



Domestic Travel Insurance
(Sell through electronic channel (Online))

In reliance upon the statements made in the application for insurance forming part of this insurance Policy and in consideration of the premium to be paid by the insured person and subject to the terms, general conditions, insuring agreements, exclusions and endorsements of this insurance Policy, the Company agrees with the insured person as follows:

Section 1 Definitions

Words or expressions to which specific meanings have been given in any parts of this Policy shall have such specific meaning wherever they shall appear, unless specified otherwise in the Policy.

Policy	means	the Insurance Schedule, Schedule of Benefits, Conditions, Insuring Agreement, Exclusions, Attachments, Special Provisions, Warranties, Endorsements and Summary of Policy are considered as parts of this Insurance Contract.
Company	means	Tune Insurance Public Company Limited
Policyholder	means	person, juristic person or organization specified as Policy Holder in the Schedule of Policy and/or the certificated who provides the insurance for the insured persons' benefits.
Insured Person	means	the person named as the Insured person in this policy schedule and/or Endorsement who is under the coverage of this Policy.
Accident	means	an incident happens suddenly from external factor causes the result insured person unintended or unexpected.
Injury	means	bodily injury as directly resulted by accident solely and is independent from other causes.
Sickness	means	symptom, abnormality, sickness or contact disease of the Insured person.



Total Permanent Disability means being disabled to the extent of being completely unable to perform any work duties in a regular occupation or other occupations forever or unable to perform 3 or more types of daily activities on their own daily activities

Daily activities refer to the ability to perform 6 main daily tasks of normal people, which is a medical criterion for evaluating patients who are unable to perform such tasks, consisting of:

(1) Mobility such as the ability to move from a chair to a bed by oneself without needing help from others or using assistive devices

(2) Ability to walk or move such as the ability to travel or move from one room to another on your own without needing help from others or using assistive devices

(3) Dressing ability such as the ability to put on or take off clothing on one's own without the assistance of others or the use of assistive devices

(4) The ability to bathe and cleanse one's body such as the ability to shower, including being able to get in and out of the shower by yourself without the help of others or the use of assistive devices

(5) Eating ability such as the ability to eat food on your own without the assistance of others or the use of assistive devices

(6) Ability to defecate such as the ability to use the bathroom to defecate, including being able to enter and exit the bathroom on your own without assistance from others or using assistive devices

Deductible means the first part of loss which shall be borne by the Insured Person.

Physician means any person licensed to practice modern medicine with the Medical Council who can render medical treatment and surgery within the territory he/she is licensed.

Nurse means a person who is legally licensed to engage in the nursing profession.



Inpatient	means	the person who is necessary to attend medical treatment in hospital or medical center and registered as inpatient by diagnosis and advice of the physician based on indication of medical standard and in the period suitable for treatment of such injury or sickness.
Outpatient	means	the person who received medical service in an outpatient department or emergency room of the hospital, medical facility or clinic, for a condition which by diagnosis and indication of the Medical Standard does not need to be admitted as an Inpatient.
Hospital	means	any medical facility that provides medical services, can accommodate overnight patients, has an adequate number of medical personnel and facilities and a complete range of services, particularly a major operating room, and is registered as a Hospital in accordance with the law on medical facilities in that locality.
Medical Facility	means	any medical facility that provides medical services, can accommodate overnight patients, and is permitted to be registered as a Medical Facility in accordance with the law in that locality.
Clinic	means	the modern type clinic duly permitted by law to be operated for medical treatment and diagnosis by the physician but cannot accommodate overnight patient.
Medical Standards	means	international rules or practices of modern medical service that provides suitable treatment plan for the patient according to the medical necessity and correspond with the summary from the injury and sickness background, findings, autopsy result or others (if any).
Necessary and Reasonable Expense	means	medical treatment costs and/or other expenses that correspond to the amounts normally charged to general patients for similar services by the Hospital, Medical Facility or Clinic where the insured person has been treated.
Medical Necessity	means	medical service provided under the following conditions:



- (1) the services correspond with diagnosis, and the treatment is consistent with the treated person's Injury or Sickness;
- (2) there are clear medical indications based on current Medical Standards;
- (3) the services must not be solely for the convenience of the treated person or his or her family or the treatment provider; and
- (4) conform to standard medical treatment and is necessary for the injury or sickness suffered by the person being treated.

Pre-existing Conditions means Any disease (including a complication or underlying condition of the disease) including its symptoms or abnormalities that occur to the insured within the period no later than 12 months from which the insured purchased the policy and are significant enough that would require the general public to seek diagnosis, care, maintenance or treatment or to obtain diagnosis, care, treatment or maintenance from a licensed doctor.

AIDS means Acquired Immune Deficiency Syndrome which is caused by HIV virus infection, and shall include opportunistic infection, Malignant Neoplasm, infections or any Sickness that reveals an HIV (Human Immunodeficiency Virus) positive blood test result.

Opportunistic infection shall include, but is not limited to, Pneumocystis Carinii Pneumonia, Organism of Chronic Enteritis, virus, and/or Disseminated Fungi Infection. Malignant Neoplasm shall include Kaposi's sarcoma, Central Nervous System Lymphoma, and/or other severe disease which is presently known to be a symptom of Acquired Immune Deficiency Syndrome, or which causes sudden death, Sickness, or disability to infected persons.

AIDS shall include HIV (Human Immunodeficiency Virus), Encephalopathy Dementia, and outbreak of virus.



Terrorism means violent action and/or threat by any person or group of persons regardless of such action is done alone or in representation or in connection with any organization, government for political or religious result, ideology faith or similar objective, including to impact the government and/or public or partial thereof to become in panic.

Authorized Company means company or juristic person or representatives of the company providing any assistance appointed by the company at any time to provide assistance services to the insured which is specified in the protection agreement issued by the company before the trip.

Section 2 General Term and Conditions

2.1 Insurance Contract

This Insurance Contract is executed based on the reliance on the statement declared by the policyholders and/or the insured person in the Application Form and additional declaration (if any) duly signed by the insured person as an evidence to accept such insurance according to the Insurance Contract; this Policy is thus issued by the company as an evidence.

In case of the policyholders and/or the insured person has already known but provided false statement in the declaration or already known any fact but concealed thereof, of which if it is known to the company, it may motivate the company to demand higher premium or refuse to execute insurance contract. In this regard, this insurance contract shall become void pursuant to Section 865 of Civil and Commercial Code and the company is entitled to terminate this insurance contract.

The Company shall not deny its liability based on any declaration other than the declarations made in the documents in accordance with paragraph one.

2.2 Validity of the Insurance Contract and Change of Wording in the Insurance Contract

This insurance Policy, together with the insuring agreements and attachments, forms part of the insurance contract. Any change of wording in the insurance contract must be approved by the Company and recorded in the Policy or attachments before such change becomes valid.



2.3 Period of Insurance

As for an insuring period or a travelling period in this Policy, the insured person is covered only by the beginning and the end as part of an insurance period as described below:

2.3.1 Single Trip Coverage

1) Domestic Travel

The period covered under this insurance policy starts from the time the insured leaves the residence for that journey and continues until the insured returns to his normal residence or until the end of the insurance period whichever event will happen first (Unless otherwise specified in this insurance policy). However, the maximum period of insurance for each event is not more than 180 days.

