Services.** Where the professional services of a physiotherapist or podiatrist are medically necessary as a result of a Medical Emergency to a maximum of \$150 per Insured Person per discipline.

**Emergency Dental Expenses.** Covers the cost of repair or replacement of natural teeth or permanently attached artificial teeth required as the result of an accidental blow to the mouth, to a maximum of \$2,000 per Insured Person. To be eligible for coverage, dental treatment must take place during Your Trip. Treatment for the emergency relief of dental pain is covered to a maximum of \$150 per Insured Person.

**Transportation to Bedside.** Coverage includes one round trip economy airfare by the most direct route from Canada, plus lodging and meals up to a maximum of \$250, for one Immediate Family Member to:

1. be with an Insured Person who is travelling alone and has been confined to a Hospital. The Insured Person must be expected to be an inpatient for at least seven (7) days outside their home province or territory and have verification from the attending Physician that the situation is serious enough to require the visit; or
2. identify a deceased Insured Person prior to release of the body, where necessary. This benefit must be pre-approved by the Administrator.

**Return of Deceased.** In the event of the death of an Insured Person while on a Trip, this insurance covers up to \$3,000 for the preparation (including cremation) and transportation of the Insured Person's remains (excluding the cost of a burial coffin or urn) to their province or territory of residence in Canada.

**Additional Hotel and Meal Expenses.** If the return of an Insured Person to Canada is delayed due to a Medical Emergency, this insurance covers the cost for hotel and meal expenses incurred after the Insured Person's planned return date up to \$200 a day to a maximum of 10 days per Account. To receive reimbursement, original receipts must be submitted.

**Return of Vehicle.** Vehicle return is covered to a maximum of \$1,000 to return an Insured Person's vehicle to their place of residence in Canada, or in the case of a rented vehicle, to the nearest appropriate rental location, when the Insured Person is unable to return the vehicle as a result of a Medical Emergency or death. Eligible for reimbursement is the cost of the return performed by a professional agency only, or the following necessary and reasonable expenses incurred by an individual returning the vehicle on behalf of the Insured Person: fuel, meals, overnight accommodation, one-way economy airfare. To receive reimbursement, original receipts must be submitted. Any other expenses are not covered. Expenses incurred by anyone travelling with the person returning the vehicle are not covered.

Benefits will only be payable when the return of the vehicle is pre-approved and/or arranged by the Administrator and the vehicle is returned to the Insured Person's normal place of residence or the nearest appropriate rental agency within 30 days of the Insured Person's return to Canada.

#### Limitations and Exclusions

No benefits are payable for any expenses incurred directly or indirectly as a result of:

