

### Transat

# **Rental Vehicle Damage Policy**

Effective August 27, 2020

Underwritten by

First North American Insurance Company, a wholly owned subsidiary of The Manufacturers Life Insurance Company (Manulife).

### **NOTICE REQUIRED BY PROVINCIAL LEGISLATION**

This policy contains a provision removing or restricting the right of the insured to designate persons to whom or for whose benefit insurance money is to be payable.

### Important Notice - Read Carefully Before You Travel

You have purchased a travel insurance policy - what's next? We want you to understand (and it is in your best interest to know) what your policy includes, what it excludes, and what is limited (payable but with limits). Please take time to read through your policy before you travel. **Italicized terms are defined in your policy.** 

- Travel insurance covers claims arising from sudden and unexpected situations (i.e. accidents and emergencies) and typically not follow-up
  or recurrent care.
- To qualify for this insurance, you must meet all of the eligibility requirements.
- This insurance contains limitations and exclusions (i.e. medical conditions that are not stable, pregnancy, child born on trip, excessive use of alcohol, high risk activities).
- This insurance may not cover claims related to pre-existing medical conditions, whether disclosed or not at time of policy purchase.
- Contact the Assistance Centre before seeking treatment or your benefits may be limited.
- In the event of a claim your prior medical history may be reviewed.
- If you have been asked to complete a medical questionnaire and any of your answers are not accurate or complete, your policy will be voidable.

It is your responsibility to understand your coverage. If you have questions, call 1 800 263-2356.

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IN THE EVENT OF AN EMERGENCY, CALL:	IN THE EVENT OF AN EMERGENCY, CALL:
1-800-764-6539	1-800-764-6539
Toll-free from the USA and Canada	Toll-free from the USA and Canada
+1 (519) 251-7488	+1 (519) 251-7488
Collect to Canada where available	Collect to Canada where available
**transat	<b>transat</b>
NAME	NAME
POLICY #	POLICY #

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**THIS POLICY IS UNDERWRITTEN** by First North American Insurance Company (FNAIC), a wholly owned subsidiary of The Manufacturers Life Insurance Company (Manulife). Manulife has appointed Active Claims Management (2018) Inc. (operating as "Active Care Management") as the provider of all assistance and claims services under this policy.

### 10-Day Free Look to Review this Policy

You have 10 days from your insurance purchase date to review this policy. If it does not meet your needs, you may terminate this insurance coverage and receive a premium refund if:

- (i) you have not departed on your insured trip; and
- (ii) there is no claim in progress.

To request a premium refund, simply contact *your* distributor of Transat Travel Insurance from whom *you* purchased the insurance.

After the 10-Day Free Look, refund of premium is not available.



Everyone wants to have a carefree trip and should be able to travel with confidence in their travel insurance purchase. Most people travel every day without a problem, but if something does happen, the member companies of the Travel Health Insurance Association of Canada (THiA) want you to know your rights. THiA's Travel Insurance Bill of Rights and Responsibilities builds on the golden rules of travel insurance:

Know your health • Know your trip Know your policy • Know your rights

For more information, go to www.thiaonline.com

# TRANSAT RENTAL VEHICLE DAMAGE POLICY

# IMPORTANT INFORMATION ABOUT YOUR TRAVEL INSURANCE

It is important *you* read and understand *your* policy before *you* travel. It is **your** responsibility to review the terms, conditions and limitations outlined in this policy.

Our Assistance Centre is there to help you 24 hours a day, every day of the year.

**1-800-764-6539** toll-free from the USA and Canada **+1-519-251-7488** call collect where available

Our Assistance Centre can also be contacted through the **ACM TravelAid™** mobile application.

**ITALICIZED WORDS** have a specific meaning. Please refer to the "Definitions" section of this *policy* to find the meaning of each italicized word.

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If you need medical attention or must make any other type of claim during your trip, call us for assistance first. The Assistance Centre is open 24 hours a day, every day of the year.



2

Before *you* travel download the free assistance & claim mobile app. **ACM TravelAid™**.



If you need medical attention or must make any other type of claim during your trip, call us for assistance first.

The Assistance Centre is open 24 hours a day, every day of the year.



Before you travel download the free assistance & claim mobile app, ACM TravelAid $^{\text{TM}}$ .