2) Inbound Travel

The coverage period under this insurance policy starts from the date the insured arrives in Thailand and continues until the insured leaves Thailand or until the end of the insurance period whichever event will happen first (unless otherwise stated in this insurance policy). It is important that every step of the immigration checkpoint is correct. However, the maximum duration of each trip is not more than 180 days.

2.3.2 Annual Trip Coverage

As for the annual trip coverage for multiple trips, an insuring period shall be the same as that of Item 2.3.1 and each maximum insuring period shall not exceed 180 days.

In case that the insured person is hospitalized during the effective period the insurance policy and requires continued treatment as an inpatient, the coverage of this Policy shall extend until the insured person is discharge from the hospital or the medical facility.

2.4 Notification and Claims

The policyholders and/or the insured person, beneficiary, or representative of mentioned persons must inform the company in case of injury or sickness without delay. In the event of death, an immediate notice must be made to the Company, unless it can be proven that immediate notice was not practicable but was given as soon as possible.



In claiming compensation Insurance policyholder and/or the insured person or the representative of the said person, as the case may provide evidence or documents as specified under insuring agreement to the company within the specified period at their own expense.

2.5 Medical Examination

The Company has the right to examine the insured person's medical record and diagnosis records as may be necessary for this insurance. The Company also has the right to conduct an autopsy, if necessary and not contrary to the law, at the Company's expense.

In the case that the insured does not allow the company to examine the medical history and diagnosis of the insured in order to consider paying compensation. The company can refuse to provide coverage to the insured.

2.6 Compensation Payment

The Company shall provide compensation within 15 days from the date on which the Company has received a complete and correct set of evidence of Loss or Damage. Compensation for death will be paid to the beneficiary while other types of compensation will be paid to the insured person.

In case a reasonable doubt that the said claim was not made in accordance with the insuring agreement in this Policy, the period of time specified for claim compensation investigation may be extended as necessary but not exceed than 90 days from the date the company received the documents.

If the Company cannot settle the claim within the specified time limit, the Company is liable to pay interest at 15 percent per annum of the amount due accrued from the due date of the compensation.

2.7 Payment of Premium and Premium Refund

2.7.1 Insurance premiums are payable immediately by the Policyholder. and/or the insured and the insurance policy will begin to take effect on the date specified in the insurance policy schedule and/or insurance certificate.

2.7.2 In the case of single trip coverage, insurance policy cancellation after the effective date of the insurance period there will be no refund of premium unless the insured has to cancel the trip due to the following reasons:



1) Due to death or serious injury or serious illness of the insured with evidence confirming the cause and reasonable cause for not being able to cancel this insurance policy before the start date period of insurance but has been sent as soon as possible.

2) The insured has not been granted a visa (VISA) with confirmation from the embassy and the insured must notify the company before the start date period of insurance.

2.7.3 In the case of annual trip coverage, the insured or the company can exercise the right to cancel the insurance policy according to the conditions specified as follows:

1) The company may terminate this insurance policy by sending a written notice not less than 15 days in advance by registered mail to the insured with the last address notified to the company. In this case, the company will return the premium to the Insured by deducting the premium for policy period. This insurance can be used forced and released according to portion.

2) The insured can be cancel this insurance policy by notify the company in writing and have the right to receive the refund of insurance premium for the period that this insurance policy has been in use following to the short term premium as the table below

Short-Term Premium Rate Table

Duration of Insurance (not over / months)	Percentage of Annual Premium
1	15
2	25
3	35
4	45
5	55
6	65
7	75
8	80
9	85
10	90
11	95
12	100



The termination of the insurance policy under the conditions in this Article, whichever is done by any party must be the entire termination whole coverage only It is not possible to choose to cancel any part of the coverage during the insurance year.

2.8 Dispute Resolution by Arbitration

In case of an argument, dispute, or claim under this Policy between a person who is entitled to claim under the Policy and the Company, if that person wishes to settle the dispute by way of arbitration, the Company shall comply and allow the case to be decided by an arbitrator according to the Arbitration Regulations of the Office of the Insurance Commission on arbitration.

2.9 Territories and Applicable Laws

This Policy shall cover only the loss or damages that take place in Thailand under the regulations and interpretations in line with Thai laws.

2.10 Conditions Precedent

The Company may not be liable for compensation under this Policy unless the policyholders and/or the insured person, the beneficiary, or the representative of the said person has fully complied with the insurance contract and the conditions of the Policy.

Section 3 General Exclusion

This Policy does not cover any Injury, Sickness, Loss or Damage arising from or as a result of the following causes or which occurs at the times as follows (Unless specific coverage is specified in the insuring agreement)

3.1 Suicide, attempted suicide or self-inflicted Injury.

3.2 War, invasion, act of foreign enemies, warlike operations whether war is declared or not, civil war, uprising, insurrection, riot, strike, civil commotion, revolution, coup d'etat, proclamations of martial law, or any events which lead to the proclamation or maintenance of martial law.

3.3 Terrorism.



- 3.4 Radiation or radioactivity from any nuclear fuel or nuclear waste produced by the combustion of nuclear fuel or any process of self-sustaining nuclear fission/fusion.
- 3.5 Radioactive explosion, or any nuclear component or harmful substance that could cause an explosion in a nuclear process.
- 3.6 Deductible
- 3.7 While the insured person serves as a soldier, police, or a volunteer and participates in war or crime suppression.
- 3.8 At any time in a country or territory in which coverage is excluded as specified in the attachment (if any).
- 3.9 While the event occurs in the area of oil platform or underground mine.

Section 4 Insuring Agreements

Subject to the insuring agreement, the exclusion, general terms and conditions and endorsement of the insurance policy and in consideration for the premium will be paid by the policyholder and/or the insured person. The company agrees to cover only the insuring agreement attached with this insurance policy and provide sum insured as specified in the schedule and/ or insurance certificate.



Insuring Agreement

Death, Dismemberment, Loss of Sight or Total Permanent Disability from accident

Additional Definitions

Dismemberment means the loss of body organ from the wrist joint or the ankle joint and also the loss of use of that organ which according to the medical indication will never be able to function at any time in the future.

Loss of sight means complete blindness which is permanently incurable.

