

SERFF Tracking Number: MCHX-G127813842 State: Arkansas
Filing Company: National Union Fire Insurance Company of Pittsburgh, PA State Tracking Number: 50246
Company Tracking Number: S30406NUFIC-AR
TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
Product Name: S30406NUFIC (Rev. 7/11) Blanket Accident - National
Project Name/Number: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA /S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA

Filing at a Glance

Company: National Union Fire Insurance Company of Pittsburgh, PA
Product Name: S30406NUFIC (Rev. 7/11) SERFF Tr Num: MCHX-G127813842 State: Arkansas
Blanket Accident - National
TOI: H04 Health - Blanket Accident/Sickness SERFF Status: Closed-Approved-Closed State Tr Num: 50246
Sub-TOI: H04.000 Health - Blanket Accident/Sickness Co Tr Num: S30406NUFIC-AR State Status: Approved-Closed
Filing Type: Form Reviewer(s): Rosalind Minor
Author: SPI McHughConsulting Disposition Date: 11/28/2011
Date Submitted: 11/11/2011 Disposition Status: Approved-Closed
Implementation Date Requested: On Approval Implementation Date:
State Filing Description:

General Information

Project Name: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA Status of Filing in Domicile: Not Filed
Project Number: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Large
Group Market Type: Discretionary Overall Rate Impact:
Filing Status Changed: 11/28/2011
State Status Changed: 11/28/2011 Deemer Date:
Created By: SPI McHughConsulting Submitted By: SPI McHughConsulting
Corresponding Filing Tracking Number:
PPACA: Not PPACA-Related
PPACA Notes: null
Filing Description:

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National Union Fire Insurance Company of Pittsburgh, Pa.

NAIC # 012-19445, FEIN 25-0687550

S30406NUFIC (Rev. 7/11)-AR Blanket Accident Insurance policy - Mandatory Policy

S30407NUFIC Master Application - Mandatory Policy

S30408NUFIC-AR [Master] [Participating] Organization Application -Mandatory Policy

S30411NUFIC (Rev. 7/11)-AR Blanket Accident Insurance Policy - Supplemental Policy

S30412NUFIC Master Application - Supplemental Policy

S30413NUFIC-AR [Master] [Participating] Organization Application - Supplemental Policy

S30415NUFIC Participating Organization Endorsement - Supplemental Policy

S30434NUFIC [Trip Cancellation/Interruption] [Airline Bankruptcy] - Supplemental Policy

S30409NUFIC (Rev. 4/07) H-1 Land, Water or Air Common Carrier (Public Conveyance) - Mandatory Policy

S30410NUFIC (Rev. 4/07) H-2 Land, Water or Air Common Carrier (mode of transportation) - Mandatory Policy

S30435NUFIC (Rev. 4/07) H-3 Land Water or Air common Carrier (Public Conveyance) (Business Only)

S30436NUFIC (Rev. 4/07) H-4 24 hour protection while on a Trip (Business Only)

S30437NUFIC (Rev. 4/07) H-5 24 hour protection while on a Trip

S30414NUFIC(Rev. 4/07) H-6 [Commercial Aircraft] [Civilian or Military Aircraft][Public Conveyance]

S30488NUFIC Policy Amendment Rider

S30595NUFIC Amendatory Endorsement for Policy Form No. S30406NUFIC

S30596NUFIC Amendatory Endorsement for Policy Form No. S30411NUFIC

S30597NUFIC Amendatory Endorsement for Domestic Partners

S30598NUFIC B-[1] Baggage Delay

S30599NUFIC B-[2] Trip Delay

S30600NUFIC B-[3] [Trip Cancellation]/Interruption /Airline Bankruptcy

S30601NUFIC B-[4] [Baggage] [and] [Personal Effects]

S30602NUFIC B-[5] [Checked] [and/or] [Carry-on Baggage] (NY only)

S30603NUFIC-AR B-[6] Emergency Evacuation with [Family Travel]

S30605NUFIC B-[8] Repatriation of Remains

S30606NUFIC B-[9] [Loss] [Collision] Damage Coverage

McHugh Consulting Resources, Inc. has been requested to file the attached form(s) on behalf of National Union Fire Insurance Company of Pittsburgh, Pa. We have provided an authorization letter for your files.

The above forms are being submitted for your review and approval. These forms are new and do not replace any forms previously approved in your state.

This program will be issued to financial institutions or credit card service companies in conjunction with credit cards

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pursuant to 23-86-101(7). This program will be offered on a mandatory and, in certain instances, on a supplemental basis.

The referenced forms have been written in readable language and are being submitted in final printed format. Printing is subject to changes in ink, paper stock, page numbers, margins, positioning and format. However, printing standards will never be less than required under your law.

Thank you for your attention to this filing. Please let us know if you have any questions or require additional information.

Sincerely,

Lauren Regnery
Compliance Project Specialist
215-230-7960

Company and Contact

Filing Contact Information

Lauren Regnery, Compliance Project Specialist mcr@mchughconsulting.com
McHugh Consulting Resources, Inc. 215-230-7960 [Phone]
2005 South Easton Road, Suite 207 215-230-7961 [FAX]
Doylestown, PA 18901

Filing Company Information

(This filing was made by a third party - McHughConsulting)

National Union Fire Insurance Company of Pittsburgh, PA CoCode: 19445 State of Domicile: Pennsylvania
70 Water Street Group Code: 12 Company Type:
18th Floor Group Name: State ID Number:
New York, NY 10038 FEIN Number: 25-0687550
(302) 765-1756 ext. [Phone]

Filing Fees

SERFF Tracking Number: MCHX-G127813842 State: Arkansas
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Fee Required? Yes
Fee Amount: \$1,300.00
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
National Union Fire Insurance Company of Pittsburgh, PA	\$1,300.00	11/11/2011	53683223

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	11/28/2011	11/28/2011

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Rosalind Minor	11/14/2011	11/14/2011	SPI McHughConsulting	11/21/2011	11/21/2011

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Disposition

Disposition Date: 11/28/2011

Implementation Date:

Status: Approved-Closed

HHS Status: HHS Approved

State Review: Reviewed-No Actuary

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	PPACA Uniform Compliance Summary	Approved-Closed	Yes
Supporting Document	Guaranty Association Notice	Approved-Closed	Yes
Supporting Document	AR Service Information	Approved-Closed	Yes
Supporting Document	Authorization Letter	Approved-Closed	Yes
Supporting Document	Statement of Variability	Approved-Closed	Yes
Form	Blanket Accident Insurance Policy-Mandatory Policy	Approved-Closed	Yes
Form	Blanket Accident Insurance Policy-Supplemental Policy	Approved-Closed	Yes
Form	H-1 [Land], [Water] [or] [Air] Common Carrier (Public Conveyance)-Mandatory Policy	Approved-Closed	Yes
Form	H-2 [Land], [Water] [or] [Air] Common Carrier [(Mode of Transportation)]-Mandatory Policy	Approved-Closed	Yes
Form	H-3 [Land], [Water] [or] [Air] Common Carrier [(Public Conveyance)] (Business Only)	Approved-Closed	Yes
Form	H-4 24 Hour Protection While on a Trip (Business Only)	Approved-Closed	Yes
Form	H-5 24 Hour Protection While on a Trip	Approved-Closed	Yes
Form	H-6 [Commercial Aircraft] [Civilian or Military Aircraft] [Public Conveyance]	Approved-Closed	Yes
Form	Amendatory Endorsement for Policy Form No. S30406NUFIC	Approved-Closed	Yes
Form	Amendatory Endorsement for Policy Form No. S30411NUFIC	Approved-Closed	Yes
Form	Amendatory Endorsement for Domestic Partners	Approved-Closed	Yes
Form	B-1 Baggage Delay Benefit Rider	Approved-Closed	Yes
Form	B-2 Trip Delay Benefit Rider	Approved-Closed	Yes
Form	B-3 [Trip Cancellation]/Interruption/Airline	Approved-Closed	Yes

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Form	Description	Status	Yes/No
Form	Bankruptcy Benefit Rider B-4 [Baggage] [and] [Personal Effects] Benefits Rider	Approved-Closed	Yes
Form	B-5 Checked and/or Carry-on Baggage Benefit Rider (NY Only)	Approved-Closed	Yes
Form	B-6 Emergency Evacuation with [Family Travel] Benefit Rider	Approved-Closed	Yes
Form	B-8 Repatriation of Remains Benefit Rider	Approved-Closed	Yes
Form (revised)	B-9 [Loss] [Collision] Damage Coverage Benefit Rider	Approved-Closed	Yes
Form	B-9 [Loss] [Collision] Damage Coverage Benefit Rider	Replaced	Yes
Form	Master Application-Mandatory Policy	Approved-Closed	Yes
Form	[Master] [Participation] Organization Application-Mandatory Policy	Approved-Closed	Yes
Form	Master Application-Supplemental Policy	Approved-Closed	Yes
Form	[Master] [Participating Organization] Application-Supplemental Policy	Approved-Closed	Yes
Form	Participating Organization Endorsement-Mandatory and Supplemental Policy	Approved-Closed	Yes
Form	[Trip Cancellation/Interruption] [Airline Bankruptcy]- Supplemental Policy	Approved-Closed	Yes
Form	Policy Amendment Rider	Approved-Closed	Yes

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Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 11/14/2011
Submitted Date 11/14/2011

Respond By Date

Dear Lauren Regnery,

This will acknowledge receipt of the captioned filing.

Objection 1

- B-9 [Loss] [Collision] Damage Coverage Benefit Rider, S30606NUFIC (Form)

Comment:

Our Department is not approving Terrorism or Terrorism type exclusions in any form of insurance.

It is requested that that the exclusion for an Act of Terrorism be deleted.

Thank you.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,

Rosalind Minor

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Response Letter

Response Letter Status Submitted to State
Response Letter Date 11/21/2011
Submitted Date 11/21/2011

Dear Rosalind Minor,

Comments:

Dear Rosalind Minor,

Thank you for your letter of November 14, 2011. We have responded below.

Response 1

Comments: In compliance with the Department's request we have amended form S30606NUFIC-AR by removing the reference to "terrorism" from exclusion a.

Related Objection 1

Applies To:

- B-9 [Loss] [Collision] Damage Coverage Benefit Rider, S30606NUFIC (Form)

Comment:

Our Department is not approving Terrorism or Terrorism type exclusions in any form of insurance.

It is requested that that the exclusion for an Act of Terrorism be deleted.

Thank you.

Changed Items:

No Supporting Documents changed.

Form Schedule Item Changes

Form Name	Form	Edition	Form Type	Action	Action	Readability Attach
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	Number	Date	Specific Data	Score	Document
B-9 [Loss] [Collision]	S30606N		Policy/Contract/Fraternal Revised	50.200	S30606N
Damage Coverage	UFIC-AR		Certificate: Amendment,		UFIC-AR
Benefit Rider			Insert Page, Endorsement or Rider		FINAL.PD F
Previous Version					
B-9 [Loss] [Collision]	S30606N		Policy/Contract/Fraternal Initial	50.200	S30606N
Damage Coverage	UFIC		Certificate: Amendment,		UFIC.PDF
Benefit Rider			Insert Page, Endorsement or Rider		

No Rate/Rule Schedule items changed.