1. any Pre-Existing Condition as defined herein;
2. the continued treatment, recurrence or complication of a Medical Condition following emergency treatment of that Medical Condition during the Trip, if the medical advisors of the Administrator determine that the Insured Person is able to return to Canada and the Insured Person chooses not to return;
3. a Medical Condition for which the Insured Person delayed or refused further treatment or investigation which was recommended by a Physician before the departure date;
4. surgery, including but not limited to angioplasty and/or cardiac surgery, and any associated diagnostic charges, which are not approved by the Administrator prior to being performed, except in extreme circumstances where surgery is performed on an emergency basis immediately following admission to a Hospital;
5. invasive procedures and any of the following procedures which are not authorized in advance by the Administrator, including any associated charges: MRI (Magnetic Resonance Imaging), CAT (Computer Axial Tomography) scans, sonograms, ultrasounds, biopsies;
6. treatment not performed by or under the supervision of a Physician or dentist;
7. pregnancy, miscarriage, childbirth or complications of any of these conditions occurring within eight (8) weeks of the expected date of birth;
8. riot or civil disorder; committing or attempting to commit a criminal offence;
9. intentional self-injury; suicide or attempted suicide; abuse of medication; any Accident while under the influence of illicit drugs or alcohol where the concentration of alcohol in the Insured Person's blood exceeds 80 milligrams of alcohol in 100 milliliters of blood;
10. mental or emotional disorders that do not require immediate hospitalization;
11. the Insured Person voluntarily and knowingly exposing himself/herself to risk from: an act of war whether declared or undeclared, rebellion, revolution, hijacking or terrorism, and any service in the armed forces;
12. drugs and medication which are commonly available without a prescription or which are not legally registered and approved in Canada;
13. prescription refills;
14. replacement of lost or damaged eyeglasses, contact lenses, or hearing aids;
15. participation in professional or dangerous sports, including, but not limited to any speed contest, SCUBA diving, unless the Insured Person holds a basic SCUBA designation from a certified school or other licensing body, hang-gliding, sky diving, parachuting, bungee jumping, parasailing, spelunking, mountaineering, rock climbing or a flight accident, except as a passenger in a commercially licensed airline;
16. any treatment or surgery where the Insured Person can return to their province or territory of residence for such treatment, without adversely affecting their Medical Condition;
17. any treatment or surgery during a Trip when the Trip is undertaken for the purpose of securing or with the intent of receiving medical or Hospital services, whether or not such Trip is on the advice of a Physician;
18. any Trip commenced or continued against the advice of the Insured Person's Physician; or
19. regular care of a chronic condition; elective treatment, cosmetic treatment or any treatment or surgery that is not required for relief of acute and emergent pain or suffering.

Any portion of benefits that require prior authorization and arrangements by the Administrator will not be paid if such benefits were not pre-authorized and arranged by the Administrator, except in extreme circumstances where a request for prior approval would delay medical treatment in a life-threatening Medical Emergency.

Emergency Travel Medical Insurance pays for covered expenses in excess of the Insured Person's GHIP and any Other Insurance/Protection or compensation plan. After payment of the covered expenses, the Administrator will seek reimbursement from the Insured Person's GHIP. Benefits payable under any Other Insurance/Protection plan under which the Insured Person may have coverage will be coordinated by the Administrator in accordance with current guidelines. Payment under the Policy and any other plan will not exceed 100% of the eligible expenses incurred. The Insurer is authorized to receive in Your name, and endorse and negotiate on Your behalf, these eligible payments.

In consultation with the Insured Person's attending Physician, the Administrator reserves the right to transfer the Insured Person to a preferred medical service provider or to the Insured Person's province or territory of residence in Canada. Refusal to comply will absolve the Insurer of any liability for expenses incurred after the proposed transfer date.

The Insurer, the Administrator and the Policyholder are not responsible for the availability, quality or results of any medical treatment or transportation, or the failure of an Insured Person to obtain medical treatment.

### **Medical Emergency Procedures**

When a Medical Emergency occurs, You must contact the Administrator without delay. The Administrator is available 24 hours a day, every day.

Call **1-800-668-8680** from Canada and the United States or **416-977-6066** locally or collect from elsewhere in the world. If calling from somewhere in the world where a collect call is not possible, call direct and You will be reimbursed.

The Administrator will confirm coverage, provide directions to the preferred medical service provider or the nearest appropriate medical facility, provide the necessary authorization of payment of eligible expenses and manage the Medical Emergency.

The Administrator will make every effort to pay or authorize payment of eligible expenses to Hospitals, Physicians and other medical providers directly. If direct payment or payment authorization is not possible, an Insured Person may be required to make payments. In that event, the Insured Person will be reimbursed for eligible expenses on submission of a valid claim.

**Note: Benefits may be excluded or reduced where the Administrator has not been contacted in advance of treatment, as noted above.**

### **How to Claim**

You may initiate Your claim, obtain a claim form, and submit the required documentation online at **cardbenefits.assurant.com** or call 1-800-668-8680 from within Canada and the United States or 416-977-6066 collect from elsewhere in the world.