Total permanent disability means being disabled to the extent of being completely unable to perform any work duties in a regular occupation or other occupations forever or unable to perform 3 or more types of daily activities on their own daily activities

Daily activities refer to the ability to perform 6 main daily tasks of normal people, which is a medical criterion for evaluating patients who are unable to perform such tasks, consisting of:

(1) Mobility such as the ability to move from a chair to a bed by oneself without needing help from others or using assistive devices

(2) Ability to walk or move such as the ability to travel or move from one room to another on your own without needing help from others or using assistive devices

(3) Dressing ability such as the ability to put on or take off clothing on one's own without the assistance of others or the use of assistive devices

(4) The ability to bathe and cleanse one's body such as the ability to shower, including being able to get in and out of the shower by yourself without the help of others or the use of assistive devices

(5) Eating ability such as the ability to eat food on your own without the assistance of others or the use of assistive devices



(6) Ability to defecate such as the ability to use the bathroom to defecate, including being able to enter and exit the bathroom on your own without assistance from others or using assistive devices

Coverages

This insurance covers loss or bodily injury of the insured person caused by travel accident leading to death of the insured person, dismemberment, loss of sight or total permanent disability within 180 days commencing from the date of accident or injury requiring the insured person to attend continuous treatment as inpatient in hospital or medical center and subsequently dies at any time, the Company will compensate as follows:

1. 100% of the sum insured In case of death.
2. 100% of the sum insured In case of total permanent disability and such total permanent disability is existed for not less than 12 consecutive months commencing from the date of accident or there is any clear medical indication that the insured person is becoming total permanent disability.
3. 100% of the sum insured For both hands from wrist joints or feet from ankle joints or both sights.
4. 100% of the sum insured One hand from the wrist joint and one foot from the ankle joint.
5. 100% of the sum insured One hand from the wrist joint and one sight.
6. 100% of the sum insured One foot from the ankle joint and one sight.
7. 60% of the sum insured One hand from wrist joint.
8. 60% of the sum insured One foot from ankle joint.
9. 60% of the sum insured One sight.

The company shall compensate only one item of loss which has the highest amount.

Through the period of insurance, the company will pay the compensation under this insuring agreement totally not over the amount specified in the insurance schedule and/or insurance certificate If



the company pays the compensation less than 100% of sum insured, the company still covers the rest amount until end of period of insurance.

Claim and Submission of Evidence of Loss or Damage

The policyholder and/or the insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date on which the Physician concludes that the insured person suffers permanent disability or dismemberment.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Physician's report indicating the permanent disability or dismemberment.
4. Death certificate.
5. Copy of the autopsy report certified by the police of the case that issued the report and a copy of the police journal
6. Copy of identification card and house registration (stamp "death") of the insured person.
7. Copy of Identification card and house registration of beneficiary.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Specific Exclusions (Only comply with Insuring Agreement for Death, Dismemberment, Loss of Sight or Total Permanent Disability from accident)

This insuring agreement does not cover Loss of Death, Dismemberment, Loss of Sight or Total Permanent Disability resulting from:

1. Action of the insured person while under the influence of alcohol, addictive drugs, narcotic drugs to the extent of being unable to control one's mind. The term "under the influence of alcohol" in case of having a blood test refers to a blood/alcohol level of 150 mg percent and over.
2. Parasite infections except pyrogenic infection, tetanus, or rabies from a wound or cut suffered as a result of an accident.
3. Miscarriage and abortion.



4. While the insured person is racing of all kinds of car or boat, horse racing, all kinds of skiing including jet skiing, skate racing, boxing, parachuting (except for the purpose of life saving), while boarding or traveling on the balloon/glider.

5. While the insured person is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as commercial aircraft.

6. While the insured person pilots or works as a crew in any aircraft.

7. While the insured person is taking part in a brawl or taking part in inciting a brawl.

8. While the insured person is committing a felony or while the insured person is being arrested or escaping arrest.



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Insuring Agreement

Medical Expenses from injury or sickness Benefits

Coverages

This Insurance covers if the insured person sustains an injury from an accident or suffers from sickness which is sudden and unforeseeable during the travel period causing the insured person to seek a medical treatment either as an in-patient or an out-patient.

The Company will pay for the customary and reasonable medical charges according to the medical necessity. The amount to be compensated is the actual expenses paid up to the maximum limit of liability as stated in the policy schedule.

If the insured person requires follow-up treatment after the insurance period end, such medical treatment must be given with forty-eight (48) hours upon the insurance period end. The maximum amount under this follow-up to be paid is the actual amount incurred but not exceeding ten (10)% of the sum insured or not exceeding 7 days which ever is higher.

Covered expenses are:

1. Physician' fee.
2. Medicine and parenteral nutrition, blood and blood components, as well as costs for the separation, preparation or analysis of blood or blood components, laboratory tests and pathology fees, radiology diagnosis, other special diagnostic methods, including Physician's reading fee, expenses related to the use or provision of services, medical tools and equipment outside the operating room, medical consumables (medical supplies 1), operating room fees and equipment, excluding cost of hiring a special Nurse while in a Hospital or a Medical Facility as an Inpatient.
3. Ambulance fee in case of emergency, to transport the insured person to or from a Hospital or a Medical Facility for Medical Necessity.
4. Take-home drugs for Medical Necessity, but not for more than 14 days.
5. Cost for an ICU room or standard single room plus meals provided for the patient by the Hospital or Medical Facility, and daily nursing service fee.



In the case that the insured person is entitled to claim expenses, partly or wholly, from any person or source, the company will reimburse the insured person the medical expenses only for the amount exceeding the amount that may be claimed.

Specific Condition

1. In-patient room and board limits not exceed 5,000 Baht per day. This exclusion does not apply to the medical treatment in Intensive Care Unit (ICU) as per the medical standard.

Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date on which the insured person is discharged from the Hospital, Medical Facility or Clinic.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Copy of Identification card of the insured person.
4. Physician's report indicating significant symptom, diagnosis result and treatment.
5. Original copy of receipt listing the expenses, or a summary of the bill and receipt.

The receipts listing expenses must be the original receipts. The Company will return such receipts that certify the paid amount to the insured person to further claim the remaining amount from another insurer. If the insured person has been indemnified by the government welfare, other welfares, or other insurances, the insured person shall submit a copy of the receipt certifying the paid amount by the government welfare or other agencies to further claim the remaining amount from the Company.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.



Additional Exclusions (Only comply with the insuring agreement for Medical Expenses from accident or sickness Benefits)

This insurance does not cover the medical expense arising from injury or sickness the following conditions:

1. Pre-existing Conditions.
2. Congenital abnormalities, growth development abnormalities and genetic disorders.
3. Treatment for relaxation or health, massage for health or relaxation, rehabilitation, bodily checkups, other treatment costs unrelated to the Injury or Sickness.
4. Treatment of disease or mental and nervous conditions, stress, insanity including drug addiction or genetic diseases.
5. AIDS, venereal diseases, sexual transmitted disease.
6. Miscarriage and abortion.
7. Artificial aids i.e. crutches, eyeglasses, hearing aid, speech device, pacemakers, etc.
8. Expense relating to dental except to relief the injury from accident but not include dental restoration, braces, crowns and bridges, scaling or polishing, filling, or dentures. This include the medical expense for the treatment which is necessary for natural pronunciation from dental treatment resulting from an accident.
9. Medical treatment incurred for the purpose of reaping benefit from this insurance policy.
10. Any cosmetic surgery or beautification treatment including treatment of acne, freckles, dandruff, weight reduction and gain, hair loss. Reconstructive surgery is also excluded unless injury is sustained as a result of an accident to reactivate the function of such organ.
11. Any medical treatment given by a medical practitioner who is the insured person or the parent, spouse or child/children of the insured person.
12. Any inoculations or vaccinations, except rabies vaccine needed after an animal attack or tetanus shots needed after injured.
13. Injury occurred while the insured driving or take a motorcycle.
14. While the insured person is racing of all kinds of car or boat, horse racing, all kinds of skiing including jet skiing, skate racing, boxing, parachuting (except for the purpose of life saving), while boarding or traveling on the balloon/glider.
15. While the insured person is taking part in a brawl or taking part in inciting a brawl.
16. While the insured person is committing a felony or while the insured person is being arrested or escaping arrest.