Thank you for your continued attention to this filing. If you should have further questions or concerns regarding this submission, please do not hesitate to contact the undersigned at 215.230.7960.

Sincerely,

Tara Strehle
 Consultant

Sincerely,
 SPI McHughConsulting

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Form Schedule

Lead Form Number: S30406NUFIC (Rev. 7/11)-AR

Schedule Item	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 11/28/2011	S30406NUFIC (Rev. 7/11)-AR	Policy/Contract	Blanket Accident Fraternal Insurance Policy-Mandatory Policy Certificate	Initial		50.700	S30406NUFIC(Rev 7-11)-AR.PDF
Approved-Closed 11/28/2011	S30411NUFIC (Rev. 7/11)-AR	Policy/Contract	Blanket Accident Fraternal Insurance Policy-Supplemental Policy Certificate	Initial		50.100	S30411NUFIC(Rev 7-11)-AR.PDF
Approved-Closed 11/28/2011	S30409NUFIC (Rev. 4/07)	Policy/Contract	H-1 [Land], [Water] Fraternal [or] [Air] Common Carrier (Public Conveyance)-Mandatory Policy Certificate	Initial		52.100	S30409NUFIC (Rev 4-07).PDF
Approved-Closed 11/28/2011	S30410NUFIC (Rev. 4/07)	Policy/Contract	H-2 [Land], [Water] Fraternal [or] [Air] Common Carrier [(Mode of Transportation)]-Mandatory Policy Certificate	Initial		50.300	S30410NUFIC (Rev 4-07).PDF
Approved-Closed 11/28/2011	S30435NUFIC (Rev. 4/07)	Policy/Contract	H-3 [Land], [Water] Fraternal [or] [Air] Common Carrier [(Public Conveyance)] (Business Only) Certificate	Initial		51.800	S30435NUFIC (Rev 4-07).PDF
Approved-Closed 11/28/2011	S30436NUFIC (Rev. 4/07)	Policy/Contract	H-4 24 Hour Fraternal Protection While on a Trip (Business Only) Certificate	Initial		52.700	S30436NUFIC (Rev 4-07).PDF
Approved-Closed	S30437NUFIC (Rev.	Policy/Contract	H-5 24 Hour Fraternal Protection While on a	Initial		51.600	S30437NUFIC (Rev 4-

SERFF Tracking Number: MCHX-G127813842 State: Arkansas

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11/28/2011 4/07)	al	Trip Certificate			07).PDF
Approved- Closed 11/28/2011 4/07)	S30414NU FIC (Rev.	Policy/Cont H-6 [Commercial ract/Fratern Aircraft] [Civilian or al Military Aircraft] Certificate [Public Conveyance]	Initial	51.200	S30414NUFI C (Rev 4- 07).PDF
Approved- Closed 11/28/2011	S30595NU FIC	Policy/Cont Amendatory ract/Fratern Endorsement for al Policy Form No. Certificate: S30406NUFIC Amendmen t, Insert Page, Endorseme nt or Rider	Initial	50.100	S30595NUFI C amendatory for S30406.PDF
Approved- Closed 11/28/2011	S30596NU FIC	Policy/Cont Amendatory ract/Fratern Endorsement for al Policy Form No. Certificate: S30411NUFIC Amendmen t, Insert Page, Endorseme nt or Rider	Initial	51.600	S30596NUFI C amendatory for S30411.PDF
Approved- Closed 11/28/2011	S30597NU FIC	Policy/Cont Amendatory ract/Fratern Endorsement for al Domestic Partners Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial	51.200	S30597NUFI C .PDF
Approved- Closed 11/28/2011	S30598NU FIC	Policy/Cont B-1 Baggage Delay ract/Fratern Benefit Rider al	Initial	51.100	S30598NUFI C.PDF

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Certificate:

Amendment, Insert Page, Endorsement or Rider

Approved- Closed 11/28/2011	S30599NU FIC	Policy/Cont B-2 Trip Delay ract/Fratern Benefit Rider al	Initial	51.800	S30599NUFI C.PDF
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Certificate:
Amendment, Insert Page, Endorsement or Rider

Approved- Closed 11/28/2011	S30600NU FIC	Policy/Cont B-3 [Trip ract/Fratern Cancellation]/Interrup al tion/Airline	Initial	50.100	S30600NUFI C.PDF
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Certificate: Bankruptcy Benefit
Amendment Rider
t, Insert Page, Endorsement or Rider

Approved- Closed 11/28/2011	S30601NU FIC	Policy/Cont B-4 [Baggage] [and] ract/Fratern [Personal Effects] al Benefits Rider	Initial	50.400	S30601NUFI C.PDF
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Certificate:
Amendment, Insert Page, Endorsement or Rider

Approved- Closed 11/28/2011	S30602NU FIC	Policy/Cont B-5 Checked and/or ract/Fratern Carry-on Baggage al Benefit Rider (NY	Initial	51.800	S30602NUFI C.PDF
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Approved- Closed 11/28/2011	S30603NU FIC-AR	Policy/Cont B-6 Emergency ract/Fratern Evacuation with al [Family Travel]	Initial	51.100	S30603NUFI C-AR.PDF
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Certificate: Benefit Rider

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Approved- Closed 11/28/2011	S30605NU FIC	Policy/Cont B-8 Repatriation of ract/Fratern Remains Benefit al Rider	Initial	52.800	S30605NUFI C.PDF
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Approved- Closed 11/28/2011	S30606NU FIC-AR	Policy/Cont B-9 [Loss] [Collision] Revised ract/Fratern Damage Coverage al Benefit Rider	Revised	Replaced Form #: Previous Filing #:	50.200	S30606NUFI C-AR FINAL.PDF
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Approved- Closed 11/28/2011	S30407NU FIC	Application/Master Application- Enrollment Mandatory Policy Form	Initial	0.000	S30407NUFI C.PDF
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Approved- Closed 11/28/2011	S30408NU FIC-AR	Application/[Master] Enrollment [Participation] Form Organization Application- Mandatory Policy	Initial	0.000	S30408NUFI C-AR.PDF
Approved- Closed 11/28/2011	S30412NU FIC	Application/Master Application- Enrollment Supplemental Policy Form	Initial	0.000	S30412NUFI C.PDF
Approved- Closed 11/28/2011	S30413NU FIC-AR	Application/[Master] Enrollment [Participating Form Organization] Application- Supplemental Policy	Initial	0.000	S30413NUFI C-AR.PDF
Approved- Closed 11/28/2011	S30415NU FIC	Policy/Cont Participating ract/Fratern Organization al Endorsement- Certificate: Mandatory and Amendmen Supplemental Policy t, Insert Page, Endorseme nt or Rider	Initial	51.400	S30415NUFI C.PDF
Approved- Closed 11/28/2011	S30434NU FIC	Policy/Cont [Trip ract/Fratern Cancellation/Interrupt al ion] [Airline Certificate: Bankruptcy]- Amendmen Supplemental Policy t, Insert Page, Endorseme nt or Rider	Initial	50.700	S30434NUFI C.PDF
Approved- Closed 11/28/2011	S30488NU FIC	Policy/Cont Policy Amendment ract/Fratern Rider al Certificate: Amendmen	Initial	50.500	S30488NUFI C.PDF

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NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [SRGXXXX]

BLANKET ACCIDENT INSURANCE POLICY

This Policy is a legal contract between the Policyholder and National Union Fire Insurance Company of Pittsburgh, Pa. (herein called the Company). The Company agrees to insure eligible persons of the Policyholder for whom premium is paid (herein called Insured Person(s)) against loss covered by this Policy subject to its provisions, limitations and exclusions. The persons eligible to be Insured Persons are all persons described in the Classification of Eligible Persons section of the Master Application. This Policy is issued in consideration of the payment of the required premium when due and the statements set forth in the Master Application.

This Policy begins on the Policy Effective Date shown in the Master Application and continues in effect until the Policy Termination Date¹ as long as premiums are paid when due, unless otherwise terminated as further provided in this Policy. If this Policy is terminated, insurance ends on the date to which premiums have been paid. After the Policy Termination Date, this Policy may be renewed for additional periods of time by mutual written consent of the Company and the Policyholder at the premium rates in effect at the time of renewal.²

This Policy is governed by the laws of the state in which it is delivered.

The President and Secretary of National Union Fire Insurance Company witness this Policy:



President



Secretary

**PLEASE READ THIS POLICY CAREFULLY.
THIS IS AN ACCIDENT ONLY POLICY.
IT DOES NOT COVER SICKNESS OR DISEASE.**

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DEFINITIONS

[Account Holder - means any individual who is the owner of a Policyholder checking account as specified in the Classification of Eligible Persons on the Master Application.]³

[Airworthiness Certificate - means the "Standard" Airworthiness Certificate issued by the Federal Aviation Agency of the United States of America or its equivalent issued by the governmental authority having jurisdiction over civil aviation in the country of registry.]³

[Authorized Traveler – means any individual traveling at the request of the Corporate Cardholder and whose ticket is charged to a corporate travel system account established by the Policyholder for the Corporate Cardholder.]³

[Authorized User – means any person who is authorized by the Cardholder, Cardmember or Account Holder to use his or her credit/debit card or checking account and who is registered with the Policyholder.]³

[Cardholder/Cardmember - means any individual who:

- a) has a corporate credit card of a Corporate Cardholder that bears the individual's name; or
- b) has a personal credit/debit card issued by the Policyholder

as specified in the Classification of Eligible Persons on the Master Application.]³

[Civilian Aircraft - means a civil or public aircraft, other than Military Aircraft, having a current and valid Airworthiness Certificate and piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft. A Civilian Aircraft does not include a Policyholder Aircraft.]