If the Administrator authorized Hospital or other medical payments on an Insured Person's behalf, the Insured Person must sign an authorization form allowing the Administrator to recover payments from the Insured Person's GHIP, other health plans or insurers and return it to the Administrator within 30 days. If an advance has been made for expenses later determined to be ineligible, the Insured Person will be required to reimburse the Administrator. If eligible expenses are incurred for which payment has not been pre-authorized by the Administrator, they should be submitted to the Administrator with original receipts and payment statements.

When making a claim, evidence of the Insured Person's departure date, scheduled return date, and actual return date to their province or territory of residence in Canada will be required. The Insured Person will be required to submit a completed claim form and provide documentation to substantiate the claim, including the following:

1. the cause or nature of the Medical Condition requiring treatment;
2. itemized medical invoices and receipts;
3. original prescription receipts;
4. the Primary Cardholder's date of birth and the Insured Person's date of birth (proof of age may be required);
5. a photocopy of the Insured Person's GHIP card;
6. proof of the Insured Person's departure and return dates (i.e. copy of tickets, receipts, accommodation invoice, gas receipts);
7. name, address and policy numbers for all Other Insurance/Protection coverage the Insured Person may have, including group and individual insurance, credit card coverage and any other reimbursement plans; and
8. signed authorization to obtain any further required information.

Claims submitted with incomplete or insufficient documentation may not be paid until all required documentation is received and provided the claim can be assessed on the basis of the information provided.

## **GENERAL PROVISIONS AND STATUTORY CONDITIONS**

Unless otherwise expressly provided herein or in the Policy, the following general provisions apply to the benefits described in this Certificate of Insurance.

### **Notice and Proof of Claim**

Written notice of claim (on a claim form or online at **cardbenefits.assurant.com**) must be submitted as soon as reasonably possible after the occurrence or commencement of any loss covered by the Policy, but in all events must be provided no later than 90 days from the date of loss. Written notice given by or on behalf of the claimant or the beneficiary with information sufficient to identify the Insured Person, will be deemed notice of claim.

The appropriate completed claim forms, together with written proof of loss, must be delivered as soon as reasonably possible.

Failure to provide notice or furnish proof of claim within the time prescribed herein does not invalidate the claim if the notice or proof is given or furnished as soon as reasonably possible, and in no event later than 1 year from the date the loss occurred if it is shown that it was not reasonably possible to give notice or furnish proof within the time so prescribed. If the notice or proof is given or furnished after 1 year, Your claim will not be paid.

### **Examination and Autopsy**

The Insurer, at its own expense, shall have the right and opportunity to examine any Insured Person whose injury is the basis of a claim when and so often as may be reasonably required during a claim, and also the right and opportunity to make an autopsy in case of death, where it is not forbidden by law.

### **Payment of Claims**

Benefits payable under the Policy will be paid upon receipt of full written proof of loss, as determined by the Insurer.

Benefits for loss of life will be payable in accordance with the beneficiary provisions under the Car Rental Accidental Death and Dismemberment and Common Carrier Accidental Death and Dismemberment benefits provisions of the Certificate of Insurance. Any other accrued benefits unpaid at the Insured Person's death may, at the option of the Insurer, be paid either to such person's beneficiary or to the Primary Cardholder in whose name the Account is maintained.

All other benefits will be payable to the applicable Cardholder.

### **Change of Beneficiary**

The right to change beneficiary is reserved to the Primary Cardholder or Cardholder, as applicable, and subject to any provision or rule of law governing the right to change the beneficiary. The consent of the beneficiary or beneficiaries will not be required.

To change the beneficiary designation, call **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world.

### **Copy of the Policy**

You or a person making a claim under this Certificate of Insurance may request a copy of the Policy and/or a copy of your application for this insurance (if applicable) by writing at the address shown below:

Assurant  
Canadian Head office  
5000 Yonge Street, Suite 2000  
Toronto, Ontario M2N 7E9

### **Termination of Insurance**

Coverage for Insured Persons ends on the earliest of:

1. the date the Account is cancelled, closed or ceases to be in Good Standing;
2. the date the Insured Person ceases to be eligible for coverage; and
3. the date the Policy terminates.