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### INTRODUCTION

### **Policy Contract**

This is *your* insurance *policy*, a contract detailing the terms and conditions of the insurance coverage *you* purchased. *Your application*, this *policy* and any riders or endorsements to it shall form the entire contract between *you* and the company. The company has sole authority for changing or waiving any of the terms, conditions or provisions stated in this *policy*.

#### How to contact us

Prior to travelling, or when travelling and *you* require *emergency* assistance, call:

**1 800 764-6539** toll-free from the USA and Canada **+1 (519) 251-7488** collect where available.

For coverage information or general enquiries, please contact Transat Travel Insurance Customer Service Centre at

1 800 263-2356.

### **SCHEDULE OF BENEFITS**

RENTAL VEHICLE DAMAGE POLICY		
Eligible Age	As required by the rental company	
Rental Vehicle Damage	Up to \$50,000	

### **POLICY PARAMETERS**

The Transat Rental Vehicle Damage *Policy* is available to persons who have made travel arrangements with Transat Distribution Canada or through a distributor of Transat Travel Insurance or through an internet site made available by Transat Distribution Canada. Travel insurance must be purchased based upon *age*, length of travel and other restrictions set forth in this *policy*.

AGE	LENGTH OF TRAVEL	OTHER CONDITIONS
As required by the rental company	Rental period up to 50 days	Must meet licensing requirements as per the contract terms of the rental company.      Valid only for rental vehicle booked through Transat Distribution Canada.

The *Company* will reimburse eligible expenses and/or pay benefits for covered losses, subject to the terms, conditions, limitations and exclusions stated in this *policy*.

### PERIOD OF COVERAGE

The period of coverage under this *policy* shall not exceed 50 days.

This insurance must be purchased prior to departure from *your* province or territory of residence in Canada.

## THE DATE YOUR COVERAGE STARTS / YOUR EFFECTIVE DATE OF COVERAGE

**Coverage** starts when *you* legally assume control of the *rental vehicle*.

## THE DATE YOUR COVERAGE ENDS / YOUR COVERAGE EXPIRY DATE

Coverage ends the earliest of:

- a) the date the rental agency reassumes control of the rental vehicle;
- b) the end date of the rental contract; or
- c) 50 days after the rental contract started.

#### **Automatic Extension**

The *company* will extend *your* coverage automatically beyond the date *you* were scheduled to return *home* as per *your application* if:

- a) *your common carrier* is delayed. In this case, the *company* will extend *your* coverage for up to 72 hours; or
- b) you or your travel companion is in hospital on that date. In this case, the company will extend your coverage while in hospital and for up to 5 days after discharge from the hospital; or
- c) you or your travel companion has a medical condition that does not require admission to hospital but prevents travel. In this case, the company will extend your coverage for up to 5 days.

In all cases, the *company* will not extend any coverage beyond 12 months after *your effective date* of insurance.

### What If I Stay Longer Than Planned?

**Extensions:** If you have not left home, simply call your distributor of Transat Travel Insurance to ask for the extension. If, however, you are already on your insured trip and need to apply for an extension of your coverage before the expiry date of your existing coverage, simply call your distributor of Transat Travel Insurance. You may be able to extend your coverage, subject to an extra premium. Otherwise, the extension is subject to the approval of the Assistance Centre.

**To Apply for Cancellation of Your Policy** *You* may cancel *your policy* by contacting *your* distributor of Transat Travel Insurance before the *policy effective date*. Additionally, if the commercial rental agency declines your Transat Rental Vehicle Damage Insurance, we will fully refund the premium of the Rental Vehicle Damage Insurance.

### RENTAL VEHICLE DAMAGE INSURANCE

### **Benefits - What does Rental Vehicle Damage Insurance cover?**

Insurance under this section applies when *you* book a *rental vehicle* from a licensed commercial car rental agency through the travel agent from whom *you* have purchased *your* insured travel arrangements. Coverage is for physical loss or damage to the *rental vehicle* only while the *rental vehicle* is under *your* care and custody or under the care and custody of a person permitted to operate the *rental vehicle* under the terms and conditions of the rental agreement. Coverage under this section may be purchased for up to **50 days** per insured trip. The aggregate maximum liability under this policy for all damages or loss of the *rental vehicle* is **\$50,000**, subject to the following conditions:

- 1. The liability was imposed upon *you* by law or assumed by *you* under the rental agreement, if there was physical damage to the *rental vehicle*.
- 2. When condition 1 above has been met, the *company* will perform the following services on *your* behalf:
  - a) investigate, negotiate or settle any claim as deemed appropriate by the *company*;
  - b) defend in *your* name and on *your* behalf and at cost to the *company*, any civil action which may be brought against *you* on account of such loss or damage;
  - c) pay all costs assessed against you in any civil action defended by the company, plus any interest accruing after judgment on that part of the judgment which is within the limit of the company's liability; and
  - d) pay the reasonable towing costs, salvage, fire department charges, custom duties and the reasonable loss of use charges for the *rental vehicle* for which you are responsible.
- 3. Coverage is valid only if *you* book the *rental vehicle* with the travel agent with whom *you* have booked *your insured trip*.
- 4. The terms and conditions of the rental agreement or contract have not been violated.
- 5. Not more than one *rental vehicle* is in *your* care and custody at any one time.

- The rental vehicle is rented from a duly authorized and licensed commercial car rental agency, and is not used for hire or commercial delivery.
- 7. You must examine the *rental vehicle* prior to acceptance for any existing damages, and request and retain a copy of the written record of any pre-existing damages for submission to the *company* in the event of a claim.
- 8. No repairs must be undertaken other than those which are immediately necessary for the protection of the *rental vehicle* from further loss or damage, and no evidence of the physical damage or the loss shall be removed or altered without the *company's* consent.
- 9. Notice of the loss or physical damage to the *rental vehicle* must be reported immediately to the Assistance Centre, and furthermore, written notice of the loss, along with a copy of the police report, must be submitted to the *company* within 30 days after the date the loss or damage was incurred.

# EXCLUSIONS: RENTAL VEHICLE DAMAGE INSURANCE

This insurance does not cover and no benefit is payable for any claim arising from:

- 1. Liability other than for loss or damage to the *rental vehicle*.
- 2. Expenses assumed, waived by or paid for by the commercial rental agency or its insurers, or any other insurance.
- 3. Contents of the rental vehicle.
- 4. Loss or damage arising from, caused by or contributed to by driving or operating the *rental vehicle* while under the influence of intoxicating substances, or while participating in a speed contest.
- 5. Use of the *rental vehicle* for illegal trade or purposes, or transporting contraband.
- Mechanical defect or breakdown, rusting, corrosion, wear and tear and other deterioration.
- 7. Failure to protect or preserve the *rental vehicle*, or neglect and abuse thereof; or contamination however caused.

An official police report and other documented evidence satisfactory to the company must support a claim for this benefit.

### **GENERAL LIMITATIONS ON COVERAGE**

# Applicable to all sections of the *Policy* With respect to "Acts of Terrorism"

Where an *act of terrorism* directly or indirectly causes *you* a loss for which benefits would otherwise be payable in accordance with the terms and conditions of this *policy*, benefits will be payable up to a maximum of **100%** of the sum insured for any eligible loss.

# **EXCLUSION TO THIS TERRORISM COVERAGE PROVISION**

Notwithstanding any provision to the contrary within this *policy* or any endorsement thereto, this *policy* does not cover any liability, loss, cost or expense of whatsoever nature which is directly or indirectly caused by, resulting from, arising out of or in connection with any *acts* of terrorism perpetrated by or involving the utilization of biological, chemical, nuclear or radioactive means, regardless of any other cause contributing concurrently or in any other sequence to the liability, loss, cost or expense.

### **GENERAL EXCLUSIONS**

### Applicable to all sections of the Policy:

This insurance does not cover and no benefit is payable for any claim arising from:

- 1. Consequential loss of any kind, including loss of enjoyment and financial loss not otherwise specifically covered under this *policy*.
- 2. Act(s) of terrorism except as otherwise specifically provided in the General Limitations on Coverage Section of this policy.
- 3. acts of war, whether declared or undeclared;
  - willing participation in a riot or civil disorder;
  - · rebellion:
  - revolution;
  - ionizing radiation or poisoning of people by nuclear, radioactive, chemical and/or biological substances that causes sickness or death from any nuclear fuel or waste which results from the burning of nuclear fuels;
  - radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.
- 4. Participation in armed forces training exercises or manoeuvres.
- 5. *Your* self-inflicted injuries, unless medical evidence establishes that the injuries are related to a mental health illness.
- 6. Your minor mental or emotional disorders.
- 7. Any *medical condition*, including symptoms of withdrawal, arising from, or in any way related to, *your* chronic use of alcohol, drugs or other intoxicants whether prior to or during *your insured trip*.
  - Any medical condition arising during your insured trip from, or in any way related to, the abuse of alcohol, drugs or other intoxicants.
- 8. routine pre-natal or post-natal care;
  - pregnancy, delivery, or complications of either, arising 9 weeks before the expected date of delivery or 9 weeks after.
- 9. Your child born during the insured trip.
- 10. Deliberate termination of *your* pregnancy.
- 11. Any expenses incurred by or on behalf of any person not named as an insured on the *application* for insurance.
- 12. Expenses which are recoverable or could have been recovered from any other source, including but not limited to any individual, group or prepaid employee insurance or private plan, credit card coverage, or *government health insurance plan* or any federal, provincial or other compensation fund.
- 13. Your commission of or attempt to commit any criminal offence or illegal act.
- 14. Fraud, concealment, or deliberate misstatement in relation to any matter affecting this insurance or in connection with the making of any claim hereunder.
- 15. Any *medical condition you* suffer or contract when an official travel advisory was issued by the Canadian government stating "Avoid all non-essential travel" or "Avoid all travel" regarding the country, region or city of *your* destination, before the *effective date*.

To view the travel advisories, visit the Government of Canada Travel site.

This exclusion does not apply to claims for an *emergency* or a *medical condition* unrelated to the travel advisory.

### **DEFINITIONS**

When italicized, the following words are defined as:

**Acts of Terrorism** or **Terrorism** means any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems. The intention of such activity is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a sitting government or occupying power; and/or
- promote political, social, religious or economic objectives.

Age means your age at time of application.

**Application** means the printed form, computer printout, invoice or document which is used to make an *application* for this insurance as provided by *your* travel agent or the multi-stepped forms that must be completed by the applicant when purchasing the insurance electronically through the website made available by Transat Distribution Canada. The *application* confirms the insurance coverage *you* have purchased, sets forth the departure date, *departure point* and *return date* of the *insured trip*, and forms an integral part of the *policy* contract. It may also include tickets or receipts issued by an airline, travel agent, tour operator, rental agency, cruise line or other accommodation or travel provider with whom arrangements were made for *your insured trip*.

**Common Carrier** means a conveyance (such as a bus, taxi, train, boat, airplane) which is licensed, intended and used to transport paying passengers.

**Company**, **we**, **us**, **our**, means The Manufacturers Life Insurance Company and First North American Insurance Company.

**Departure Date** means the date *you* leave *home* on *your insured trip*. **Departure Point** means the place *you* leave from on the first day of coverage and are scheduled to return or ticketed to return to on the last day of coverage.

**Effective Date** means the date on which *your* coverage begins.

Coverage starts when you legally assume control of the rental vehicle.

**Emergency** means a sudden and unforeseen *medical condition* that requires immediate *treatment*. An *emergency* no longer exists when the evidence reviewed by the Assistance Centre indicates that no further *treatment* is required at destination or *you* are able to return to *your* province or territory of residence for further *treatment*.

**Home** means *your* Canadian province or territory of residence. If *you* requested *your* coverage to start when *you* leave Canada, *home* means Canada.

**Hospital** means an institution that is licensed as an accredited *hospital* that is staffed and operated for the care and *treatment* of in-patients and out-patients. *Treatment* must be supervised by *physicians* and there must be registered nurses on duty 24 hours a day. Diagnostic and surgical capabilities must also exist on the premises or in facilities controlled by the establishment. A *hospital* is not an establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, addiction treatment centre, convalescent, rest or nursing home, home for the aged or health spa.

**Injury** means sudden bodily harm that is caused directly by external and purely accidental means, and independent of *sickness* or disease.

**Insured Travel Arrangement(s)** means *travel services* booked through a *travel supplier* and insured by Transat Travel Insurance.

**Insured Trip** means the period of coverage shown on *your application* for insurance under the *policy* and described in further detail in this *policy* booklet.

**Medical Condition(s)** means any disease, *sickness* or *injury* (including symptoms of undiagnosed conditions).

**Medically Necessary** means *treatment* or services that are required to alleviate pain or suffering resulting from an unexpected *sickness* or *injury*.

**Minor Mental or Emotional Disorders** means emotional or anxiety states, situational crisis, stress, anxiety or panic attacks, or other mental health disorders, which are *treated* with minor tranquilizers or anti-anxiety (anxiolytics) medication or for which no medication was prescribed.