[Common Carrier – means [any licensed land, water or air conveyance operated by those whose occupation or business is the transportation of persons for hire]⁴[any land, water, or air conveyance operated under a license for the transportation of Passengers for hire]⁴. [Common Carrier does not include any conveyance that is hired or used for a sport, gamesmanship, contest, sightseeing, observatory and/or recreational activity, regardless of whether such conveyance is licensed.]⁴ [A Common Carrier includes, but is not limited to, cruise ships, sightseeing buses, boats or rails.]⁴]³

[Corporate Cardholder - means a legal entity that has a credit card account issued by the Policyholder for the expenses of its employees and other persons.]³

[Immediate Family Member – means a person who is related to the Insured [Person]¹⁴ in any of the following ways: spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, parent (includes legal guardian and stepparent), grandparent, brother or sister (includes stepbrother or stepsister), child (includes legally adopted or stepchild), or grandchild.]³

[Injury - means bodily injury (1) resulting directly and independently of all other causes from an accident which occurs while the Insured Person is covered under this Policy, but not loss resulting from sickness or disease; and (2) which occurs under the circumstances described in a Hazard applicable to that person. See the Principal Sums, Hazards and Benefits for Insured Persons section on the applicable Master Application for applicability of Hazards and Benefits.]⁴

[Injury - means bodily injury: (1) which is sustained as a direct result of an unintended, unanticipated accident that occurs while the injured person's coverage under [this [the] Policy is in force; (2) which occurs under the circumstances described in a Hazard applicable to that person; and (3) which directly (independent of sickness, disease [, mental incapacity, bodily infirmity] or any other cause) causes a covered loss under a Benefit applicable to such Hazard.]⁴

Insured - means a person: (1) who is a member of an eligible class of persons as described in the Classification of Eligible Persons section of the applicable Master Application; (2) for whom premium has been paid; and (3) while covered under this Policy. [An Insured does not include any person insured under this Policy solely as an Insured Dependent, Authorized User or authorized traveler.]⁵ [However, an Authorized Traveler is considered an Insured.]⁶

Insured Dependent - means an [Insured Spouse] [or][Insured Dependent Child(ren)].³

Insured Dependent Child(ren) - means the Insured's Eligible Dependent Child(ren) as described in the Classification of Eligible Persons section of the Master Application for whom premium has been paid and while covered under this Policy.]³

Insured Person - means an Insured[,] [or][an Insured Dependent]⁷[,][or][an Authorized User]⁷[, or][an authorized traveler (any individual traveling at the request of a Corporate Cardholder whose tickets are charged to a corporate travel system account established by the Policyholder for the Corporate Cardholder)]⁷.

Insured Spouse - means the Insured's Eligible Spouse as described in the Classification of Eligible Persons section of the Master Application for whom premium has been paid and while covered under this Policy.]³

Military Air Transport Aircraft - means an aircraft having a current and valid Airworthiness Certificate; piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft; and operated by the United States of America, or by the similar air transport service of any duly constituted governmental authority of any other recognized country.]³

Passenger - means a person not performing as a pilot, operator or crew member of a conveyance.]³

Public Conveyance - means any land only Common Carrier, including taxi, bus, train or airport limousine, but not including courtesy transportation provided without a specific charge.]³

Physician – means a licensed practitioner of the healing arts acting within the scope of his or her license who is not: (1) the Insured Person; (2) an Immediate Family Member; or (3) retained by the Policyholder.]³

POLICY EFFECTIVE AND TERMINATION DATES

Effective Date. This Policy begins on the Policy Effective Date shown in the Master Application of this Policy at 12:01 AM Standard Time at the address of the Policyholder where this Policy is delivered.

Termination Date. The Company may terminate this Policy [on any Policy Anniversary Date]⁸ by giving [30 days]⁹ advance written notice to the Policyholder. The Policyholder may terminate this Policy [at any time]⁴ [on any Policy Anniversary Date]⁴ by giving the Company [30 days]⁹ advance written notice. This Policy may also, at any time, be terminated by mutual written consent of the Company and the Policyholder. This Policy terminates automatically on [the earlier of: 1)]¹⁰ [the Policy Termination Date shown in the Master Application unless renewed by mutual consent,]¹¹ [or 2)] [the premium due date if premiums are not paid when due]¹². Termination takes effect at 12:01 AM Standard Time at the Policyholder's address on the date of termination.

INSURED'S EFFECTIVE AND TERMINATION DATES

Effective Date. Subject to payment of the applicable premium when due, an Insured's insurance under this Policy begins on the later of: (1) the Policy Effective Date or (2) the date the person becomes a member of an eligible class of persons as described in the Classification of Eligible Persons section of the Master Application.

Termination Date. An Insured's insurance under this Policy ends on the earliest of: (1) the date this Policy is terminated; (2) the premium due date if premiums are not paid when due; [(3) the date the Insured's account ceases to be in good standing;]¹³ [or] [(4)] the date the Insured ceases to be a member of any eligible class(es) of persons as described in the Classification of Eligible Persons section of the Master Application.

[Termination of the Policy will not affect a claim for a covered loss that occurred while the Insured's insurance was in force under this Policy.]⁴

[Termination of the Policy will not affect: (1) an Insured's coverage under this Policy for a Common Carrier passenger fare charged or purchased in the manner specified in the Coverage Effective & Termination Dates section of the applicable Master Application prior to the date the Policy is terminated; or (2) a claim for a covered loss that occurred while the Insured's insurance was in force under this Policy.]⁴

[INSURED PERSON'S (OTHER THAN INSURED'S) EFFECTIVE AND TERMINATION DATES

Effective Date. Subject to payment of the applicable premium when due, an Insured Person's (other than Insured's) insurance under the Policy begins on the later of: (1) the date the Insured's insurance under the Policy begins; or (2) the date the person becomes a member of any eligible class of persons as described in the Classification of Eligible Persons section of the Master Application.

Termination Date. An Insured Person's (other than Insured's) insurance under the Policy ends on the earliest of: (1) the date the Insured's insurance under the Policy ends; (2) the premium due date if premiums are not paid when due, or (3) the date the Insured Person ceases to be a member of any eligible class of persons as described in the Classification of Eligible Persons section of the Master Application.

[Termination of the Policy will not affect a claim for a covered loss that occurred while the Insured Person's (other than Insured's) insurance was in force under this Policy.]⁴

[Termination of the Policy will not affect: (1) an Insured Person's (other than Insured's) coverage under this Policy for a Common Carrier passenger fare charged or purchased in the manner specified in the Coverage Effective & Termination Dates section of the applicable Master Application prior to the date the Policy is terminated; or (2) a claim for a covered loss that occurred while the Insured Person's (other than Insured's) insurance was in force under this Policy.]⁴¹⁴

PREMIUM

Premiums. Premiums are payable to the Company at the rates and in the manner described in the Premiums section of the Master Application for this Policy. [The Company may change the required premiums [due on or after the first Policy Anniversary Date and once in any 12 month period thereafter]¹⁵ by giving the Policyholder at least [31 days]¹⁶ advance written notice.]¹⁵ [Such change shall be in effect for a period of at least [12 months] from the date of such change.]¹⁷ [The Company may change the required premiums as a condition of any renewal of this Policy.]¹⁸ The Company may also change the required premiums at any time when any coverage change affecting premiums is made in this Policy.

Grace Period. A Grace Period of [31]¹⁹ days will be provided for the payment of any premium due after the first. This Policy will not be terminated for nonpayment of premium during the Grace Period if the Policyholder pays all premiums due by the last day of the Grace Period. This Policy will terminate on the last day of the period for which all premiums have been paid if the Policyholder fails to pay all premiums due by the last day of the Grace Period.

If the Company expressly agrees to accept late payment of a premium without terminating this Policy, the Company does so in accordance with the Noncompliance with Policy Requirements provision of the General Provisions section.[In such case, the Policyholder will be liable to the Company for any unpaid premiums for the time this Policy is in force[, plus all costs and expenses (including, but not limited to, reasonable attorney fees, collection fees and court costs) incurred by the Company in the collection of all overdue amounts]²⁰.]²⁰

No grace period will be provided if the Company receives notice to terminate this Policy prior to a premium due date.

BENEFITS

Principal Sum. As applicable to each Hazard and Benefit for each Insured [Person]¹⁴, Principal Sum means the amount of insurance in force under this Policy on that person for that Hazard and Benefit as described for the Insured [Person]¹⁴'s eligible class in the Principal Sums, Hazards and Benefits section of the Master Application.

[B-1. Accidental Death Benefit. See the Principal Sums, Hazards and Benefits for Eligible Persons section of the Master Application for the applicability of this Benefit with respect to each class of Insured Persons and each hazard. If Injury to the Insured Person results in death [within [365] days of the date of the accident that caused the Injury]²¹, the Company will pay 100% of the Principal Sum.]²²

[B-2. Accidental Dismemberment Benefit. See the Principal Sums, Hazards and Benefits for Eligible Persons section of the Master Application for the applicability of this Benefit with respect to each class of Insured Persons and each hazard. If Injury to the Insured Person results, within [365] days of the date of the accident that caused the Injury, in any one of the Losses specified below, the Company will pay the percentage of the Principal Sum shown below for that Loss:

<u>For Loss of</u>	<u>Percentage of Principal Sum</u>
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
[Speech and Hearing in Both Ears	100%] ²³
One Hand or One Foot	50%
Sight of One Eye	50%
[Speech or Hearing in Both Ears	50%] ²³
[Thumb and Index Finger of Same Hand.....	25%] ²⁴

“Loss” of a hand means complete severance through or above the metacarpophalangeal knuckle joints of at least four fingers on the same hand. “Loss” of a foot means complete severance through or above the ankle joint. “Loss” of sight of an eye means total and irrecoverable loss of the entire sight in that eye. [“Loss” of hearing in an ear means total and irrecoverable loss of the entire ability to hear in that ear. “Loss” of speech means total and irrecoverable loss of the entire ability to speak.]²³ [“Loss” of thumb and index finger means complete severance through or above the metacarpophalangeal knuckle joint of both fingers.]²⁴

[The Company will consider it a loss of hand or foot or thumb and index finger of the same hand even if they are later reattached.]²⁵

If more than one Loss is sustained by an Insured Person as a result of the same accident, only one amount, the largest applicable to the losses incurred, will be paid.]²⁶

[Exposure and Disappearance. If by reason of an accident occurring while an Insured Person's coverage is in force under this Policy, the Insured Person is unavoidably exposed to the elements and as a result of such exposure suffers a loss for which a benefit is otherwise payable under this Policy, the loss will be covered under the terms of this Policy.

If the body of an Insured Person has not been found within [12] months of the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the person was an occupant while covered under this Policy, then it will be deemed, subject to all other terms and provisions of this Policy, that the Insured Person has suffered accidental death within the meaning of this Policy.]²⁷

LIMITATIONS

[Limitation on Multiple Benefits. If an Insured Person suffers one or more losses from the same accident for which amounts are payable under more than one of the [following] Benefits provided by this Policy, the maximum amount payable under all of the Benefits combined will not exceed the amount payable for one of those losses, the largest[: Accidental Death Benefit or Accidental Dismemberment]²⁹.]²⁸

[Limitation on Multiple Hazards. If an Insured[Person]¹⁴'s Injury is caused by an accident that occurs under the circumstances described in more than one Hazard applicable to that person as shown in the Principal Sums, Hazards and Benefits section of the Master Application, for Policy purposes the Principal Sum for that Insured Person for that accident will be determined as though the accident occurred under the circumstances described in only one such Hazard, the Hazard with the largest Principal Sum[: List of Hazards which will be limited]³¹.]³⁰

[Aggregate Limit. The maximum amount payable under this Policy may be reduced if more than one Insured Person suffers a loss as a result of the same accident and if amounts are payable for those losses under one or more of the following Benefits provided by this Policy: [Accidental Death Benefit or Accidental Dismemberment. The maximum amount payable for all such losses for all Insured Persons under all those Benefits combined will not exceed the amount shown as the Aggregate Limit in the Master Application. If the combined maximum amount otherwise payable for all Insured Persons must be reduced to comply with this provision, the reduction will be taken by applying the same percentage of reduction to the individual maximum amount otherwise payable for each Insured Person for all such losses under all those Benefits combined.]³³

[NOTE: If the Master Application states that an Aggregate Limit is restricted in its applicability to certain eligible classes or certain Hazards, this Aggregate Limit provision applies only to Insured Persons in those eligible classes or to whom that Hazard applies.]³⁴³²

[The maximum payable for all combined losses for any one accident per each Insured's account is shown in item [4A.b.] of the Master Application. In no event will any amount in excess of the account maximum be payable for losses to all Insured Persons due to any one accident per any one Insured's account. If the combined losses are in excess of the account maximum, the amounts payable to each Insured Person will be paid on a proportionate basis up to the account maximum.]³⁵

GENERAL EXCLUSIONS

No coverage shall be provided under this Policy and no payment shall be made for any loss resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks[even if the proximate or precipitating cause of the loss is an accidental bodily Injury]³⁶.