No losses incurred after the Policy terminates will be paid, unless otherwise specified.

### **Subrogation**

Following payment of an Insured Person's claim for loss or damage, the Insurer shall be subrogated to the extent of the amount of such payment, to all of the rights and remedies of the Insured Person against any party in respect of such loss or damage and shall be entitled at its own expense to sue in the name of the Insured Person. The Insured Person shall give the Insurer all such assistance as is reasonably required to secure its rights and remedies, including the execution of all documents necessary to enable the Insurer to bring suit in the name of the Insured Person.

### **Due Diligence**

The Insured Person shall use diligence and do all things reasonable to avoid or diminish any loss of or damage to property protected by the Policy.

### **False Claim**

If You make a claim knowing it to be false or fraudulent in any respect, You shall no longer be entitled to this insurance, nor to the payment of any claim under the Policy.

### **Legal Action**

Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the *Insurance Act*, *Limitations Act*, or other applicable legislation in the Primary Cardholder's province or territory.

### **If You Have a Concern or Complaint**

If You have a concern or complaint about Your coverage, please call the Insurer at 1-800-668-8680. The Insurer will do its best to resolve Your concern or complaint. If for some reason the Insurer is unable to do so to Your satisfaction, You may pursue the concern or complaint in writing to an independent external organization. You may also obtain detailed information for the Insurer's resolution process and the external recourse either by calling the Insurer at the number listed above or at: [assurant.ca/customer-assistance](http://assurant.ca/customer-assistance).

### **Privacy**

The Insurer may collect, use, and share personal information provided by You to the Insurer, and obtained from others with Your consent, or as required or permitted by law. The Insurer may use the information to serve You as a customer and communicate with You. The Insurer may process and store Your information in another country, which may be subject to access by government authorities under applicable laws of that country. You may obtain a copy of the Insurer's privacy policy by calling 1-888-778-8023 or from their website: [assurant.ca/privacy-policy](http://assurant.ca/privacy-policy). If You have any questions or concerns regarding the privacy policy or Your options for refusing or withdrawing this consent, You may call the Insurer at the number listed above.

**-End of Certificate of Insurance -**

### **STATEMENT OF SERVICES**

Travel Assistance Services and Price Protection Service are services only, not insurance benefits, and are provided by Assurant Services Canada Inc. ("Assurant"). Please refer to the Definitions section on page 1 for the meaning of all capitalized terms.

#### **Travel Assistance Services**

You do not need to use Your HSBC Mastercard to be eligible for the following services.

These services are provided to the Primary Cardholder and/or their Spouse on a 24-hour, 7 day a week basis. To take advantage of any of the services described below, simply call **1-800-668-8680** from within Canada and the United States or **416-977-6066** collect from elsewhere in the world. Any costs incurred for or in connection with such services will be charged to the Account (subject to credit availability). If not chargeable, payment for such costs will be arranged (where reasonably possible) through family and friends

Travel Assistance Services may not be available in countries of political unrest and such countries may from time to time be determined to be unsafe and/or inaccessible.

#### **Emergency Cash Transfer**

In the event of theft, loss or an emergency while travelling away from home, You can call for assistance in arranging for an emergency cash transfer, including a cash transfer to Your Account, to a maximum of \$5,000.

**Emergency Message Centre**

In case of a Medical Emergency, Assurant can help to relay important messages to or from Your family, business or Physician.

**Lost Document and Ticket Replacement**

In the event of theft or loss of necessary travel documents or tickets when travelling, You can call for assistance with arrangements for their replacement.

**Lost Luggage Assistance**

Assurant will help locate or replace lost or stolen luggage and personal effects. The cost of obtaining replacement luggage and personal effects will be charged to the Account.

**Pre-trip Information**

You can call and obtain information regarding passport and visa regulations, and vaccination and inoculation requirements for the country You are visiting.