Physician means a person:

- who is not you or a member of your immediate family or your traveling companion;
- licensed in the jurisdiction where the services are provided, to prescribe and administer medical *treatment*.

**Policy** means this Transat Rental Vehicle Damage *Policy* and *your* application for insurance hereunder, which is issued in consideration of payment of the required premium.

**Reasonable and Customary** means charges incurred for goods and services that are comparable to what other providers charge for similar goods and services in the same geographical area.

**Rental Vehicle** means a passenger automobile, station wagon or a mini-van, which is designed and manufactured to transport a maximum of 7 passengers and which is used exclusively for transporting passengers during your insured trip and that *you* rent, under a written contract, from a commercial rental agency licensed under the law of its jurisdiction. Sports Utility Vehicles (SUV) are included provided they are not used as off-road vehicles and are driven on maintained roads.

**Excluded** is any vehicle which is a truck, panel van, bus, motorcycle, moped, motorbike, recreational vehicle, all-terrain vehicle, camper, trailer, exotic car, antique automobile (an automobile which is more than 20 years old), or any vehicle designed primarily for off-road use.

**Return Date** means the date on which *you* are scheduled to return to *your* departure point, as shown on *your application*.

**Sickness** means the acute illness, acute pain and suffering or disease that requires *emergency* medical *treatment* or hospitalization due to the sudden and unforeseen onset of symptoms during the period of coverage.

**Spouse** means someone to whom one is legally married, or with whom one has been residing and publicly represented as a *spouse*.

**Travel Companion** means someone who shares travel arrangements with *you* on any one trip, up to a maximum of five persons including *you*.

**Travel Services** means transportation, sleeping accommodation or other service provided or arranged by a *travel supplier* for *your* use (but does not include taxes or insurance).

**Travel Supplier** means a tour operator, travel wholesaler, airline, cruise line, provider of ground transport or provider of travel accommodation or provider of other services to *you* that is:

- a) contracted to provide travel services to you; and
- b) licensed, registered or is otherwise legally authorized in the particular location of the *travel supplier* to operate and provide *travel services* as shown on *your application*.

**You** or **Your** means a person who is eligible and named on the *application* for insurance under the *policy*, including *you*, *your spouse* or a dependent *child*, when family coverage is purchased and the required premium has been paid.

In this policy, words and terms denoting the singular shall be interpreted to mean the plural and vice versa, unless the context clearly indicates otherwise.

### **GENERAL CONDITIONS**

Statutory Conditions: Despite any other provision contained in the contract, the contract is subject to the applicable statutory conditions in the Insurance Act, as applicable in *your* province or territory of residence, respecting contracts of accident and sickness insurance.

**Applicable Law:** This *policy* is governed by the laws and regulations of the Canadian province or territory where this *policy* was issued.

**Misrepresentation:** This *policy* is issued on the basis of information in *your application* or provided in connection with *your application*.

When completing the *application*, *your* answers must be complete and accurate. In the event of a claim, we will review *your* medical history. If any of *your* answers are found to be incomplete or inaccurate:

- your coverage will be void;
- which means your claim will not be paid.

You must be accurate and complete in your dealings with us at all times. We will not pay a claim if you, any person insured under this policy or anyone acting on your behalf makes a fraudulent, false or exaggerated statement or claim.

**Contract:** This *policy* is non-participating. *You* are not entitled to share in our divisible surplus.

The right of any person to designate persons to whom or for whose benefit insurance money is payable is restricted.

**Conformity with Existing Laws:** Any provision of this *policy* which is in conflict with any federal, provincial or territorial law where this *policy* is issued is hereby amended to conform to the minimum requirements of that law. In all other respects, the terms and provisions of this *policy* shall apply.

**Currency:** All premiums and benefits under this *policy* are payable in Canadian currency. To facilitate payments to providers, the *company* will pay claims in the currency of the country where the charges are incurred, based on: i) the rate of exchange set by any chartered bank in Canada on the last date of service, or ii) the date the payment is issued to the provider of service.

**Premium Payment:** Your policy takes effect when the required premium is paid, subject to the terms and conditions outlined in the policy. No coverage will be provided if: i) the required premium is not paid, ii) your cheque is not honoured, or iii) credit card charges are declined for any reason.