1. suicide or any attempt at suicide, whether sane or insane or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury[or autoeroticism]³⁶.

[2. sickness[,][or] disease[, mental incapacity or bodily infirmity]³⁶ whether the loss results directly or indirectly from[any][either] of these.]³⁷

[[2][3]. the Insured Person's commission of or attempt to commit a[felony]³⁶[crime]³⁶.]³⁷

[[2][3][4]. Commercial Aircraft tickets charged to fraudulently issued or fraudulently used credit/debit cards as determined by the applicable bank, Corporate Cardholder or service provider.]³⁷

[[2][3][4][5]. infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition[including but not limited to diabetes]³⁶.]³⁷

[[2][3][4][5][6]. declared or undeclared war, or any act of declared or undeclared war, except if specifically provided by this Policy.]³⁷

[[2][3][4][5][6][7]. participation in any team sport or any other athletic activity, except if specifically provided by this Policy.]³⁷

[[2][3][4][5][6][7][8]. full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured is not covered due to his or her active duty status will be refunded) (Loss caused while on short-tem National Guard or reserve duty for regularly scheduled training purposes is not excluded).]³⁷

[[2][3][4][5][6][7][8][9]. travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is[:]

[[a.] riding as a passenger in any aircraft [except a Civilian Aircraft or Military Air Transport Aircraft]³⁶[except a Common Carrier]³⁶[not intended or licensed for the transportation of passengers]³⁶[; or]³⁷

[[b.] performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]³⁶ of any aircraft[; or]³⁷

[[b][c]. riding as a passenger in an aircraft owned, leased or operated by the Policyholder or the Insured's employer]³⁷.]³⁷

[[2][3][4][5][6][7][8][9][10]. the Insured Person being under the influence of intoxicants [while operating any vehicle or means of transportation or conveyance]³⁶.]³⁷

[[2][3][4][5][6][7][8][9][10][11]. the Insured Person being under the influence of drugs unless taken under the advice of and as specified by a Physician.]³⁷

[[2][3][4][5][6][7][8][9][10][11][12]. the medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity[whether the loss results directly or indirectly from the treatment]³⁶.³⁷

[[2][3][4][5][6][7][8][9][10][11][12][13]. stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.³⁷

[[2][3][4][5][6][7][8][9][10][11][12][13][14]. any condition for which the Insured Person is entitled to benefits under any Workers' Compensation Act or similar law.³⁷

[[2][3][4][5][6][7][8][9][10][11][12][13][14][15]. the Insured Person riding in or driving any type of motor vehicle as part of a speed contest or scheduled race, including testing such vehicle on a track, speedway or proving ground.³⁷

[[2][3][4][5][6][7][8][9][10][11][12][13][14][15][16]. any loss incurred while outside the United States, its Territories or Canada.³⁷

CLAIMS PROVISIONS

Notice of Claim. Written notice of claim must be given to the Company within [20]³⁸ days after an Insured Person's loss, or as soon thereafter as reasonably possible. Notice given by or on behalf of the claimant to the Company at [AIG Accident and Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225-5987]³⁹ with information sufficient to identify the Insured Person, is deemed notice to the Company.

Claim Forms. The Company will send claim forms to the claimant upon receipt of a written notice of claim. If such forms are not sent within [15]⁴⁰ days after the giving of notice, the claimant will be deemed to have met the proof of loss requirements upon submitting, within the time fixed in this Policy for filing proof of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made. The notice should include the Insured's name, the Policyholder's name and the Policy number.

Proof of Loss. Written proof of loss must be furnished to the Company within [90]³⁸ days after the date of the loss. If the loss is one for which this Policy requires continuing eligibility for periodic benefit payments, subsequent written proofs of eligibility must be furnished at such intervals as the Company may reasonably require. Failure to furnish proof within the time required neither invalidates nor reduces any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity of the claimant, later than one year from the time proof is otherwise required.

Payment of Claims. Upon receipt of due written proof of death, payment for loss of life of an Insured Person will be made to the Insured Person's beneficiary as described in the Beneficiary Designation and Change provision of the General Provisions section.

Upon receipt of due written proof of loss, payments for all losses, except loss of life, will be made to (or on behalf of, if applicable) the Insured Person suffering the loss. If an Insured Person dies before all payments due have been made, the amount still payable will be paid to his or her beneficiary as described in the Beneficiary Designation and Change provision of the General Provisions section.

If any payee is a minor or is not competent to give a valid release for the payment, the payment will be made to the legal guardian of the payee's property. If the payee has no legal guardian for his or her property, a payment not exceeding \$1,000 may be made, at the Company's option, to any relative by blood or connection by marriage of the payee, who, in the Company's opinion, has assumed the custody and support of the minor or responsibility for the incompetent person's affairs.

Any payment the Company makes in good faith fully discharges the Company's liability to the extent of the payment made.

Time of Payment of Claims. Benefits payable under this Policy for any loss other than loss for which this Policy provides any periodic payment will be paid immediately upon the Company's receipt of due written proof of the loss. Subject to the Company's receipt of due written proof of loss, all accrued benefits for loss for which this Policy provides periodic payment will be paid at the expiration of each month during the continuance of the period for which the Company is liable and any balance remaining unpaid upon termination of liability will be paid immediately upon receipt of such proof.

GENERAL PROVISIONS

Entire Contract; Changes. This Policy, and any application or attached papers make up the entire contract between the Policyholder and the Company. In the absence of fraud, all statements made by the Policyholder will be considered representations and not warranties.

No change in this Policy will be valid until approved by an officer of the Company. The approval must be noted on or attached to this Policy. No agent may change this Policy or waive any of its provisions.

Incontestability. The validity of this Policy will not be contested after it has been in force for two year(s) from the Policy Effective Date, except as to nonpayment of premiums.

[Description of Coverage. The Company, when required, will provide a description of coverage for distribution to each Insured describing the coverage provided, any limitations, reductions, and exclusions applicable to the coverage, and to whom benefits will be paid.]⁴¹

Beneficiary Designation and Change. The Insured [Person]¹⁴'s designated beneficiary(ies) is (are) the person(s) so named by the Insured [Person]¹⁴ as shown on the Company's records kept on this Policy.

An Insured [Person]¹⁴ over the age of majority and legally competent may change his or her beneficiary designation at any time, unless an irrevocable designation has been made, without the consent of the designated beneficiary(ies), by providing the Company with a written request for change. When the request is received by the Company, whether the Insured [Person]¹⁴ is then living or not, the change of beneficiary will relate back to and take effect as of the date of execution of the written request, but without prejudice to the Company on account of any payment made by it prior to receipt of the request.

If there is no designated beneficiary for an Insured [Person]¹⁴'s benefit or no designated beneficiary for the Insured [Person]¹⁴'s benefits is living after the Insured [Person]¹⁴'s death, the benefits will be paid in equal shares, to the survivors in the first surviving class of those that follow: the Insured [Person]¹⁴'s (1) spouse; (2) children; (3) parents; or (4) brothers and sisters. If no class has a survivor, the beneficiary is the Insured [Person]¹⁴'s estate.

Physical Examination and Autopsy. The Company at its own expense has the right and opportunity to examine the person of any individual whose loss is the basis of claim under this Policy when and as often as it may reasonably require during the pendency of the claim and to make an autopsy in case of death where it is not forbidden by law.

Legal Actions. No action at law or in equity may be brought to recover on this Policy prior to the expiration of 60 days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action may be brought after the expiration of three years after the time written proof of loss is required to be furnished.

Noncompliance with Policy Requirements. Any express waiver by the Company of any requirements of this Policy will not constitute a continuing waiver of such requirements. Any failure by the Company to insist upon compliance with any Policy provision will not operate as a waiver or amendment of that provision.

Conformity With State Statutes. Any provision of this Policy which, on its effective date, is in conflict with the statutes of the state in which this Policy is delivered is hereby amended to conform to the minimum requirements of those statutes.

Workers' Compensation. This Policy is not in lieu of and does not affect any requirements for coverage by any Workers' Compensation Act or similar law.

Clerical Error. Clerical error, whether by the Policyholder or the Company, will not void the insurance of any Insured Person if that insurance would otherwise have been in effect nor extend the insurance of any Insured Person if that insurance would otherwise have ended or been reduced as provided in this Policy.

Records. The Company has the right to inspect at any reasonable time, any records of the Policyholder that may have a bearing on this insurance.

Assignment. This Policy is non-assignable.

[An Insured may not assign any of his or her rights, privileges or benefits under this Policy.]⁴²

[An Insured may assign all of his or her rights, privileges and benefits under this Policy without the consent of his or her designated beneficiary. The Company is not bound by an assignment until the Company receives and files a signed copy. The Company is not responsible for the validity of assignments. The assignee only takes such rights as the assignor possessed and such rights are subject to state and federal laws and the terms of this Policy.]⁴³

New Entrants. This Policy will allow from time to time, that new eligible Insured Persons of the Policyholder be added to the class(es) of Insured Persons originally insured under this Policy.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [SRGXXXX]

BLANKET ACCIDENT INSURANCE POLICY

This Policy is a legal contract between the Policyholder and National Union Fire Insurance Company of Pittsburgh, Pa. (herein called the Company). The Company agrees to insure eligible persons of the Policyholder for whom premium is paid (herein called Insured Person(s)) against loss covered by this Policy subject to its provisions, limitations and exclusions. The persons eligible to be Insured Persons are all persons described in the Classification of Eligible Persons section of the Master Application.

