

WORLDWIDE PROTECTION

OVERSEAS
TRAVEL
INSURANCE

AGENT

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How to complete application form of Overseas Travel Insurance

This sheet is a quick reference for the application form. Please complete the form as shown below and retain the third page for your records and submit the rest to insurance agent. The Overseas Travel Insurance policy is written in Japanese language and licensed under Japanese Insurance Law. This material and other English texts are prepared for reference purpose only. While we endeavor to maintain the accuracy of such texts, payment and other decisions would be determined solely by original Japanese policy wording. AIU Insurance Company is not responsible for preparing translation of policy or other materials. This Overseas Travel Insurance policy is for residents of Japan leaving for foreign countries to return to Japan. Misrepresentation in declaration may result in non-payment of claims.

(Notes)

1. There are cases we cannot accept the coverage you request or underwrite the policy.
2. Exponsc for chiropractic, acupuncture and moxa cautery is not covered.
3. As for Moutain climbing using ice ax, skydiving, hang gliding and high-risk job, please consult with our agent. We may either decline application or underwrite the policy with extra premium.
4. We do not underwrite people who have permanent residency in foreign country and live in foreign country.
5. We do not cover pre-existing condition in case the policy duration is over 31 days. Coverage on pre-existing conditions for the policy less than 31 days is subject to conditions specified in the policy language.
6. We do not underwrite policy if you travel in, to, or through Cuba.
7. The above notes are for reference purpose only and will not override the original policy language.

The diagram shows the following callouts pointing to specific parts of the form:

- 1: Points to the 'Personal Information' section (1. 申込人(保険契約者)についてご記入ください).
- 2: Points to the 'Traveler Information' section (2. 旅行者(被保険者(保険の対象となる方))についてご記入ください).
- 3: Points to the 'Traveler Name' field within the traveler information section.
- 4: Points to the 'Notice' section (3. 告知事項).
- 5: Points to the 'Notice' section (3. 告知事項).
- 6: Points to the 'Notice' section (3. 告知事項).
- 7: Points to the 'Insurance Period' section (4. お申し込みいただく保険の内容についてご記入ください).
- 8: Points to the 'Insurance Period' section (4. お申し込みいただく保険の内容についてご記入ください).
- 9: Points to the 'Insurance Period' section (4. お申し込みいただく保険の内容についてご記入ください).
- 10: Points to the 'Travel Purpose' section (5. 旅行目的).
- 11: Points to the 'Travel Purpose' section (5. 旅行目的).
- 12: Points to the 'Travel Purpose' section (5. 旅行目的).
- 13: Points to the 'Travel Purpose' section (5. 旅行目的).
- 14: Points to the 'Premium Table' section (6. 保険料).
- 15: Points to the 'Premium Table' section (6. 保険料).

Declaration: Please answer the following questions		
Only applicable to those traveling over 31 days	1. Are you currently receiving medical treatment by physician for any disease /bodily injury, or do you suffer from any condition which restricts normal daily/social activity? <input type="checkbox"/> No / <input type="checkbox"/> Yes (Details: _____)	5. Circle trip destination Asia Europe Oceania N. America Hawai Guam/Saipan S. America Africa Middle East Other (_____)
	2. Have you ever been treated for experienced serious brain/heart disease including stroke, cancer or any other serious injury or disease including arthritis and been hospitalized continuously more than 1month? <input type="checkbox"/> No / <input type="checkbox"/> Yes (Details: _____)	6. Will you travel in, to, or through Cuba? <input type="checkbox"/> No / <input type="checkbox"/> Yes ↓ We can not accept the coverage We do not underwrite policy if you travel in, to, or through Cuba. The policy will not provide any coverage whatsoever for any situation that occurs in Cuba, including but not limited to cases when traveling in, to, or through Cuba was not scheduled at the time of entering into the insurance contract.
3. Have you previously filed travel insurance claims or received baggage benefits over 5 times in the past 3 years? <input type="checkbox"/> No / <input type="checkbox"/> Yes we can not accept the coverage		7. Will your travel involve any of the high-risk sports shown on the previous page? <input type="checkbox"/> No / <input type="checkbox"/> Yes ↓ We can not accept the coverage
4. Do you have any other insurance to cover similar risk? <input type="checkbox"/> No / <input type="checkbox"/> Yes (Details: Type of insurance, Company Name, Amount of Accidental Death(_____)		8. Will your travel involve occupational activities, e.g., construction work, merchandising? <input type="checkbox"/> No / <input type="checkbox"/> Yes (Details: _____)

① Applicant Name

Individual applicant, sign here.
(Corporate applicant, enter company name, representative title and name, and affix seal)
Please also fill in applicant's address and telephone number.