17. Action of the insured person while under the influence of alcohol, addictive drugs, narcotic drugs to the extent of being unable to control one's mind. The term "under the influence of alcohol" in case of having a blood test refers to a blood/alcohol level of 150 mg percent and over.
18. While the insured person is boarding or traveling in an aircraft which has no license for carrying passengers or does not operate as commercial aircraft.
19. While the insured person pilots or works as a crew in any aircraft.
20. Back pain stemming from disc herniation, spondylolisthesis, degenerative disc disease, spondylosis, defect or pathological traits with spinal fracture in pars interarticularis (spondylolysis), unless there is a fracture or dislocation of the spine as a result of the accident.



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Insuring Agreement

Emergency Medical Evacuation or Repatriation to Country of Domicile Benefits

Coverage

During the effective period under the terms and conditions of the policy coverage benefits, if the insured person is injured in an accident or suffers a sudden and unpredictable sickness during the period of insurance, and it is necessary to evacuate the insured person by the method suitable for the necessity based on an opinion or an advice of the Emergency Service Assistant or its representative in order to receive appropriate medical treatment or to evacuate the insured person back to his/her domicile, the Company shall pay the evacuation cost charged by the Emergency Service Assistant or its representative the company.

With respect to the movement method for emergency medical treatment, Travel Assistant or its authorized representative will decide and determine the method and type of movement, and the destination, which may include cost of patient transport vehicle by air, sea, land, train or other suitable transport methods, and based on necessary medical treatment.

The coverage specified herein is for expenses for services which are determined and/or prepared by Travel Assistant with respect to transport or medical treatment, and cost of medical tools incurred out of necessity as a result of the transport for emergency medical treatment of the insured person specified in the policy schedule and/or the certificate.

Claim and Submission of Evidence of Loss or Damage

The Policyholder and/or the insured person shall submit the following document to the Company for reimbursement consideration.

1. In case that the insured person is injured or falls sick in a remote area, the insured person should contact a local physician for first aid then Emergency Service Assistant shall determine the evacuation methods and coordinate with the Physician for further treatment.



Additional Exclusions (Only apply to the insuring agreement for the Emergency Medical Evacuation or Repatriation to Country of Domicile Benefits)

The insurance under this insuring agreement shall not cover expenses for emergency medical evacuation and repatriation to the Country of Domicile arising from or as a result of the following causes.

1. Expenses for all services for which the insured person is not obligated to pay or any expense already included in the expenses specified in the traveling schedule.
2. Expenses associated with any service which has not been approved and managed by the authorized company or authorized representative of the authorized company will not be covered except that the insured or travel companion of the insured is not able to notify the authorized company and have good reason. For expenses incurred and cannot be controlled during transportation for emergency medical care or transportation back to domicile. In this case, the company reserves the right to reimburse the insured for the first reserve for the expenses incurred for those services and the maximum amount is not more than the sum insured as specified in the policy schedule and/or the certificate.
3. AIDS, venereal diseases, sexual transmitted disease.



Insuring Agreement

Repatriation of Mortal Remains to Country of Domicile Benefits

Coverage

During the effective period under the terms and conditions of the policy coverage benefits, if the insured person dies within 30 days from the date of such injury or sickness which is sudden and unforeseeable during the insuring period, the Company shall pay the expenses incurred from the repatriation of the body and any expenses necessary for funeral ceremony including costs of casket, embalming, cremation at the place the insured person dies and the expenses incurred from repatriation of the body or ashes to the Country of Domicile by Emergency Service Assistant or the representative of Emergency Service Assistant who is authorized by the company and charges the expenses directly to the company that it does not exceed the maximum sum insured specified in the schedule and/or the insurance certificate.

Claim and Submission of Evidence of Loss or Damage

The policyholder and/or the insured person shall submit the following document to the Company for reimbursement consideration.

1. Contact and inform the emergency assistant without delay.
2. The beneficiary or relative or relevant person must collect the necessary documents for claiming compensation in the event that the insured dies completely to the company within 30 days from the date of death.

Additional Exclusions (Only apply to the insuring agreement for the Repatriation of Mortal Remains to Country of Domicile Benefits)

The insurance under this insuring agreement shall not cover expenses for the repatriation of Mortal Remains to the Country of Domicile arising from or as a result of the following causes.

1. Expenses for all services for which another person must be legally responsible for the insured person or any expense already included in traveling expenses for which the person arranging the trip or the transport company must be responsible.



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2. Any expense for the repatriation of the body of the insured person that is not approved or arranged by the Emergency Service Assistant.
3. AIDS, or a blood test result revealing HIV positive, and other diseases related to AIDS.
4. Venereal diseases, sexual transmitted disease.





Insuring Agreement

Expenses for Visiting the Patient in the Hospital Benefits

Additional Definition

Family member Means Father, mother, grandfather, grandmother, son, daughter, spouse of the insured and father and mother of the spouse.

Majority means Reaching the age of 20.

Coverages

This applies to the circumstance in which the insured person is admitted to the hospital or the medical facility as an inpatient in Thailand as a result of injury or a sickness for over 5 consecutive days and the insured person's condition dictates that it is not possible to leave a hospital. In addition, no family member with the age of majority stays with the insured person in Thailand

The company will pay actual amounts of travel expenses by plane in the economy class, by first class train or ship and accommodation and meals up to the sum insured as specified in the policy schedule and/or the certificate, to the family members of the insured person, maximum 2 persons. The amount paid shall not exceed the sum insured as specified in the policy schedule to allow the family members of the insured person to visit the insured person in Thailand.

The authorized company will arrange an economy-class round-trip air ticket, a first-class train ticket or a ship ticket, accommodation and meals for up to 2 family members of the insured person per trip. The authorized company shall compensate for the cost of patient visit until the insured person is confirmed by a doctor that he/she is fit for travelling back to domicile, up to the sum insured as specified in the policy schedule and/or the certificate.

Additional conditions (Only apply to the insuring agreement for the Expenses for Visiting the Patient in the Hospital Benefits)

1. The medical condition of the insured person prevents the insured person from leaving a hospital. Furthermore, the instruction by the respective doctor bans the relocation of the insured person.



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2. The insured person is not accompanied by a family member who is of legal age during his/her stay at the hospital or the medical facility.