This Policy begins on the Policy Effective Date shown in the Master Application and continues in effect [until the Policy Termination Date]¹ as long as premiums are paid when due, unless otherwise terminated as further provided in this Policy. If this Policy is terminated, insurance ends on the date to which premiums have been paid. [After the Policy Termination Date, this Policy may be renewed for additional periods of time by mutual written consent of the Company and the Policyholder at the premium rates in effect at the time of renewal.]²

This Policy is issued in consideration of the payment of the required premium when due and the statements set forth in the signed Master Application, which is attached to and made part of this Policy, and in the individual enrollment forms, if any.

This Policy is governed by the laws of the state in which it is delivered.

The President and Secretary of National Union Fire Insurance Company witness this Policy:



President



Secretary

**PLEASE READ THIS POLICY CAREFULLY.
THIS IS AN ACCIDENT ONLY POLICY.
IT DOES NOT COVER SICKNESS OR DISEASE.**

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DEFINITIONS

[Account Holder - means any individual who is the owner of a Policyholder checking account as specified in the Classification of Eligible Persons on the Master Application.]³

[Airworthiness Certificate - means the "Standard" Airworthiness Certificate issued by the Federal Aviation Agency of the United States of America or its equivalent issued by the governmental authority having jurisdiction over civil aviation in the country of registry.]³

[Authorized User – means any person who is authorized by the Cardholder, Cardmember or Account Holder to use his or her credit/debit card or checking account and who is registered with the Policyholder.]³

[Cardholder/Cardmember - means any individual who:

- a) has a corporate credit card of a Corporate Cardholder that bears the individual's name; or
- b) has a personal credit/debit card issued by the Policyholder

as specified in the Classification of Eligible Persons on the Master Application.]³

[Commercial Aircraft – means a civil or public aircraft licensed for the transportation of passengers for hire which has a current and valid Airworthiness Certificate and is piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft.]³

[Corporate Cardholder - means a legal entity that has a credit card account issued by the Policyholder for the expenses of its employees and other persons.]³

[Immediate Family Member – means a person who is related to the Insured [Person]¹⁴ in any of the following ways: spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, father-in-law, parent (includes legal guardian and stepparent), grandparent, brother or sister (includes stepbrother or stepsister), child (includes legally adopted or stepchild), or grandchild.]³

[Injury - means bodily injury (1) resulting directly and independently of all other causes from an accident which occurs while the Insured Person is covered under this Policy, but not loss resulting from sickness or disease; and (2) which occurs under the circumstances described in a Hazard applicable to that person. See the Principal Sums, Hazards and Benefits for Insured Persons section on the applicable Master Application for applicability of Hazards and Benefits.]⁴

[Injury - means bodily injury: (1) which is sustained as a direct result of an unintended, unanticipated accident that occurs while the injured person's coverage under [this] [the] Policy is in force; (2) which occurs under the circumstances described in a Hazard applicable to that person; and (3) which directly (independent of sickness, disease [, mental incapacity, bodily infirmity] or any other cause) causes a covered loss under a Benefit applicable to such Hazard. See the Principal Sums, Hazards and Benefits for Insured Persons section on the applicable Master Application for applicability of Hazards and Benefits.]⁴

Insured - means a person: (1) who is a member of an eligible class of persons as described in the Classification of Eligible Persons section of the applicable Master Application; (2) for whom premium has been paid; (3) while covered under this Policy; and (4) who has enrolled for coverage under this Policy, if required. [An Insured does not include any person insured under this Policy solely as an Insured Dependent or Authorized User.]⁵

[Insured Dependent - means an [Insured Spouse] [or] [Insured Dependent Child(ren)].]³

[Insured Dependent Child(ren) - means the Insured's Eligible Dependent Child(ren) as described in the Classification of Eligible Persons section of the Master Application for whom premium has been paid and while covered under this Policy.]³

Insured Person - means an Insured[,] [or] an Insured Dependent]7[,] or] an Authorized User]7.

Insured Spouse - means the Insured's Eligible Spouse as described in the Classification of Eligible Persons section of the Master Application for whom premium has been paid and while covered under this Policy.]³

Passenger - means a person not performing as a pilot, operator or crew member of a conveyance.]³

Public Conveyance - means any licensed land conveyance operated by those whose occupation or business is the transportation of persons for hire, including taxi, bus, train or hotel/airport limousine, but not including courtesy transportation provided without a specific charge.]³

Physician – means a licensed practitioner of the healing arts acting within the scope of his or her license who is not: (1) the Insured Person; (2) an Immediate Family Member; or (3) retained by the Policyholder.]³

POLICY EFFECTIVE AND TERMINATION DATES

Effective Date. This Policy begins on the Policy Effective Date shown in the Master Application of this Policy at 12:01 AM Standard Time at the address of the Policyholder where this Policy is delivered.

Termination Date. The Company may terminate this Policy [on any Policy Anniversary Date]⁸ by giving [30 days]⁹ advance written notice to the Policyholder. The Policyholder may terminate this Policy [at any time]⁴ [on any Policy Anniversary Date]⁴ by giving the Company [30 days]⁹ advance written notice. This Policy may also, at any time, be terminated by mutual written consent of the Company and the Policyholder. This Policy terminates automatically on [the earlier of: 1)]¹⁰ [the Policy Termination Date shown in the Master Application unless renewed by mutual consent,]¹¹ [or 2)] [the premium due date if premiums are not paid when due]¹². Termination takes effect at 12:01 AM Standard Time at the Policyholder's address on the date of termination.

INSURED'S EFFECTIVE AND TERMINATION DATES

Effective Date. An Insured's insurance under this Policy begins on the latest of: (1) the Policy Effective Date; (2) the date for which the first premium for the Insured's coverage is paid; (3) the date the person becomes a member of an eligible class of persons as described in the Classification of Eligible Persons section of the Master Application; or (4) if individual enrollment is required, the date written enrollment is received by the Policyholder.

A change in an Insured's coverage under this Policy due to a change in his or her eligible class or election of enrollment option become(s) effective on the latest of: (1) when the change in his or her eligible class or election of enrollment option occur(s); (2) if the change requires a change in premium, the date the first changed premium is paid; or (3) if individual enrollment for the change is required, the date the written enrollment form requesting the change is received by the Policyholder. However, a change in coverage applies only with respect to accidents that occur once the change becomes effective.

Termination Date. An Insured's insurance under this Policy ends on the earliest of: (1) the date this Policy is terminated; (2) the premium due date if premiums are not paid when due; [(3) the date the Insured's account ceases to be in good standing;]¹³ [(4)] the date the Insured ceases to be a member of any eligible class(es) of persons as described in the Classification of Eligible Persons section of the Master Application; or [(5)] the date the Insured requests, in writing, that his or her coverage be terminated.

[Termination of the Policy will not affect a claim for a covered loss that occurred while the Insured's insurance was in force under this Policy.]⁴

[Termination of the Policy will not affect: (1) an Insured's coverage under this Policy for a Commercial Aircraft passenger fare charged or purchased in the manner specified in the Coverage Effective & Termination Dates section of the applicable Master Application prior to the date the Policy is terminated; or (2) a claim for a covered loss that occurred while the Insured's insurance was in force under this Policy.]⁴

[INSURED DEPENDENT'S AND AUTHORIZED USER'S EFFECTIVE AND TERMINATION DATES

Effective Date. Subject to payment of the applicable premium when due, an Insured Dependent's and Authorized User's insurance under the Policy begins on the later of: (1) the date the Insured's insurance under the Policy begins; or (2) the date the person becomes a member of any eligible class of persons as described in the Classification of Eligible Persons section of the Master Application .

Termination Date. An Insured Dependent's and Authorized User's insurance under the Policy ends on the earliest of: (1) the date the Insured's insurance under the Policy ends; (2) the premium due date if premiums are not paid when due, or (3) the date the Insured Dependent or Authorized User ceases to be a member of

any eligible class of persons as described in the Classification of Eligible Persons section of the Master Application .

[Termination of the Policy will not affect a claim for a covered loss that occurred while the Insured Dependent's or Authorized User's insurance was in force under this Policy.]⁴

[Termination of the Policy will not affect: (1) an Insured Dependent's or Authorized User's coverage under this Policy for a Commercial Aircraft passenger fare charged or purchased in the manner specified in the Coverage Effective & Termination Dates section of the applicable Master Application prior to the date the Policy is terminated; or (2) a claim for a covered loss that occurred while the Insured Dependent's or Authorized User's insurance was in force under this Policy.]⁴¹⁴

PREMIUM

Premiums. Premiums are payable to the Company at the rates and in the manner described in the Premiums section of the Master Application for this Policy. [The Company may change the required premiums [due on or after the first Policy Anniversary Date and once in any 12 month period thereafter]¹⁵ by giving the Policyholder at least [31 days]¹⁶ advance written notice.]¹⁵ [Such change shall be in effect for a period of at least [12 months] from the date of such change.]¹⁷ [The Company may change the required premiums as a condition of any renewal of this Policy.]¹⁸ The Company may also change the required premiums at any time when any coverage change affecting premiums is made in this Policy.

Grace Period. A Grace Period of [31]¹⁹ days will be provided for the payment of any premium due after the first. This Policy will not be terminated for nonpayment of premium during the Grace Period if the Policyholder pays all premiums due by the last day of the Grace Period. This Policy will terminate on the last day of the period for which all premiums have been paid if the Policyholder fails to pay all premiums due by the last day of the Grace Period.

If the Company expressly agrees to accept late payment of a premium without terminating this Policy, the Company does so in accordance with the Noncompliance with Policy Requirements provision of the General Provisions section. [In such case, the Policyholder will be liable to the Company for any unpaid premiums for the time this Policy is in force[, plus all costs and expenses (including, but not limited to, reasonable attorney fees, collection fees and court costs) incurred by the Company in the collection of all overdue amounts].²⁰.]²⁰

No grace period will be provided if the Company receives notice to terminate this Policy prior to a premium due date.

BENEFITS

Principal Sum. As applicable to each Hazard and Benefit provided by this Policy for each Insured [Person]¹⁴, Principal Sum means the amount shown as the principal sum for that Hazard and Benefit for the Insured [Person]¹⁴'s eligible class in the Benefit Schedule. However, if the Master Application describes several choices of principal sums for that Hazard or Benefit for the Insured [Person]¹⁴'s eligible class, the Insured [Person]¹⁴'s principal sum for that Hazard or Benefit is the amount the Insured [Person]¹⁴ selects on his or her written enrollment form. Any change in the Insured [Person]¹⁴'s selection of a principal sum becomes effective as described in the Insured [Person]¹⁴'s Effective and Termination Dates section of this Policy.