② Print in alphabet Last/Middle name, First name.

Please also fill in the insured's address and telephone number, if the applicant and the insured are not the same.

③ Your age on the date of departure, and date of birth (YYYY/MM/DD).

④ If the applicant and the traveler (insured) are different parties, the traveler's (insured's) signature giving consent to this insurance contract is required. If the traveler (insured) is under 15 on the date of departure, a signature of consent is not required and maximum coverage for Accidental Death and Sickness Death is 10 million yen each.

⑤ Declaration: Complete this section. (Required in order to underwrite the policy. Please see above for translation of each declaration.)
(Note) Please fill in the declaration section. Any misrepresentation or omission in declaration section may result in cancellation of this insurance contract or non-payment of claim.

⑥ Complete questions 1 and 2 in the declaration,

only if your travel period exceeds 31 days.

⑦ Enter departure date and return date.

⑧ Complete this section only if you wish to designate a death benefit beneficiary. Enter beneficiary name here.

⑨ The traveler's (insured's) signature of consent is required if you wish to designate a death benefit beneficiary.

⑩ Middle East countries include:
Afghanistan, United Arab Emirates, Yemen, Israel, Iraq, Iran, Oman, Qatar, Kuwait, Saudi Arabia, Syria, Turkey, Bahrain, Jordan, Lebanon

⑪ Enter total insurance period, making sure to include departure date when counting. For insurance period of 53 days or less, enter number of days. For insurance period over 53 days, enter number of months.

⑫ Choose coverage type from the coverage type list, and enter corresponding code here.

⑬ Enter total premium. (If you chose to have optional coverage as in ⑮, make sure to include premium for optional coverage in the total.)

⑭ If business travel or overseas assignment, enter the name of the dispatching company and destination.

⑮ If you choose to have optional coverage, circle the corresponding reference code.

Limits of Liability and Premium List

*Please note that coverage type code differs depending on insurance period('31 days or less' and 'over 31 days').

Coverage Type Code(31days and less)	94R	93R	92R	91R	11R
Accidental Death	¥50,000,000	¥30,000,000	¥20,000,000	¥10,000,000	¥10,000,000
Physical Impediment (depending on degree of impediment)	¥1,500,000~ ¥50,000,000	¥900,000~ ¥30,000,000	¥600,000~ ¥20,000,000	¥300,000~ ¥10,000,000	¥300,000~ ¥10,000,000
Medical&Rescuer's Expenses(indemnity limit)	Unlimited*1				¥20,000,000
Emergency Dental Treatment*2(indemnity limit)	Emergency Treatment & Rescuer Expenses on illness (indemnity limit: ¥3,000,000)				
Sickness Death	¥30,000,000	¥10,000,000	¥5,000,000	¥5,000,000	¥5,000,000
Personal Liability (indemnity limit/per accident)	¥100,000,000	¥100,000,000	¥100,000,000	¥100,000,000	¥100,000,000
Baggage*3(indemnity limit per piece of baggage: ¥100,000)(indemnity limit for train/air tickets:¥50,000)	¥300,000	¥300,000	¥300,000	¥300,000	¥200,000
Travel Emergency Expenses*4	¥50,000	¥50,000	¥50,000	¥50,000	¥50,000
1 day	¥5,270	¥3,690	¥3,110	¥2,740	¥2,430
2 days	¥6,120	¥4,500	¥3,910	¥3,530	¥3,070
3 days	¥6,870	¥5,190	¥4,570	¥4,170	¥3,570
4 days	¥7,450	¥5,750	¥5,120	¥4,710	¥4,010
5 days	¥8,360	¥6,620	¥5,980	¥5,560	¥4,730
6 days	¥9,200	¥7,400	¥6,730	¥6,290	¥5,340
7 days	¥10,040	¥8,140	¥7,430	¥6,950	¥5,880
8 days	¥10,780	¥8,820	¥8,080	¥7,580	¥6,390
9 days	¥11,400	¥9,400	¥8,650	¥8,140	¥6,860
10 days	¥12,070	¥10,010	¥9,230	¥8,690	¥7,300
11 days	¥12,720	¥10,600	¥9,790	¥9,230	¥7,750
12 days	¥13,430	¥11,210	¥10,360	¥9,770	¥8,200
13 days	¥14,090	¥11,830	¥10,970	¥10,370	¥8,680
14 days	¥14,600	¥12,320	¥11,450	¥10,840	¥9,070
15 days	¥15,110	¥12,770	¥11,870	¥11,240	¥9,400
17 days	¥16,040	¥13,560	¥12,600	¥11,920	¥9,950
19 days	¥17,260	¥14,700	¥13,700	¥12,980	¥10,830
21 days	¥18,440	¥15,800	¥14,770	¥14,030	¥11,670
23 days	¥19,680	¥16,880	¥15,790	¥15,000	¥12,470
25 days	¥20,830	¥17,930	¥16,800	¥15,980	¥13,260
27 days	¥22,140	¥19,140	¥17,960	¥17,100	¥14,200
29 days	¥23,410	¥20,250	¥19,010	¥18,100	¥15,010
31 days	¥24,730	¥21,450	¥20,150	¥19,190	¥15,910