Insuring Agreement

Loss or Damage of Travel Documents Benefits

Additional Definitions

Travel Documents	means	passport, green card, visa, driving license, travel ticket or trip ticket, transportation ticket.
Travel Card	means	a travel card the insured person uses for paying travel fare to service providers of land, water, or air transportation which operate with a legal transportation license.
Theft	means	taking of the property of another person or joint owner in bad faith.
Burglary	means	theft presenting signs of breaking-in by any person who enters or exists the location at which the insured person property is kept by using aggressive force and causing a clear trail of damage to the said location by use of tools, explosives, electricity, or chemicals, or arising from Robbery or Gang Robbery, including Loss or Damage arising from an attempt thereof.
Robbery	means	Robbery by committing an act of violence or threatening to do any act of violence immediately in order to facilitate the theft or taking away of property; obtaining delivery of the property; taking hold of the property or concealing the commission of such offense; or avoiding arrest.
Gang Robbery	means	Robbery committed by three persons or more.

Coverage

The Company will pay compensation to the insured person for the actual amount paid up to the sum insured as specified in the policy schedule and/or the certificate for the cost of applying for a new travel document, additional travel and accommodation fees to apply for the new travel document, lost travel documents due to the fact that the insured person is stolen, robbed, burgled, or theft, or the insured person encounters natural disasters (such as typhoons, tsunamis, earthquakes, etc.) while being Thailand.

The insured person shall submit a report of such loss to competent police officers in the area within 24 hours of the incident. The claim shall involve a daily record of the competent police officer.



Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Copy of Identification card of the insured person.
4. Copy of Daily report of a local police officer.
5. Other evidence the company requires as necessary.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Additional Exclusions (Only apply to the insuring agreement for the Loss or Damage of Travel Documents Benefits)

The insurance under this insuring agreement shall not cover expenses or loss of travel documents arising from or as a result of the following causes:

1. No report of loss is made to the competent police officer in the area within 24 hours after the incident and/or without the daily records of the competent police officer.
2. The loss is a consequential result of failure, forgetfulness and ignorance of the insured person to take appropriate care and precaution for the security of travel documents.
3. The request fee for travel documents for a certain country is not included in the travel plans of the insured person.
4. Loss or damage of unknown causes.
5. The actions of the insured person while under the influence of alcohol, addictive drugs, narcotic drugs to the extent of being unable to control one's mind. The term "under the influence of alcohol" in case of having a blood test refers to a blood/alcohol level of 150 mg percent and over.
6. While the insured person joins the fight or contributes to provoking controversy.
7. When the insured person commits a crime or while being arrested or escaping arrest.
8. Loss due to exchange rate or depreciation of the document.



Insuring Agreement
Public Liability Benefits

Additional Definition

Third Party means any persons who are not the relatives stay with the insured person, employee and business partner of the insured person.

Coverage

The insurance policy covers legal liability to third party of the Insured person which accidentally occurs during the insurance period specified in the schedule and/or the certificate. The company on behalf of the insured person shall compensate the actual amount the insured person has to be legally responsible for which deducts the deductible (if any) but not exceeding the sum insured stated in the schedule and/or the certificate for the result of the damage as following:

1. The death of injury resulting from accident of the third party.
2. Loss or damage to the third party's property resulting from accident.

Specific Condition (Only apply to the insuring agreement for Public Liability Benefits)

The insured person shall not take any action representing agreement to indemnify or be liable for the Third Party or any other injured person, or which constitutes filing of a lawsuit or defense of the case without written consent from the Company

Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Copy of Identification card of the insured person.
4. Copy of Daily report of a local police officer.
5. Other evidence the company requires as necessary.



Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Additional Exclusions (Only apply to the insuring agreement for Public Liability Benefits)

The insurance under this insuring agreement shall not cover public liability arising from or as a result of the following causes:

1. The deductible that the insured person has to be responsible for as specified in the policy schedule and/or the certificate (If any)
2. Loss or Damage of the property owned by, or legally in possession or under control of the insured person.
3. Loss or Damage relating to any liability assumed under contract.
4. Loss or Damage relating to the willful or spiteful act, act of gross negligence, or illegal act of the insured person.
5. Expenses for criminal proceedings.
6. The Insured participates in rally racing.
7. Exemplary or multiple damages.
8. Loss or Damage of rented equipment or the equipment for rent.



Insuring Agreement

Trip Cancellation or Postponement Benefits

Additional Definitions

Serious Injury or means the insured person and /or family member of the insured person who

Sickness

requires medical treatment by a legally licensed Physician and Serious Injury or Sickness causes the insured person and / or family member of the insured person being certified by the Physician as unfit for the trip or continue with the trip.

Family Member means father, mother, grandfathers, grandmothers, son, daughter, spouse of the insured person, and father, mother of the spouse.

Coverage

This insurance provides coverage in case of the insured person's trip cancellation or postponement occurs within 30 days before the date of departure which causes the insured person cannot travel as scheduled resulting from these specified events (except the event in 3) as follows:

1. Death or Serious Injury or Sickness of the insured person or his or her Family Member.
2. Strike, riot, or civil war, political turmoil which is unexpected and uncontrolled by the insured person.
3. The insured person's permanent residence is seriously damaged from fire, flood or similar natural disasters such as typhoon and earthquake within 7 days before departure, resulting in the insured person being unable to travel as scheduled.
4. Summoned to be a witness at a court, or a writ of execution by a court.

The Company will compensate for the actual expenses of the insured person up to the sum insured as stated in the policy schedule and/or the certificate for the loss or the damage caused by the cancellation or postponement of the trip i.e. trip deposit, advanced air ticket and/or accommodation and meal that the insured person has advanced. The sum is only for the loss or the damage that has not been reimbursed by



other agency and is a consequence of cancellation or postponement prior to the departure day, and/or expenses that the insured person is liable to by law. The coverage shall be effective only when the insured person has been insured before becoming aware of any event which may cause such cancellation or postponement.

The benefit coverage agreement of trip cancellation or postponement shall commence on the day the insured person enters into this insurance policy.

In case the insured person claims for the reimbursement from this insuring agreement, the coverage of this insurance policy shall become terminated.

Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. The letter from the airline of the insured person.
3. Copy of passport or travel evidence of the insured person.
4. Copy of Identification card of the insured person.
5. Medical certificate in case that the trip cancellation resulting from the critical injury or sickness of the insured person and/or family member of the insured person.
6. Copy of death certificate in case of trip cancellation is resulting from the death of the insured person and/or family member of the insured person.
7. Other evidence the company requires as necessary

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.