[B-1. Accidental Death Benefit. See the Principal Sums, Hazards and Benefits for Eligible Persons section of the Master Application for the applicability of this Benefit with respect to each class of Insured Persons and each Hazard. If Injury to the Insured Person results in death [within [365] days of the date of the accident that caused the Injury]²¹, the Company will pay 100% of the Principal Sum.]²²

[B-2. Accidental Dismemberment Benefit. See the Principal Sums, Hazards and Benefits for Eligible Persons section of the Master Application for the applicability of this Benefit with respect to each class of Insured Persons and each Hazard. If Injury to the Insured Person results, within [365] days of the date of the accident that caused the Injury, in any one of the Losses specified below, the Company will pay the percentage of the Principal Sum shown below for that Loss:

<u>For Loss of</u>	<u>Percentage of Principal Sum</u>
Both Hands or Both Feet	100%
Sight of Both Eyes	100%
One Hand and One Foot	100%
One Hand and the Sight of One Eye	100%
One Foot and the Sight of One Eye	100%
[Speech and Hearing in Both Ears	100%] ²³
One Hand or One Foot	50%
Sight of One Eye	50%
[Speech or Hearing in Both Ears	50%] ²³
[Thumb and Index Finger of Same Hand	25%] ²⁴

“Loss” of a hand means complete severance through or above the metacarpophalangeal knuckle joints of at least four fingers on the same hand. “Loss” of a foot means complete severance through or above the ankle joint. “Loss” of sight of an eye means total and irrecoverable loss of the entire sight in that eye. [“Loss” of hearing in an ear means total and irrecoverable loss of the entire ability to hear in that ear. “Loss” of speech means total and irrecoverable loss of the entire ability to speak.]²³ [“Loss” of thumb and index finger means complete severance through or above the metacarpophalangeal knuckle joint of both fingers.]²⁴

[The Company will consider it a loss of hand or foot or thumb and index finger of the same hand even if they are later reattached.]²⁵

If more than one Loss is sustained by an Insured Person as a result of the same accident, only one amount, the largest applicable to the losses incurred, will be paid.]²⁶

[Exposure and Disappearance. If by reason of an accident occurring while an Insured Person's coverage is in force under this Policy, the Insured Person is unavoidably exposed to the elements and as a result of such exposure suffers a loss for which a benefit is otherwise payable under this Policy, the loss will be covered under the terms of this Policy.

If the body of an Insured Person has not been found within [12] months of the disappearance, forced landing, stranding, sinking or wrecking of a conveyance in which the person was an occupant while covered under this

Policy, then it will be deemed, subject to all other terms and provisions of this Policy, that the Insured Person has suffered accidental death within the meaning of this Policy.]²⁷

LIMITATIONS

[Limitation on Multiple Benefits. If an Insured Person suffers one or more losses from the same accident for which amounts are payable under more than one of the [following] Benefits provided by this Policy, the maximum amount payable under all of the Benefits combined will not exceed the amount payable for one of those losses, the largest[: Accidental Death Benefit or Accidental Dismemberment]²⁹.]²⁸

[Limitation on Multiple Hazards. If an Insured[Person]'s Injury is caused by an accident that occurs under the circumstances described in more than one Hazard applicable to that person as shown in the Principal Sums, Hazards and Benefits section of the Master Application, for Policy purposes the Principal Sum for that Insured Person for that accident will be determined as though the accident occurred under the circumstances described in only one such Hazard, the Hazard with the largest Principal Sum[: List of Hazards which will be limited]³¹.]³⁰

[Aggregate Limit. The maximum amount payable under this Policy may be reduced if more than one Insured Person suffers a loss as a result of the same accident and if amounts are payable for those losses under one or more of the following Benefits provided by this Policy: [Accidental Death Benefit or Accidental Dismemberment. The maximum amount payable for all such losses for all Insured Persons under all those Benefits combined will not exceed the amount shown as the Aggregate Limit in the Master Application. If the combined maximum amount otherwise payable for all Insured Persons must be reduced to comply with this provision, the reduction will be taken by applying the same percentage of reduction to the individual maximum amount otherwise payable for each Insured Person for all such losses under all those Benefits combined.]³³

[NOTE: If the Master Application states that an Aggregate Limit is restricted in its applicability to certain eligible classes or certain Hazards, this Aggregate Limit provision applies only to Insured Persons in those eligible classes or to whom that Hazard applies.]³⁴³²

[The maximum payable for all combined losses for any one accident for any one accident per each Insured's account is shown in item 4A.b. of the Master Application. In no event will any amount in excess of the account maximum be payable for losses to all Insured Persons due to any one accident per any one Insured's account. If the combined losses are in excess of the account maximum, the amounts payable to each Insured Person will be paid on a proportionate basis up to the account maximum.]³⁵

GENERAL EXCLUSIONS

No coverage shall be provided under this Policy and no payment shall be made for any loss resulting in whole or in part from, or contributed to by, or as a natural and probable consequence of any of the following excluded risks [even if the proximate or precipitating cause of the loss is an accidental bodily Injury]³⁶.

1. suicide or any attempt at suicide whether sane or insane, or intentionally self-inflicted Injury or any attempt at intentionally self-inflicted Injury [or autoeroticism]³⁶.
2. sickness[,] [or] disease[,] mental incapacity or bodily infirmity]¹ whether the loss results directly or indirectly from [any][either] of these.]³⁷
- [[2][3]. the Insured Person's commission of or attempt to commit a [felony]³⁶ [crime]³⁶.]³⁷
- [[2][3][4]. Commercial Aircraft tickets charged to fraudulently issued or fraudulently used credit/debit cards as determined by the applicable bank, Corporate Cardholder or service provider.]³⁷
- [[2][3][4][5]. infections of any kind regardless of how contracted, except bacterial infections that are directly caused by botulism, ptomaine poisoning or an accidental cut or wound independent and in the absence of any underlying sickness, disease or condition [including but not limited to diabetes]³⁶.]³⁷
- [[2][3][4][5][6]. declared or undeclared war, or any act of declared or undeclared war, except if specifically provided by this Policy.]³⁷
- [[2][3][4][5][6][7]. participation in any team sport or any other athletic activity, except if specifically provided by this Policy.]³⁷
- [[2][3][4][5][6][7][8]. full-time active duty in the armed forces, National Guard or organized reserve corps of any country or international authority. (Unearned premium for any period for which the Insured is not covered due to his or her active duty status will be refunded) (Loss caused while on short-tem National Guard or reserve duty for regularly scheduled training purposes is not excluded).]³⁷
- [[2][3][4][5][6][7][8][9]. travel or flight in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is[:]
 - [[a.] riding as a passenger in any aircraft [except a Commercial Aircraft]³⁶ [not intended or licensed for the transportation of passengers]³⁶ [; or]³⁷
 - [[b.] performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]³⁶ of any aircraft[:; or]³⁷
 - [[b][c]. riding as a passenger in an aircraft owned, leased or operated by the Policyholder or the Insured's employer]³⁷ .]³⁷
- [[2][3][4][5][6][7][8][9][10]. the Insured Person being under the influence of intoxicants [while operating any vehicle or means of transportation or conveyance]³⁶ .]³⁷
- [[2][3][4][5][6][7][8][9][10][11]. the Insured Person being under the influence of drugs unless taken under the advice of and as specified by a Physician.]³⁷

[[2][3][4][5][6][7][8][9][10][11][12]. the medical or surgical treatment of sickness, disease, mental incapacity or bodily infirmity [whether the loss results directly or indirectly from the treatment] ³⁶.³⁷

[[2][3][4][5][6][7][8][9][10][11][12][13]. stroke or cerebrovascular accident or event; cardiovascular accident or event; myocardial infarction or heart attack; coronary thrombosis; aneurysm.]
₃₆

[[2][3][4][5][6][7][8][9][10][11][12][13][14]. any condition for which the Insured Person is entitled to benefits under any Workers' Compensation Act or similar law.]³⁶

[[2][3][4][5][6][7][8][9][10][11][12][13][14][15]. the Insured Person riding in or driving any type of motor vehicle as part of a speed contest or scheduled race, including testing such vehicle on a track, speedway or proving ground.]³⁶

[[2][3][4][5][6][7][8][9][10][11][12][13][14][15][16]. any loss incurred while outside the United States, its Territories or Canada.]³⁶

CLAIMS PROVISIONS

Notice of Claim. Written notice of claim must be given to the Company within [20]³⁸ days after an Insured Person's loss, or as soon thereafter as reasonably possible. Notice given by or on behalf of the claimant to the Company at [AIG, Accident and Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225-5987]³⁹ with information sufficient to identify the Insured Person, is deemed notice to the Company.

Claim Forms. The Company will send claim forms to the claimant upon receipt of a written notice of claim. If such forms are not sent within [15]⁴⁰ days after the giving of notice, the claimant will be deemed to have met the proof of loss requirements upon submitting, within the time fixed in this Policy for filing proof of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made. The notice should include the Insured's name, the Policyholder's name and the Policy number.

Proof of Loss. Written proof of loss must be furnished to the Company within [90]³⁸ days after the date of the loss. If the loss is one for which this Policy requires continuing eligibility for periodic benefit payments, subsequent written proofs of eligibility must be furnished at such intervals as the Company may reasonably require. Failure to furnish proof within the time required neither invalidates nor reduces any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity of the claimant, later than one year from the time proof is otherwise required.

Payment of Claims. Upon receipt of due written proof of death, payment for loss of life of an Insured Person will be made to the Insured Person's beneficiary as described in the Beneficiary Designation and Change provision of the General Provisions section.

Upon receipt of due written proof of loss, payments for all losses, except loss of life, will be made to (or on behalf of, if applicable) the Insured Person suffering the loss. If an Insured Person dies before all payments due have been made, the amount still payable will be paid to his or her beneficiary as described in the Beneficiary Designation and Change provision of the General Provisions section.

If any payee is a minor or is not competent to give a valid release for the payment, the payment will be made to the legal guardian of the payee's property. If the payee has no legal guardian for his or her property, a payment not exceeding \$1,000 may be made, at the Company's option, to any relative by blood or connection by marriage of the payee, who, in the Company's opinion, has assumed the custody and support of the minor or responsibility for the incompetent person's affairs.

Any payment the Company makes in good faith fully discharges the Company's liability to the extent of the payment made.

Time of Payment of Claims. Benefits payable under this Policy for any loss other than loss for which this Policy provides any periodic payment will be paid immediately upon the Company's receipt of due written proof of the loss. Subject to the Company's receipt of due written proof of loss, all accrued benefits for loss for which this Policy provides periodic payment will be paid at the expiration of each month during the continuance of the period for which the Company is liable and any balance remaining unpaid upon termination of liability will be paid immediately upon receipt of such proof.

GENERAL PROVISIONS

Entire Contract; Changes. This Policy, and any application or attached papers make up the entire contract between the Policyholder and the Company. In the absence of fraud, all statements made by the Policyholder will be considered representations and not warranties.

No change in this Policy will be valid until approved by an officer of the Company. The approval must be noted on or attached to this Policy. No agent may change this Policy or waive any of its provisions.

Incontestability. The validity of this Policy will not be contested after it has been in force for two year(s) from the Policy Effective Date, except as to nonpayment of premiums.

