

## PURCHASE TERMS AND DISCLOSURES

When you click the button to complete checkout on our website, or elect to purchase insurance and then complete checkout on our partner's website, you are submitting a request to purchase a plan. This request is considered an offer by you. Your offer may be declined, or your plan may be cancelled or voided as if it were never in effect, if providing cover, benefit, or services under the plan, or the underlying business or activity, would (1) violate any applicable law or regulation, including without limitation any economic or trade sanction or embargo; or (2) be provided within, or otherwise related to, any country subject to comprehensive economic and/or trade sanction or embargo in the United States. By submitting this request for coverage, you acknowledge, understand, agree, and certify the following:

1. All information you have provided is accurate to the best of your knowledge and that, by selecting the button to complete your purchase, you are agreeing to pay the amount displayed as the total price with the credit card number provided. You are the owner and rightful user of the credit card used in this transaction. You further acknowledge, understand, and agree that plans purchased with intentionally inaccurate/fraudulent information will be considered void and that you may be subject to legal action as a result of such information.
2. You and all named insureds on your policy are U.S. residents and have obtained, or will have obtained prior to your scheduled departure date, and will maintain throughout your insured trip, all proper documentation, vaccinations, medical equipment/provisions, government licenses/authorizations/permits (including without limitation any required passports, visas, OFAC licensures, etc.), and any other prerequisite to travel that is required or otherwise necessary for your trip. You acknowledge, understand, and agree that your failure to obtain any of the above may not be covered under your plan, or may make you ineligible for coverage and/or assistance services under your plan. Additionally, you acknowledge, understand, and agree that all coverage and assistance services are subject to applicable law.
3. The policy you are purchasing is a named perils insurance policy, and it only covers the specific situations, events, and losses described in the policy and only under the conditions described in the policy.
4. You consent to the processing of your personal data in accordance with our [privacy policy](#).
5. Unless you chose to receive them by US Postal Service at the time of purchase, by purchasing your policy, you consent to receive all notices and documents from us electronically. They will be sent to the email address provided at the time of purchase. You may opt to receive notices and documents from us by mail at any time. If you do not wish to receive notices and documents electronically, or wish to later update your preference about the receipt of electronic notices and documents, email us at [customerservice@allianzassistance.com](mailto:customerservice@allianzassistance.com). Please include your name, policy number, and a statement that "Only contact me by mail" (or something similar). You can also let us know by phone at 800-284-8300 or by mail to:

Allianz Global Assistance  
ATTN: Customer Service – Only contact me by mail  
9950 Mayland Drive  
Richmond, VA 23233

If you don't provide an email address at purchase, you will receive notices and documents by mail. You may request paper copies of any electronic information we send, or update your electronic contact information at any time by emailing or mailing us at the above address, or by calling us. Documents sent to you from us will be in either PDF or HTML format. If you can't receive or read the documents we send you, please contact us so we can assist you.

**Plans are subject to terms, conditions, and exclusions** (including for pre-existing medical conditions, unless your plan includes a waiver of that exclusion and conditions for that waiver are met). Specific benefits and limits of coverage vary depending on the plan purchased. For a complete description of the coverage and specific benefit limits offered under your plan, carefully review your plan documents. Plans are available to U.S. residents only. All plans not available in all states. Plan pricing includes the cost of insurance benefits and assistance services (and