**Limitation of Liability:** *Our* liability under this *policy* is limited solely to the payment of eligible benefits, up to the maximum amount purchased, for any loss or expense. Neither *we*, upon making payment under this *policy*, nor *our* agents or administrators assume any responsibility for the availability, quality, results or outcome of any *treatment* or service, or *your* failure to obtain any *treatment* or service covered under the terms of this *policy*. The participation of the insurers is several and not joint and none of them will under any circumstances participate in the interest and liabilities of any of the others.

**Limitation of Action:** If *you* disagree with *our* claim decision, the matter may be submitted for judicial resolution under the applicable law(s) of the Canadian province or territory where *you* reside at the time of *your application* for this *policy*. If mutually agreeable, legal actions may also be brought in the province where the head office of the *company* is located.

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*, or in the *Limitations Act*, 2002 in Ontario, or other applicable legislation.

### **CLAIM PROVISIONS**

Where the *company* has paid expenses or benefits to *you* or on *your* behalf under this *policy*, the *company* has the right to recover, at its own expense, those payments from any applicable source or any insurance *policy* or plan that provides the same benefits or recoveries. This *policy* also allows the *company* to receive, endorse and negotiate eligible payments from those parties on *your* behalf. When the *company* receives payment from any Canadian provincial or territorial *government health insurance plan*, any other insurer or any other source of recovery to the *company*, the respective payor is released from any further liability with respect to the claim.

**Secondary Coverage:** Coverage under this *policy* is secondary to all other sources of recovery. Any benefits payable under this *policy* are in excess of any other coverage *you* may have with any other insurer or any other source of recovery.

**Coordination of Benefits:** Benefit payments under this *policy* will be coordinated with benefits available to *you* under any other insurance *policy* or plan, so that payments made under this *policy* and any other *policy* or plan do not exceed **100%** of the eligible expenses incurred. Coordination of the Emergency Medical Insurance benefits will be in accordance with the Coordination of Benefits Guidelines issued by the Canadian Life and Health Insurance Association with respect to Out of Country/Province Medical Expenses.

However, if *you* are covered as an active or retired employee under *your* current or former employer's group health insurance plan for Extended Health Care benefits and the lifetime maximum amount is:

- a) \$50,000 or less, Coordination of Benefits will not apply to such amount; or
- b) more than \$50,000, Coordination of Benefits will apply only to the amount of insurance in excess of \$50,000.

**Notice of Claim and Proof of Claim:** To make a claim for benefits under this *policy, your* written proof of claim and *your* fully completed Travel Insurance claim form(s) must be submitted to *us* within 90 days after the event, but not more than 12 months after the date of such event or loss. More information on the documentation that must be submitted with *your* written proof of claim is provided below.

Written proof of claim shall include:

- i) the completion of any claim forms furnished by the company;
- ii) original receipts;
- iii) documentation required by the *company* to substantiate your claim as detailed on page 4.

Original substantiating claims documentation must be provided; however, the *company* may accept certified copies if the original documentation cannot be provided for a reasonable cause. Failure to provide applicable substantiation for a claim shall invalidate any claim under this *policy*. All documents required to support or validate the claim, including English or French translations of such documents, must be provided free of expense to the *company*.

### Written claims correspondence should be mailed to:

Transat Travel Insurance

c/o Active Care Management

PO Box 1237 Station A Windsor, ON N9A 6P8

### **Online Claims Submission**

Visit ACM's website www.active-care.ca, to learn more about the claim submission process and to download the free ACM TravelAid $^{\text{TM}}$  mobile application.

For quick and easy claim submission, please have all of *your* documents available [in electronic format] and visit https://manulife.acmtravel.ca to submit *your* claim online.

You may also call the Assistance Centre directly to inquire about your claim status at **1 855 841-4788**.

For coverage information or general enquiries, please contact the Transat Customer Service Centre at **1 800 263-2356**.

### email: transattravelinsurance@manulife.ca

**Claim Payments:** Benefit payments will be made to *you* or, to facilitate matters, to the service provider. In the event of *your* death, any balance remaining or benefits payable for loss of life will be paid to *your* estate.

**Rights of the** *Company* **and Claimant:** When *you* purchase this *policy, you* agree to provide the *company* with access to all pertinent records or information about *you* from any licensed *physician,* dentist, medical practitioner, *hospital,* clinic, insurer, individual, institution or other provider of service to determine the validity of any claim submitted by *you* or on *your* behalf.