Additional Exclusions (Only apply to the insuring agreement for the Trip Cancellation or Postponement Benefits)

The insurance under this insuring agreement shall not cover Trip Cancellation or Postponement arising from or as a result of the following causes:

1. Any Loss or Damage arising from the government's control or rules
2. Any Loss or Damage arising from regulations bankruptcy lack of liquidity in debt repayment, or lack of debt repayment by the travel agency or carriers which causes trip cancellation.
3. Any loss or damage under the coverage of other effective insurance policies, public projects or compensation by other sources i.e. hotel, airline, tourist agency or other operators who are responsible for travel, meal and accommodation.
4. AIDS, venereal diseases, sexual transmitted disease.
5. Being insured under this insuring agreement less than seven (7) days before the date of departure (except in the case of death or serious injury of the insured person or his or her Family Member).
6. Trip cancellation or Postponement resulting from financial status or changing travel plans of the insured or family members.
7. Epidemic disease or the disease transmission.
8. Trip cancellation or Postponement resulting from any causes that the insured person being aware before applying for this insuring agreement.
9. Trip cancellation resulting from the Pre-existing conditions.
10. Business loss or damage, business obligation or the insured person's or its family member's commitment.
11. The loss or damage to the insured person's travelling privileges.
12. Trip cancellation resulting from the illegally action committed by the insured person or the insured person being prosecuted.
13. Trip cancellation or Postponement in which the insured person fails to inform at once the tourist agency or a tour manager or transport service or accommodation provider when the insured person realizes that the delay or cancellation is compulsory to the arranged trip, unless there is a reasonable cause that prevents an immediate communication to the tourist agency, and the insured person has informed the tourist agency as early as possible.



Insuring Agreement Trip Curtailment Benefits

Additional Definitions

Serious Injury or means the insured person and /or family member of the insured person who

Sickness requires medical treatment by a legally licensed Physician and Serious Injury or Sickness causes the insured person and / or family member of the insured person being certified by the Physician as unfit for the trip or continue with the trip.

Family Member means father, mother, grandfathers, grandmothers, son, daughter, spouse of the insured person, and father, mother of the spouse.

Coverage

This insurance policy covers additional expenses paid by the insured person for travel, accommodation and meal during the period of insurance, and/or a fine or expenses occurred as a result of premature return to domicile by the insured person due to the following causes:

1. Death, or Serious Injury or Sickness of the insured person and doctors recommend getting back
2. Family members of the insured's Death, or Serious Injury or Sickness.
3. A natural disaster such as typhoon or earthquake.
4. Strike, riot, or civil war, political turmoil which is unexpected and uncontrolled by the insured person.
5. Being quarantined as the Physician's advice.

The Company will compensate the actual expenses, up to the sum insured as stated in the policy schedule and/or the certificate for additional expenses by airplane, land or ship (economy class, if possible), accommodation, lost travel expense and/or advanced accommodation or a seized deposit of the insured person after a trip takes places, due to the above-mentioned causes. The coverage includes expenses stemming from the extension of a trip involving a quarantine as advised by the doctor.



Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. The letter from the airline of the insured person.
3. Copy of passport or travel evidence of the insured person.
4. Copy of Identification card of the insured person.
5. Medical certificate in case that the trip curtailment resulting from the critical injury or sickness of the insured person and/or family member of the insured person.
6. Copy of death certificate in case of trip curtailment is resulting from the death of the insured person and/or family member of the insured person.
7. Other evidence the company requires as necessary.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Additional Exclusions (Only apply to the insuring agreement for the Trip Curtailment Benefits)

The insurance under this insuring agreement shall not cover trip curtailment arising from or as a result of the following causes.

1. Curtailment due to the insured person being disturbance from mental disorder, insanity and peripheral neuropathy.
2. AIDS, or a blood test result revealing HIV positive, and other diseases related to AIDS.
3. Venereal disease or any sexually transmitted diseases (STD).
4. Trip curtailment resulting from any causes that the insured person being aware before applying for this insuring agreement.



Insuring Agreement Travel Delay benefit

Coverages

This insurance's coverage is applicable to a travel by airplane, ship or train by the insured person that is delayed for at least 6 hours in a row from the original schedule as stated in the policy schedule and/or the certificate, due to the following causes:

1. Unsuitable climate that forces airplane, ship or train operators to delay the trip for the safety of passengers.
2. Deficiency, malfunction, defect and glitch of mechanism or electricity system of the machines of aviation, ship or train equipment.
3. Protest or strikes of the employees of airplane transport operators or an airport, a ship or train.

The insured person shall submit evidence issued by the transport provider detailing the specified time and causes of such delay issued. The Company will compensate for the delay as per the sum insured to the insured person for every 6 hours of the delay as state in the policy schedule and/or the certificate.

The Insuring Agreement of Delay of the insured person who arrives in Thailand, the coverage shall commence at the period of the insured person's departure from a home only for a travelling purpose.

Claim and Submission of Evidence of Loss or Damage

Insurance policy holder and/or the insured must submit the following evidence to the company within 30 days from the date of the accident at the expense of the insured

1. Claim form prescribed by the company
2. Copy of the insured's passport or travel proof
3. Copy of the insured's identity card
4. Confirmation letter from the authorized person responsible for the trip. along with specifying the date of the incident, the reason, and delay time
5. Other evidence requested by the company as necessary.

Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it



can be provide that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Additional exclusion (Only apply the insuring agreement for Travel Delay Benefit)

The insurance under this insuring agreement shall not cover travel delay resulting from the following causes:

1. The insured person's ticket intentionally fails to be inspected before boarding the airplane, the ship or the train at the time specified in the trip's details provided to the insured person and a failure to obtain a letter of guarantee issued by the transport operator or an agency responsible for the delaying hours and the cause of the delay.
2. A strike or an industrial dispute of the aviation transport operator, airports, vessels, trains that occurs before the time of making an insurance contract by the insured person.
3. Delays caused by service cancellation of the logistics operators that are responsible by instruction or some advice from the relevant control organization or the government of certain country.
4. The insured arrive at the airport or port or train station later than the time of checking the ticket before boarding. (except that the trip is delayed because of a strike or an industrial dispute of the operator of airplane, airport, ship or train).
5. Government's requirements or laws, delays or changes in booked trip, including errors, negligence or defaults by service providers that are part of any booked trip, whether by travel agencies or tour operators who book the trip.
6. Loss or damage to the insured person's travelling privileges.
7. The damage in which the insured person does not have a letter indicating the cause of delay and duration of delay issued by the airline, ship or train or ticket agency.
8. The insured person who fails to inform the travel agency/tour operator or the logistics operators or accommodation operators at once when he/she realizes that there is a need to make a travel later than the arranged trip schedule, unless the insured person can justify that there is a reasonable cause. Thus, cannot immediately notify the company but still do so as quick as possible.



Insuring Agreement

Baggage Delay Benefits

Coverages

This insurance provides coverage in case the insured person's baggage which the officer of the commercial airline takes while check-in is delayed or misdirected to another location temporarily by the airline

The company shall pay compensation in the amount of the sum insured as specified in the schedule for the delay with respect to every six(6) full consecutive hours from the time the insured person arrives the destination in Thailand as the scheduled time until the insured person receives the baggage with the maximum amount specified in the schedule.

A single insured person may not concurrently claim the baggage delay benefits under the insuring agreement, the insuring agreement for the loss or damage of baggage or private effects (if any) for the same event.

Concerning the protection for the Company's subrogation right which is subject to the Company's expenses, the insured person shall do all that is necessary or as requested by the Company, whether before or after receiving a compensation from the Company, to preserve the Company's right to claim to the third party.

Claim and Submission of Evidence of Loss or Damage

The policyholders and/or The insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Copy of Identification card of the insured person.
4. Letter of notification from the authorize person to be responsible for the trip specifying the date of delay, reason and the duration of the delay.
5. Other evidence the company requires as necessary.