may include a cancellation fee waiver as applicable). Contact AGA Service Company at [plandetailsUS@allianz.com](mailto:plandetailsUS@allianz.com) for more information. Insurance benefits are underwritten, depending on your state of residence and product purchased, by: BCS Insurance Company (OH), Administrative Office: 2 Mid America Plaza, Suite 200, Oakbrook Terrace, IL 60181, rated "A-" (Excellent) by A.M. Best Co., under BCS Form No. 52.201 series, 52.401 series; or Jefferson Insurance Company (NY), Administrative Office: 9950 Mayland Drive, Richmond, VA 23233, rated "A+" (Superior) by A.M. Best Co., under Jefferson Form Nos. 101-P series, 101-C series, 105-P series, 105-C series, 107-P series; or Nationwide Mutual Insurance Company (OH), Nationwide Life Insurance Company (OH), National Casualty Company (OH), Administrative Office: One West Nationwide Blvd, Columbus, OH 43215, or Allied Property and Casualty Company (IA), Administrative Office: 1100 Locust Street, Des Moines, IA 50391, each rated "A+" (Superior) by A.M. Best Co., under Nationwide Form Nos. SRTC 2000 series or NSHTC 2500 series. Allianz Global Assistance and Allianz Travel Insurance are marks of AGA Service Company or its affiliates. AGA Service Company is the licensed producer and administrator of this plan and is an affiliate of Jefferson Insurance Company. The insured shall not receive any special benefit or advantage because of the affiliation between AGA Service Company and Jefferson Insurance Company. Assistance services are administered through AGA Service Company. Consumer is responsible for charges incurred from outside vendors for assistance services. Contact AGA Service Company at 800-284-8300 or 9950 Mayland Drive, Richmond, VA 23233 or [customerservice@allianzassistance.com](mailto:customerservice@allianzassistance.com).

#### **Insurance Products Only:**

**PLEASE BE ADVISED:** This plan contains insurance benefits (which may include disability and/or health insurance benefits) that only apply during the covered trip. This optional coverage may duplicate coverage already provided by your personal auto, home, renter's, health, life, personal liability, or other insurance policy or source of coverage but may be subject to different restrictions. You should review the terms of this policy with your existing coverage. If you have any questions about your current coverage, call your insurer/health plan or insurance agent/broker. This insurance is not required to purchase any other products/services. Unless licensed, travel retailers and their employees may provide general information about the insurance, including a description of coverage and price, but are not qualified/authorized to answer technical questions about terms, benefits, exclusions, and conditions of the insurance or evaluate the adequacy of existing coverage. Additionally:

**California Residents:** We are doing business in California as Allianz Global Assistance Insurance Agency, License # 0B01400. California offers a toll-free consumer hotline at 1-800-927-4357.

**Maryland Residents:** The purchase of travel insurance would make the travel insurance coverage primary to any other duplicate or similar coverage. The Commissioner may be contacted to file a complaint at: Maryland Insurance Administration, ATTN: Consumer Complaint Investigation Property/Casualty, 200 St. Paul Place, Suite 2700, Baltimore, MD 21202.

**New York Residents:** The licensed producer represents the insurer for purposes of the sale. Compensation paid to the producer may depend on the policy selected, or the producer's expenses, volume of business, or profitability. The purchaser may request and obtain information about the producer's compensation, except as otherwise provided by law.

#### **Collision Damage Insurance (CDI) Only:**

**PLEASE BE ADVISED:** Coverage is not available in all countries or for all cars. This coverage does not provide liability insurance or comply with any financial responsibility law, or any other law mandating motor vehicle coverage.

**Texas Residents:** Before deciding whether to purchase this insurance plan, you may wish to determine whether your own automobile insurance or credit card agreement provides you coverage for rental vehicle damage or loss and determine the amount of deductible under your own insurance coverage. The purchase of this insurance plan is not mandatory. This coverage is not all inclusive, which means it does not cover such things as personal injury, personal liability, or personal property. It does not cover you for damages to other vehicles or property. It does not cover you for any injury to any other party.

**New York and Texas Residents:** CDI coverage is only available when purchased as a separate policy.

## FRAUD WARNINGS

**Alabama:** Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.

**District of Columbia:** WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant.

**Florida:** Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.

**Kentucky:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any materially false information or conceals, for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime.

**Louisiana, Rhode Island, West Virginia:** Any person who knowingly presents a false or fraudulent claim for payment for a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**Maine, Tennessee, Virginia, Washington:** It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purposes of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits.

**Maryland:** Any person who knowingly or willfully presents a false or fraudulent claim for payment of a loss or benefit or who knowingly or willfully presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

**New Jersey:** Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties.

**New Mexico:** ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES.

**New York:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

**Ohio:** Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

**Oklahoma:** WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

**Oregon:** Any person who knowingly and willfully with intent to injure or defraud any insurance company presents a claim for payment of a loss containing any materially false, incomplete, or misleading information may be guilty of insurance fraud and may be subject to criminal and/or civil penalties.

**Pennsylvania:** Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

Last updated October 3, 2018.