**Right of Examination:** The *company* has the right, and *you* must afford it the opportunity, to have *you* medically examined when and as often as may be reasonably required, when a claim under this *policy* is pending. In the event of death, the *company* has the right to request an autopsy, subject to any laws relating thereto.

**Right of Recovery:** In the event that *you* are found to be ineligible for coverage or that a claim is found to be invalid or benefits are reduced in accordance with any *policy* provision, the *company* has the right to collect from *you* any amount which it has paid on *your* behalf to medical providers or other parties.

**Subrogation:** If you suffer a loss caused by a third party, the *company* has the right to subrogate your rights of recovery against the third party for any benefits payable to or on your behalf and will, at its own expense and in your name, execute the necessary documents and take action against the third party to recover such payments. You must not take any action or execute any documents after the loss that will prejudice the *company*'s rights to such recovery.

### **NOTICE ON PRIVACY:**

**Your privacy matters.** We are committed to protecting the privacy of the information we receive about you in the course of providing the insurance you have chosen. While our employees need to have access to that information, we have taken measures to protect your privacy. We ensure that other professionals, with whom the company works in giving you the services you need under your insurance, have done so as well. To find out more about how we protect your privacy, please read below our Notice on Privacy and Confidentiality.

**Notice On Privacy And Confidentiality.** The specific and detailed information requested on the *application* form is required to process the *application*. To protect the confidentiality of this information, Manulife will establish a "financial services file" from which this information will be used to process the *application*, offer and administer services and process claims. Access to this file will be restricted to those Manulife employees, mandataries, administrators or agents who are responsible for the assessment of risk (underwriting), marketing and administration of services and the investigation of claims, and to any other person *you* authorize or as authorized by law. These people, organizations and service providers may be in jurisdictions outside Canada, and subject to the laws of those foreign jurisdictions. *Your* file is secured in our offices or those of our administrator or agent.

 $\it You$  may request to review the personal information it contains and make corrections by writing to:

Privacy Officer, Manulife, P.O. Box 1602, Waterloo, Ontario N2J 4C6. You may also visit Manulife at:

https://www.manulife.ca/privacy-policies.html for further details about our Privacy Policy.

The Manufacturers Life Insurance Company First North American Insurance Company

August 2020



### Manulife

Manulife, P.O. Box 670, Stn Waterloo, Waterloo, ON N2J 4B8.

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### TRAVEL ASSISTANCE.

### ANYWHERE IN THE WORLD.

Before *you* travel, be sure to download ACM's free assistance & claims app, **ACM TravelAid<sup>TM</sup>**. The GPS-enabled **ACM TravelAid<sup>TM</sup>**, available from Google Play and App store, provides travellers with the following services, from anywhere in the world:

- Direct link to the Assistance centre
- Healthcare provider information
- Directions to the nearest medical facility
- Official travel advisories
- Travel tips
- Claim submission support

The TravelAid mobile app can also provide *you* with local emergency telephone numbers (such as 911 in North America), and pre- and post departure travel tips. *We* recommend that *you* download the app before *you* travel to avoid incurring roaming charges that may apply at *your* destination.

### **HELP IS JUST A PHONE CALL AWAY.**

Enjoying *your* trip should be the first thing on *your* mind. *Our* Assistance Centre is there to help *you* with the following and provide multilingual support 24 hours a day, every day of the year:

### Pre-Trip Information

- √ Passport and Visa information
- √ Health hazards advisory
- √ Weather information
- √ Currency exchange information
- $\sqrt{}$  Consulate and Embassy locations

### **During A Medical Emergency**

- √ Verifying and explaining coverage
- √ Referral to a doctor, *hospital*, or other health care providers
- √ Monitoring your medical emergency and keeping your family informed
- √ Arranging for return transportation home when medically necessary
- √ Arranging direct billing of covered expenses (where possible)

### **Other Services**

- √ Assistance with lost, stolen or delayed baggage
- √ Assistance in obtaining emergency cash
- $\sqrt{}$  Translation and interpreter services in a medical *emergency*
- √ Emergency message services
- √ Help to replace lost or stolen airline tickets
- √ Assistance in obtaining prescription drugs
- √ Assistance in obtaining legal help or bail bond

# Our Assistance Centre is there to help you 24 hours a day, every day of the year.

**1 800 764-6539** toll-free from the USA and Canada **+1 (519) 251-7488** collect where available.

Our Assistance Centre can also be contacted through the **ACM TravelAid™** mobile application.