**Medical Assistance and Consultation**

You will be directed to the nearest appropriate medical facility wherever possible. It is recommended that you contact Assurant for this assistance prior to seeking treatment for any Medical Emergency.

**Legal Referrals and Payment Assistance**

If, while travelling, You require legal assistance, You can call for referral to a local legal advisor and/or for assistance with arrangements for the posting of bail and the payment of legal fees, to a maximum of \$5,000, which will be charged to the Account.

**Price Protection Service**

Price Protection Service is only available to the Cardholder. No other person or entity will have any right, remedy or claim, legal or equitable to Price Protection payments.

**Services**

Price Protection Service is in effect for 60 days from the date of purchase of most new items of personal property purchased in Canada and charged in full to the Account, subject to the Limitations and Exclusions below. If, within 60 days of the purchase of an eligible item You find an identical item with the same brand, model number (where applicable) and attributes (benefits, features, functions and uses) offered for retail sale in Canada (in Canadian dollars) at a price lower than the price You paid, and You will not be returning the item, You will, subject to the Limitations and Exclusions below, receive a reimbursement of the price difference. This payment is based on the price of the item before applicable taxes, manufacturer's rebate, store rebates, and shipping and installation charges.

No Price Protection Service payment will be made for price differences of less than \$10 per item and the maximum payment amount will be \$500 per item, and a calendar year total maximum payment of \$1,000 per Account. Price Protection Service will apply to a maximum of 3 identical items during the 60-day period. No item can be submitted for Price Protection payment more than once during the 60-day period.

If You return the item to the merchant, You are not eligible for Price Protection Service.

**Limitations and Exclusions**

Price Protection is not available with respect to the following:

1. travellers cheques, cash (whether paper or coin), bullion, precious metals, tickets, documents, stamps, negotiable instruments or property of a similar nature;
2. animals, living plants or perishables such as food and liquor and/or goods consumed in use (including but not limited to groceries and fuel);
3. computers (including hardware, software, printers and scanners), cellular phones, personal digital assistants (PDA) or any similar electronic device;
4. automobiles, motorboats, airplanes, motorcycles, motor- scooters, snowmobiles, riding lawnmowers, golf carts, lawn tractors or any other motorized vehicles (except for miniature electrically powered vehicles intended for recreational use by children) or any of their respective parts, fuels or accessories;
5. one-of-a-kind items;
6. used or previously owned or refurbished items, including antiques, collectibles and fine art;
7. items purchased and/or used by or for a business or for commercial gain; or
8. services related to items purchased including insurance, duty, delivery and transportation costs.

Price Protection Service does not apply if the retailer makes a price adjustment and/or refunds the difference between the original and lower price. Price comparisons with liquidated merchandise, store closing clearance merchandise, Grey Market Products, and gift card or savings card incentives issued by a retailer are not eligible for Price Protection Service. Price comparisons with items offered for sale on a website outside of Canada or for which an international shipping fee must also be paid are not eligible for Price Protection Service.

You are only eligible for Price Protection Service if the Account is in Good Standing at the time of Your request.

**Gifts**

Eligible items that You give as gifts are covered. In the event of a request, You, not the recipient of the gift, must make the request for payment.

**How to Request Price Protection Services**

To request Price Protection Service, simply go online to [cardbenefits.assurant.com](http://cardbenefits.assurant.com) to obtain the applicable request form or call 1-800-668-8680. Your request must be submitted within 120 days of the original purchase date.

You must complete and sign the request form and include the following:

1. the customer copy of the original vendor's sales receipt;
2. the Account statement showing the charge; and

3. a dated advertisement/flyer to prove that the identical item was offered and available in Canada at the reduced price within 60 days of the date of Your purchase.

Please be sure to keep copies of all receipts. Reimbursement under Price Protection Service will be made upon receipt of full satisfactory written proof, as determined by Assurant. Price Protection Service may be discontinued or amended upon notice to the Cardholder.

***-End of Statement of Services-***