Description of Coverage. The Company, when required, will provide a description of coverage for distribution to each Insured describing the coverage provided, any limitations, reductions, and exclusions applicable to the coverage, and to whom benefits will be paid.⁴¹

Beneficiary Designation and Change. The Insured's designated beneficiary(ies) is (are) the person(s) so named by the Insured as shown on the Company's records kept on this Policy. The beneficiary for other than the Insured is his or her estate.

An Insured over the age of majority and legally competent may change his or her beneficiary designation at any time, unless an irrevocable designation has been made, without the consent of the designated beneficiary(ies), by providing the Company with a written request for change. When the request is received by the Company, whether the Insured is then living or not, the change of beneficiary will relate back to and take effect as of the date of execution of the written request, but without prejudice to the Company on account of any payment made by it prior to receipt of the request.

If there is no designated beneficiary for an Insured's benefit or no designated beneficiary for the Insured's benefits is living after the Insured's death, the benefits will be paid in equal shares, to the survivors in the first surviving class of those that follow: the Insured's (1) spouse; (2) children; (3) parents; or (4) brothers and sisters. If no class has a survivor, the beneficiary is the Insured's estate.

Physical Examination and Autopsy. The Company at its own expense has the right and opportunity to examine the person of any individual whose loss is the basis of claim under this Policy when and as often as it may reasonably require during the pendency of the claim and to make an autopsy in case of death where it is not forbidden by law.

Legal Actions. No action at law or in equity may be brought to recover on this Policy prior to the expiration of 60 days after written proof of loss has been furnished in accordance with the requirements of this Policy. No such action may be brought after the expiration of three years after the time written proof of loss is required to be furnished.

Noncompliance with Policy Requirements. Any express waiver by the Company of any requirements of this Policy will not constitute a continuing waiver of such requirements. Any failure by the Company to insist upon compliance with any Policy provision will not operate as a waiver or amendment of that provision.

Conformity With State Statutes. Any provision of this Policy which, on its effective date, is in conflict with the statutes of the state in which this Policy is delivered is hereby amended to conform to the minimum requirements of those statutes.

Workers' Compensation. This Policy is not in lieu of and does not affect any requirements for coverage by any Workers' Compensation Act or similar law.

Clerical Error. Clerical error, whether by the Policyholder or the Company, will not void the insurance of any Insured Person if that insurance would otherwise have been in effect nor extend the insurance of any Insured Person if that insurance would otherwise have ended or been reduced as provided in this Policy.

Records. The Company has the right to inspect at any reasonable time, any records of the Policyholder that may have a bearing on this insurance.

Assignment. This Policy is non-assignable.

[An Insured may not assign any of his or her rights, privileges or benefits under this Policy.]⁴²

[An Insured may assign all of his or her rights, privileges and benefits under this Policy without the consent of his or her designated beneficiary, unless an irrevocable designation has been made. The Company is not bound by an assignment until the Company receives and files a signed copy. The Company is not responsible for the validity of assignments. The assignee only takes such rights as the assignor possessed and such rights are subject to state and federal laws and the terms of this Policy.]⁴³

New Entrants. This Policy will allow from time to time, that new eligible Insured Persons of the Policyholder be added to the class(es) of Insured Persons originally insured under this Policy.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038
(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-1 [LAND,]¹ [WATER]¹ [OR][AIR]¹ COMMON CARRIER (PUBLIC CONVEYANCE)

Hazard H-1 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master] Application, and only with respect to covered losses sustained by such person while coverage is in effect and:

1. while riding as a Passenger in or on (including getting in or out of, or on or off of [or being struck by]¹) any Common Carrier; or
2. while riding as a Passenger in or on (including getting in or out of, or on or off of) any Public Conveyance, but only while traveling directly to [an airport, terminal or station]² immediately prior to departure, or directly from [an airport, terminal or station]² immediately after arrival of such Common Carrier;¹ [or
3. while at [an airport, terminal or station]² immediately prior to boarding or after alighting from such Common Carrier]¹.

[Exclusions. Exclusion [9][a][b][c] (Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]¹ [except a Common Carrier]¹ [not intended or licensed for the transportation of Passengers]¹] [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]¹ of any aircraft]¹ ;]¹ [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]¹ .]¹

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-2

[LAND,]¹ [WATER]¹ [OR] [AIR]¹ COMMON CARRIER [(mode of transportation)]¹

Hazard H-2 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master] Application, and only with respect to covered losses sustained by such person while coverage is in effect and:

1. while riding as a Passenger in or on (including getting in or out of, or on or off of [or being struck by]¹) any Common Carrier¹; or
2. while riding as a Passenger in or on (including getting in or out of, or on or off of) any mode of transportation, but only while traveling directly to [an airport, terminal or station]² immediately prior to departure, or directly from [an airport, terminal or station]² immediately after arrival of such Common Carrier;¹ [or
3. while at [an airport, terminal or station]² immediately prior to boarding or after alighting from such Common Carrier¹.

[Exclusions. Exclusion [9] [a][b][c](Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]¹ [except a Common Carrier]¹ [not intended or licensed for the transportation of Passengers]¹] [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]¹ of any aircraft]¹ ;]¹ [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]¹ .]¹

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-3

[LAND,]¹ [WATER]¹ [OR] [AIR]¹ COMMON CARRIER [(PUBLIC CONVEYANCE)]¹ (Business Only)

Hazard H-3 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master] Application, and only with respect to covered losses sustained by such person, While on the Business of the [Corporate Cardholder]³[Policyholder]³:

1. while riding as a Passenger in or on (including getting in or out of, or on or off of [or being struck by]²) any Common Carrier; or
2. while riding as a Passenger in or on (including getting in or out of, or on or off of) any Public Conveyance, but only while traveling directly to [an airport, terminal or station]² immediately prior to departure, or directly from [an airport, terminal or station]² immediately after arrival of such Common Carrier;]¹ [or
3. while at [an airport, terminal or station]² immediately prior to boarding or after alighting from such Common Carrier;]¹ and

while coverage is in effect.

[Exclusions. Exclusion [9][a][b][c] (Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]¹ [except a Common Carrier]¹ [not intended or licensed for the transportation of Passengers]¹] [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]² of any aircraft]¹ ;]² [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]² .]²

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

Definitions.

While on the Business of the [Corporate Cardholder]³[Policyholder]³ - means while the Insured Person [or Authorized User/Authorized Traveler]⁴ is on assignment by or at the direction of the [Corporate Cardholder]³[Policyholder]³ for the purpose of furthering the business of the [Corporate Cardholder]³[Policyholder]³, but does not include any period of time: (1) while working at his or her regular place of employment; (2) during the course of everyday travel to and from work; or (3) during an authorized leave of absence or vacation.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038
(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-4 24-HOUR ACCIDENT PROTECTION WHILE ON A TRIP (Business Only)

Hazard H-4 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master] Application, and only while coverage is in effect [and for up to [30] [consecutive] days]¹ While on the Business of the [Corporate Cardholder]²[Policyholder]², including a Sojourn or Personal Deviation made by such person, during the course of the same [30] consecutive days¹.

[With respect to a Sojourn or Personal Deviation, Hazard H-4 applies only where the Sojourns or Personal Deviations taken While on the Business of the [Corporate Cardholder]²[Policyholder]²:

1. [if they do not depart more than [50,100,150,200,250,500,750,1000] miles from the direct route of the Destination(s)]³; and
2. if they involve one or more stops en route and/or an extension of time spent at the Destination(s) that do not last longer than a total of:
 - (a) [1,2,3,4,5,6,7] day(s);]¹ or
 - (b) [10,25,50,75,100]% of the time that would otherwise have been spent While on Business of the [Corporate Cardholder][Policyholder];]¹
[whichever is less]¹.]⁴

[Exclusions. Exclusion [9] [a][b][c](Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]¹ [except a Common Carrier]¹ [not intended or licensed for the transportation of Passengers]¹]² [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]² of any aircraft]¹ ;]² [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]² .]²

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

Definitions.

While on the Business of the [Corporate Cardholder]²[Policyholder]² - means while the Insured [or Authorized User/Authorized Traveler]⁵ is on assignment by or at the direction of the [Corporate Cardholder]²[Policyholder]² for the purpose of furthering the business of the [Corporate Cardholder]²[Policyholder]², but does not include any period of time: (1) while working at his or her regular place of employment; (2) during the course of everyday travel to and from work; or (3) during an authorized leave of absence or vacation.

[Sojourn or Personal Deviation] - means non-business travel or activities undertaken While on the Business of the [Corporate Cardholder]²[Policyholder]² but unrelated to furthering the business of the [Corporate Cardholder]²[Policyholder]².

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-5 24-HOUR ACCIDENT PROTECTION WHILE ON A TRIP

Hazard H-5 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master Application] with respect to covered losses incurred while on a Trip and only while coverage is in effect [and for up to [30][consecutive] days]¹.

[Exclusions. Exclusion [9][a][b][c] (Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]² [except a Common Carrier]² [not intended or licensed for the transportation of Passengers]²]³ [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]³ of any aircraft]² ;]³ [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]³ .]³

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038
(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

HAZARD H-6

[COMMERCIAL AIRCRAFT]¹[CIVILIAN OR MILITARY AIRCRAFT]¹ [(PUBLIC CONVEYANCE)]²

Hazard H-6 applies only with respect to an Insured Person in a class to which this Hazard applies as stated in the Principal Sums, Hazards and Benefits for Insured Persons section of the [Master] Application, and only with respect to covered losses sustained by such person while coverage is in effect and:

1. while riding as a Passenger in or on (including getting in or out of, or on or off of [or being struck by]²) any [Commercial Aircraft]¹ [Civilian or Military Aircraft]¹; or
2. while riding as a Passenger in or on (including getting in or out of, or on or off of) any Public Conveyance, but only while traveling directly to the airport immediately prior to departure, or directly from the airport immediately after arrival of such [Commercial Aircraft];¹ [Civilian or Military Aircraft]¹;² [;or
3. while at the airport immediately prior to boarding or after alighting from such [Commercial Aircraft]¹ [Civilian or Military Aircraft]¹.]²

[Exclusions. Exclusion [9] [a][b][c] (Aircraft Exclusion) in the General Exclusions section of this Policy is waived with the respect to an Insured Person to whom this Hazard applies, but only with respect to covered losses sustained by such person under the circumstances described in this Hazard. [It is not waived with respect to such person traveling or flying in or on (including getting in or out of, or on or off of) any vehicle used for aerial navigation, if the Insured Person is [riding as a Passenger in any aircraft [except Civilian Aircraft or Military Air Transport Aircraft]² [except a Common Carrier]² [not intended or licensed for the transportation of Passengers]²]² [or] [performing, learning to perform or instructing others to perform as a pilot or crew member [or examiner]² of any aircraft]² ;]² [or] [riding as a Passenger in an aircraft owned, leased or operated by the Policyholder or the Insured Person's employer]² .]²

Except as noted above, all other provisions, limitations and exclusions of the Policy apply.