Coverage Type Code(over 31days)	94S	93S	92S	91S	11S
Accidental Death	¥50,000,000	¥30,000,000	¥20,000,000	¥10,000,000	¥10,000,000
Physical Impediment (depending on degree of impediment)	¥1,500,000~ ¥50,000,000	¥900,000~ ¥30,000,000	¥600,000~ ¥20,000,000	¥300,000~ ¥10,000,000	¥300,000~ ¥10,000,000
Medical&Rescuer's Expenses(indemnity limit)	Unlimited				¥20,000,000
Sickness Death	¥30,000,000	¥10,000,000	¥5,000,000	¥5,000,000	¥5,000,000
Personal Liability (indemnity limit/per accident)	¥100,000,000	¥100,000,000	¥100,000,000	¥100,000,000	¥100,000,000
Baggage*3(indemnity limit per piece of baggage: ¥100,000)(indemnity limit for train/air tickets:¥50,000)	¥300,000	¥300,000	¥300,000	¥300,000	¥200,000
Checked Baggage Delay*5 (indemnity limit:¥100,000)	¥100,000	¥100,000	¥100,000	¥100,000	¥100,000
Flight Delay*6 (indemnity limit)	¥20,000	¥20,000	¥20,000	¥20,000	¥20,000
34 days	¥24,610	¥20,670	¥19,060	¥17,800	¥14,380
39 days	¥26,150	¥21,830	¥20,080	¥18,730	¥15,150
46 days	¥31,490	¥26,550	¥24,590	¥23,130	¥18,570
53 days	¥37,770	¥32,050	¥29,810	¥28,190	¥22,490
2 months	¥43,650	¥36,950	¥34,350	¥32,500	¥25,890
3 months	¥60,910	¥51,950	¥48,540	¥46,190	¥36,570
4 months	¥81,950	¥69,990	¥65,560	¥62,670	¥49,430
5 months	¥108,520	¥92,780	¥86,960	¥83,180	¥65,400
6 months	¥127,120	¥108,180	¥101,200	¥96,710	¥76,050

*1 Unlimited is defined only as "no limit set for coverage amount of Medical & Rescuer's Expenses". It does not mean lifetime coverage for Medical & Rescuer's Expenses.

*2 Emergency Dental Treatment is only covered for policies with insurance period of 31 days or less. Emergency dental treatments received during a trip will be covered up to ¥100,000.

*3 If the baggage benefit coverage amount exceeds ¥300,000, the maximum limit of coverage to be paid during the coverage period shall be ¥300,000 for damages caused by theft, burglary, or non-arrival of flight baggage.

*4 Transportation expense, room charge of hotels, meal expense, communication expense, trip arrangement expense, service cancellation fee at destination locations incurred due to an unexpected accident will be reimbursed up to the total sum of ¥50,000 during a trip. However, meal expense will be limited to a total of ¥5,000 and purchase fee of personal effects will be limited to a total of ¥100,000 during a trip.

*5 Reimbursement for each delay of checked baggage will be limited to ¥100,000.

*6 Reimbursement for each delay in departure, inability to board, or change of landing destination will be limited to ¥20,000.