Nevertheless, non-compliance within the specified time shall not jeopardize the right to claim if it can be proved that there is reasonable explanation why a claim could not be made in a timely manner and that the claim was filed as soon as possible.

Additional Exclusions (Only apply to the insuring agreement for the baggage delay benefits)

This insurance under the insuring agreement does not cover the baggage delay from the following causes:

1. The insured person does not report to the airline about the delay of baggage immediately.
2. Baggage seized or detained or controlled by customs, immigration and/ or airlines authorized representative or government or policy officer in such country.
3. In case the insured person cannot provide the written document or letter to certify from the airline or the carrier at the date and time the insured person receives the delayed baggage.

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Insuring Agreement

Loss or Damage of Baggage or Personal Effects Benefits

Additional Definitions

Personal Effects	means	the insured person's effects carried with the insured person while traveling which are not be specified in the exclusion.
Household Effects	means	articles for household use which are not usually carried with a person while traveling, i.e. clothes unnecessary for traveling, kitchenware, and household facilities, furniture, fixture and fittings.
Souvenirs	means	articles that are a symbol or reminder of an event, place or things, and that are sold or given as souvenirs.
Valuables	means	accessories made of gold, silver or precious metals, wool cloths, watch jewelry, or precious stones.
Accessories	means	articles such as rings, bracelets, necklaces, bangles, earrings, pendants, and watches worn as body accessories.

Coverages

This insurance covers Loss or Damage of the insured person's baggage or Personal Effects which are carried with the insured person during the insuring period in the following cases:

1. While the baggage or Personal Effects are under control and care of hotel staff or a transport company. Such Loss or Damage must be certified in writing by management of the hotel or transport company; or
2. away the baggage or Personal Effects, and such Loss or Damage must be reported by the insured person to a police officer at the place of the loss or damage which the claim for indemnity must have the police report.

The Company shall compensate as agreed for this insuring agreement deducted the deductible (if any) for Loss or Damage of baggage or Personal Effects carried in the insured person's baggage during the insuring period as specified in the policy schedule. The Company shall compensate as follows:

1. The Company shall compensate for Loss or Damage of items which does not exceed the sum insured per item, pair or set, as specified in the schedule.



2. The Company may compensate in cash, or choose to compensate by restoration or repair in the case that such item is no more than one year of age.

3. The Company may compensate in cash, or choose to compensate by restoration or repair, in which the Company shall deduct depreciation upon wear and tear being accepted, and depreciation in the case that such item is more than one year of age.

The insured person shall not claim for the reimbursement under the insuring agreement of Loss or Damage of Baggage or Personal Effects Benefit and the delay of baggage benefit at the same time.

Specific Conditions (Only comply with the Insuring Agreement for Loss or Damage of Baggage or Personal Effects Benefits)

1. The insured person must report Loss or Damage incurred to a police officer or any officer responsible for aircraft, ship or vehicle on which the insured person is traveling, and must obtain written evidence of the report thereof from an authorized person of that vehicle, unless such act cannot be done due to necessity or being in the incident which prevents the insured person from doing so.

2. The insured must take all reasonable acts to prevent and protect the insured property, and if the property is lost or damaged, the insured person must immediately report a police officer, officer of a hotel or transport company, or authorized person of the office of terminal.

3. If the Company has paid indemnity under this Policy, the Company shall be subrogated to the insured person's rights to exercise claims against any person or organization only for the part for which the Company had paid indemnity. The insured person shall cooperate with the Company by submitting documents and taking necessary actions to protect all such rights and shall not take any action which damages the company.

4. The insured person must take every procedural step to ensure that the insured person's baggage or personal effects are reasonably taken care of.

Claim for Loss or Damage of Baggage or Personal Effects Benefits

The policyholder and/or the insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring.

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.



3. Copy of Identification card of the insured person.
4. Letter certifying Loss or Damage incurred from the management of the hotel or transport company in the case that such Loss or Damage is under supervision of the hotel staff or Transport Company.
5. List and prices of the lost or damaged items.
6. Daily report of a local police officer in the case that Loss or Damage incurs due to threat or violent force.
7. Other evidence the company requires as necessary.

Specific Exclusions (Only comply with the Insuring Agreement for Loss or Damage of Baggage or Personal Effects Benefits)

The insurance under this insuring agreement shall not cover Loss or Damage of baggage or Personal Effects resulting from the causes as followings:

1. The deductible which the insured person must be responsible as specified in the policy schedule (if any).
2. Animals, automobile (including accessories) Motorcycles, boats, engines, any other vehicles, snow skiing, household effects, antiques, accessories, valuables i.e. diamond, gold, silver includes all gold ornament and silver ornament, contact lenses, wheelchairs, dentures, artificial limbs, share certificates, travel documents i.e. passport green card visa, driving license, traveling ticket or ticket trip, transportation ticket, handbag or the bag which is not traveling, purse, cash, banknotes, coin or souvenirs, glasses, food or supplementary and electronics device i.e., mobile phone, camera, VDO camera, tablet, compact computer (include accessories and program) and extension cord set.
3. Loss or Damage caused by wear and tear, deterioration, biting by insects or rodents, hidden defects, or damage incurred from any operation to repair, clean, modify or fix any property.
4. Loss or Damage of equipment that is rented or for rent.
5. Seizure or destruction of property under the regulations of customs, forfeiture of property under the order of a government. Carriage of illegal goods or any other conduct contrary to the law.
6. Loss or Damage for which compensation is made by other sources, i.e. property insured person under other policies, compensation from a transport company, hotel or airline.



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7. Loss or Damage to the insured person's baggage or personal effects in the baggage that are sent in advance, souvenir and thing mailed by post, or shipped, or sent separately and not with the insured person.
8. Insured person forgets the baggage in any vehicles or public place or loss or damage as a result of the insured person's negligence to take reasonable care and precaution for the safety of such property.
9. Loss or Damage of goods, goods samples or any type of equipment.
10. Loss or Damage of information recorded on tapes, floppy disks, diskettes, note cards, or the like.
11. Loss of unknown cause.
12. Loss or Damage that the insured person has been compensated by other insurance companies or airlines.

A large, semi-transparent watermark of the Tune Protect logo is centered on the page. It consists of the word "Tune" in a white script font above the word "Protect" in a white sans-serif font, all set against a light pink circular background.



Insuring Agreement First Liability for rental cars

Coverages

This insurance provides coverage for any deductible of the voluntary car insurance policy for the car rented by the insured. In the event that the insured is legally liable to compensate for loss or damage incurred during the insured period in Thailand.

Specific coverage conditions (Applies only to the First Liability for rental cars Agreement)

1. The said vehicle must be rented from a car rental company that has a car rental business license.
2. The car rental contract must require the insured to purchase first-class car insurance to cover loss or damage to the rental car during the rental period.
3. The Insured must comply with all conditions of the Rental Car Company under the Rental Agreement, and the conditions of the insurer under the said insurance contract including the laws, rules and regulations of Thailand's traffic.

Claims for First Liability for rental cars Benefit

The insurance policy holder and/or the insured. The following evidence must be submitted to the Company within 30 days from the date of the incident at the expense of the Insured.

1. Claim form prescribed by the company.
2. Copy of passport and/or proof of travel of the insured.
3. Copy of the insured's identification card.
4. A copy of the local police's diary at the scene of the accident.
5. Documents or evidence as required by the company as necessary (if any).

Failure to submit evidence within the said period does not impair the right to claim. If it can be demonstrated that there are reasonable grounds for failing to submit evidence within the specified period, but delivered as soon as possible.



Specific exception (Applies only to the Rental Car Deductible Benefit Agreement)

Insurance under this insuring agreement It does not cover deductibles for Rental Cars arising from or as a result of the following reasons:

1. Loss or damage caused by driving of the rented vehicle in violation of the terms of the lease or loss or damage occurring outside the public road area. or due to violations of national laws, rules and regulations.
2. Loss or damage caused by wear and tear deterioration Damage from insects or animals biting or gnawing defect or damage that does not show a trace.



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Insuring Agreement

Golf equipment benefit and Hole-in-one benefit

Specific Definitions

Golf equipment	means	Golf clubs, golf bags or golf carts
Public place	means	Public or private places that are open or allow the general public to use the service according to the opening hours. regardless of whether there is a fee charged or not.

Coverages

This insurance provides coverage as follows:

1. Loss or damage of golf equipment

This insurance covers golf equipment carried by the insured as well as newly purchased during the insured period in Thailand. In the event the loss or damage of golf equipment occurs in a public place during the insurance period in Thailand of the Insured

Specific coverage conditions (Applicable only for golf equipment coverage benefits and Hole-in-One only)

When the insured's golfing equipment is lost or damaged The insured must notify the police. or the relevant authority, i.e. hotel, airline, golf course or public golf practice who has the authority to supervise the lost or damaged site within 24 hours from the time of the incident. and must also attach a written record of the said authority with the claim.

The insured must take all possible actions. to ensure that their golf equipment

- a) not be left unattended in a public place; and
- b) must take all reasonable means of protection. to keep the device in a safe manner

The Company shall compensate the Insured for actual loss or damage of golf equipment to the Insured up to the sum insured as stated in the Policy Schedule and/or insurance certificate for one device or one pair or one set. The Company may pay compensation or choose to provide a replacement. or repair golf equipment by deducting wear and tear and depreciation expenses In the event that the company



estimates the damage that has already occurred, it is not worth repairing. The Company will compensate the Insured as if the device was lost.

2. Special prizes for Hole-in-One

2.1 In the event that the Insured can perform hole-in-one in an Official Tournament under the Rules of a competition held on any standard 18-hole golf course in Thailand that is open to the public. and the hole-in-one has been signed and certified by the contestants The field manager and the insured race organizer are entitled to receive a prize money of not more than 15,000 baht.

2.2 In the event that the Insured is able to perform hole-in-one playing golf other than the competition specified in 2.1 and the hole-in-one is done on a standard golf course in Thailand and certifies by field manager The insured is entitled to receive a prize of not more than 10,000 baht.

The insured will receive a special prize for Hole-in-One. Only once throughout the insurance period

Limitation of Liability (Applicable only to the Golf Equipment Coverage Benefit Coverage Agreement and hole-in-one only)

1. Throughout the insurance period The Company will pay benefits under the Golf Equipment and Hole-in-One Benefit Coverage Agreement. The total amount does not exceed the amount specified in the insurance policy schedule. and/or insurance certificate.

2. Insurance under the coverage in this insuring agreement Any insured can claim indemnity in the Golf Equipment and Hole-in-One Benefit Coverage Agreement. or the insuring agreement for loss or damage of baggage or personal belongings can only be one of the insuring agreements.

Claim for Golf equipment benefit and Hole-in-one

The policyholder and/or insured person shall submit the following evidence to the Company with his/her expense within 30 days from the date of event occurring

1. Claim form as prescribed by the Company.
2. Copy of passport or travel evidence of the insured person.
3. Copy of Identification card of the insured person.
4. Other evidence the company requires as necessary.



Specific exception (Applicable only for golf equipment coverage benefits and hole-in-one only)

Insurance under this insuring agreement does not cover golf equipment and hole-in-one coverage benefits, arising from or as a result of the following reasons:

1. Loss or damage of golf balls and/or clubs during actual play on the golf course, or practicing hitting on the training ground.
2. Loss or damage caused by wear and tear or damage caused by the repair process or while making repairs as a result of such damage.
3. Loss or damage resulting from an intentional act or gross negligence of assured.
4. Loss or damage resulting from confiscation or withheld by customs or government officials.
5. Loss or damage covered by any other insurance policy.



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Section 5 Attachments

If the statement in the attachments are contrary to those in the policy, the statement in the attachment shall prevail.

Other conditions and exclusion under this insurance shall remain effective.





Endorsement of Automatic Extended Term

(It's used as the endorsement for Domestic travel insurance policy)

(Sell through electronic channel (Online))

Company code:

The endorsement no. -	is a part of policy no.: as specified in the schedule Documentation Date: -
Name-Last name of Insured person: as specified in the schedule	
Insurance period: as specified in the schedule	

It is hereby agreed that if anything specified in this endorsement is contrary to the policy wording, the clause in this endorsement shall prevail and all other term and conditions this policy remain unaltered.

Additional Definition

“Unpredictable Event” means weather-permitting to operate the flight due to the natural disaster, defect of aviation equipment in case of the engine failure, changing the size of aircraft, loss of travelling documents. In case that the insured person is not allowed to get on the aircraft due to fully booking or resulting from sickness or injury occurring to the insured person.

Automatic Extended Term

It is hereby agreed in the insuring period of this endorsement that the insuring agreement shall extend the term to cover the return trip of the insured person which is delay due to the unexpected event uncontrolled by the insured person. The company shall extend the term as necessary to cover until the round trip is ended without additional premium or any expense, but not exceeding the days specified in the policy schedule and/or the certificate.



Endorsement of Extreme Sports

(It's used as the endorsement for Domestic travel insurance policy

(Sell through electronic channel (Online))

Company code:

The endorsement no. -	is a part of policy no.: as specified in the schedule Documentation Date: -
Name-Last name of Insured person: as specified in the schedule	
Insurance period: as specified in the schedule	

Extension of coverage: to be agreed during the effective period as set forth in this annex. Insurance policies mentioned above has been extended to cover any loss or damage arising from or continually or occurs at the following times However, only in the insuring agreement that the sum assured is specified in the table below.

“Extreme Sports” means Racing or boat racing, horse racing, ski racing of any kind, including jet skis, skating, boxing, parachuting (except for lifesaving parachutes) while going up or down. or ride in a balloon or glider bungee jumping Diving that requires an underwater tank and breathing apparatus.

The liability of the Company shall not exceed the sum assured as specified in this attachment.

If the information in this annex is contrary to or conflicts with the contents of the insurance policy, the text in this attachment shall be used instead.

The terms of the insurance contract and other exceptions the insurance policy will remain in force as before.