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXX]

AMENDATORY ENDORSEMENT for Policy Form No. S30406NUFIC

This Policy Amendment is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master] Application][effective [Month Day, Year]] [at 12:01 AM, Standard Time at the address of the Policyholder]. [Any changes in coverage apply only with respect to covered losses that occur on or after that date.][Any changes in premium apply as of the first premium due date on or after the effective date of this Amendment.]

[The **Definitions** section of the Policy is amended to add the following:

[Account – means the credit/debit card [corporate travel system]³ or checking account of the [Account Holder, Cardholder/Cardmember or Corporate Cardholder]³.]²

[Authorized Driver – means any individual identified as an authorized driver on the Rental Agreement.]²

[Civil Aircraft – means a Civilian Aircraft.]²

[Commercial Aircraft – means a civil or public aircraft, licensed for the transportation of passengers for hire which has a current and valid Airworthiness Certificate and piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft.]²

[Commercial Airline – means a licensed airline providing transportation of passengers for hire on a Commercial Aircraft.]²

[[Commercial Airline]³[Common Carrier Fare]³ Ticket –means a one-way or round-trip ticket for which: 1) the entire fare is charged to the [Named]³ Account prior to boarding; and 2) allows for the admission of an Insured Person onto a [Common Carrier]³[Commercial Aircraft]³. In the event an Insured Person has more than one [Named]³ Account, benefits are payable only with respect to the card under which the [Commercial Airline]³ [Common Carrier Fare]³ Tickets were fully charged. [The [Commercial Airline]³[Common Carrier Fare]³ Ticket includes companion tickets issued for free with the purchase of a full [Commercial Airline]³[Common Carrier Fare]³ Ticket and used by an Insured Dependent, if the corresponding [Commercial Airline]³[Common Carrier Fare]³ Ticket is charged to the [Named]³ Account, but does not include frequent flyer³[traveler]³ Tickets].²

[Destination – means the place to which the Insured Person expects to travel on his/her Trip as shown [on the Ticket]³[or][in the Travel Itinerary]³.]²

[Named Account – means the credit card issued by [the Discover Financial Services LLC]³ [or Morgan Stanley Dean Witter Bank]³ to the Insured Person [and bearing the Insured Person's name]³.]²

[Public Aircraft – means a Civilian Aircraft.]²

[Trip – means scheduled travel[not to exceed [30] days]³for which a [[Commercial Airline]³[Common Carrier Fare]³ Ticket is purchased]³ [Rental Car is rented]³ as specified in the Coverage Effective and Termination Dates in the Master Application.]²¹

[The following **Definition[s]** [is/are] changed to read:

[Civilian Aircraft – means a civil or public aircraft, other than Military Air Transport Aircraft, having a current and valid Airworthiness Certificate and piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft. [A Civilian Aircraft does not include a Policyholder aircraft.]³²

Insured – means a person: (1) who is a member of an eligible class of persons as described in the Classification of Eligible Persons section of the applicable Master Application; (2) for whom premium has been paid; (3) while covered under this Policy; and (4) who has enrolled for coverage under this Policy, if required. [An Insured does not include any person insured under this Policy solely as an Insured Dependent, Authorized User, Authorized Driver or [Authorized Traveler].] [However, an Authorized Traveler is considered an Insured.]²

Insured Person – means an Insured[,][or][an Insured Dependent]³[,][or][an Authorized User]³[,][or][an Authorized Traveler]³][,][or][an Authorized Driver]³.]²

Public Conveyance – means any licensed land conveyance operated by those whose occupation or business is the transportation of persons for hire, including taxi, bus, train or hotel/airport limousine, but not including courtesy transportation provided without a specific charge.]²

Public Conveyance – means:

(a) any land only Common Carrier, including taxi, bus, train or airport limousine;

(b) scheduled helicopter operated as a Common Carrier;

but not including courtesy transportation provided without a specific charge.]²]¹

This Policy Amendment expires concurrently with the Policy and is subject to all of the provisions, limitations and conditions of the Policy except as they are specifically modified by this Policy Amendment.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Endorsement:



President



Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXX]

AMENDATORY ENDORSEMENT for Policy Form No. S30411NUFIC

This Policy Amendment is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master] Application][effective [Month Day, Year]] [at 12:01 AM, Standard Time at the address of the Policyholder]. [Any changes in coverage apply only with respect to covered losses that occur on or after that date.][Any changes in premium apply as of the first premium due date on or after the effective date of this Amendment.]

[The **Definitions** section of the Policy is amended to add the following:

[Account – means the credit/debit card or checking account of the [Account Holder, Cardholder/Cardmember or Corporate Cardholder].^{3,2}

[Authorized Driver – means any individual identified as an authorized driver on the Rental Agreement.]²

[Authorized Traveler – means any individual traveling at the request of the Corporate Cardholder and whose Ticket is charged to a corporate travel system account established by the Policyholder for the Corporate Cardholder.]²

[Civil Aircraft – means a Civilian Aircraft.]²

[Civilian Aircraft – means a civil or public aircraft, other than Military Air Transport Aircraft, having a current and valid Airworthiness Certificate and piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft. [A Civilian Aircraft does not include a Policyholder aircraft.]^{3,2}

[Commercial Airline – means a licensed airline providing transportation of passengers for hire on a Commercial Aircraft.]²

[Common Carrier – means [any licensed land, water or air conveyance operated by those whose occupation or business is the transportation of persons for hire]³[any land, water or air conveyance operated under a license for the transportation of Passengers for hire]³. [Common Carrier does not include any conveyance that is hired or used for a sport, gamesmanship, contest, sightseeing, observatory and/or recreational activity, regardless of whether such conveyance is licensed.]³ [A Common Carrier includes, but is not limited to, cruise ships, sightseeing buses, boats or rails.]^{3,2}

[[Commercial Airline]³[Common Carrier Fare]³ Ticket– means a one-way or round trip ticket for which: 1) the entire fare is charged to the [Named]³ Account prior to boarding; and 2) allows for the admission of an Insured Person onto a [Common Carrier]³[Commercial Aircraft]³. In the event an Insured Person has more than one [Named]³ Account, benefits are payable only with respect to the card under which the [Commercial Airline]³[Common Carrier Fare]³ Tickets were fully charged. [The [Commercial Airline]³[Common Carrier Fare]³ Ticket includes companion tickets issued for free with the purchase of a full [Commercial Airline]³[Common Carrier Fare]³ Ticket and used by an Insured Dependent, if the corresponding [Commercial Airline]³ [Common Carrier Fare]³ Ticket is charged to the [Named]³ Account, but does not include frequent [flyer]³[traveler]³ Tickets].²

Destination – means the place to which the Insured Person expects to travel on his/her Trip as shown [on the Ticket]³[or][in the Travel Itinerary]³.]²

Military Air Transport Aircraft – means an aircraft having a current and valid Airworthiness Certificate; piloted by a person who has a current and valid medical certificate and pilot certificate with appropriate ratings for the aircraft; and operated by the United States of America, or by the similar air transport service of any duly constituted governmental authority of any other country.]²

Named Account – means the credit card issued by [the Discover Financial Services LLC]³ [or Morgan Stanley Dean Witter Bank]³ to the Insured Person [and bearing the Insured Person's name]³.]²

Public Aircraft – means a Civilian Aircraft.]²

Trip – means scheduled travel [not to exceed [30] days]³for which a[[Commercial Airline]³[Common Carrier fare]³ Ticket is purchased]³ [Rental Car is rented]³ as specified in the Coverage Effective and Termination Dates as defined in the Master Application.]²]¹

The following **Definitions** are changed to read:

Insured – means a person: (1) who is a member of an eligible class of persons as described in the Classification of Eligible Persons section of the applicable Master Application; (2) for whom premium has been paid; (3) while covered under this Policy; and (4) who has enrolled for coverage under this Policy, if required. [An Insured does not include any person insured under this Policy solely as an Insured Dependent, Authorized User, Authorized Driver or [Authorized Traveler]³.]³[However, an Authorized Traveler is considered an Insured.]³

Insured Person – means an Insured[,][or][an Insured Dependent]³[,][or][an Authorized User]³[,][or][an Authorized Traveler]³ [,][or][an Authorized Driver]³.]²

Public Conveyance – means any licensed land only Common Carrier, including taxi, bus, train or airport limousine, but not including courtesy transportation provided without a specific charge.]²

Public Conveyance - means a) any land only Common Carrier, including taxi, bus, train or airport limousine; b) scheduled helicopter operated as a Common Carrier; but not including courtesy transportation provided without a specific charge.]²

[The **Exclusions** section of the Policy is amended as follows:

Exclusion [2][3] [4] is changed to read:

[Commercial Airline]³ [Common Carrier Fare]³ Tickets charged to fraudulently issued or fraudulently used credit/debit cards as determined by the applicable bank, Corporate Cardholder or service provider.]¹

This Policy Amendment expires concurrently with the Policy and is subject to all of the provisions, limitations and conditions of the Policy except as they are specifically modified by this Policy Amendment.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Endorsement:

A stylized handwritten signature consisting of a large 'P' followed by a vertical line and a horizontal line.

President

A handwritten signature that appears to start with 'D' followed by several loops and a period.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038
(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Incorporated]

Policy Number: [XXXXXX]

AMENDATORY ENDORSEMENT FOR DOMESTIC PARTNERS

This Policy Amendment is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master] Application][effective [Month Day, Year]] . [Any changes in coverage apply only with respect to covered losses that occur on or after that date.][Any changes in premium apply as of the first premium due date on or after the effective date of this Amendment.] It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Endorsement.

It is hereby understood and agreed that all references to legal or common-law Spouse include a Domestic Partner.

It is hereby understood and agreed that **Domestic Partner** means [an opposite]¹ [or] [a same]² sex partner who is at least [18] years of age and has met all of the following requirements for at least [the most recent]³[6, 12]³ months: (1) resides with the Insured in a committed relationship; (2) shares financial assets and obligations with the Insured; [and][3] (3) is not related by blood to the Insured to a degree of closeness that would prohibit a legal marriage;]⁴ [(4) neither the Insured or Domestic Partner is married to anyone else, nor has any other Domestic Partner]⁴ [and] [(5) intends to continue the relationship indefinitely]⁴. The Company requires proof of the Domestic Partner relationship in the form of a signed and completed Affidavit of Domestic Partnership.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Endorsement:



President



Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [_____]

Policy Number: [_____]

BENEFIT B-1 BAGGAGE DELAY BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master Application]¹ [effective [Month Day, Year]]². It applies only with respect to [Trips that occur]³[Tickets purchased]³[a covered loss that occurs]³ on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

Baggage Delay Benefit. If the Insured Person's Checked Baggage is delayed or misdirected by a [Common Carrier]³[Commercial Airline]³[for more than [6] hours]³ [from the time the Insured Person arrives at the Destination [(other than the Insured Person's [Return Destination]³[Location of Permanent Residence]³)]³,³ the Company will reimburse the Insured Person for the expenses he or she incurs to purchase Necessary Personal Effects, up to a [\$100] maximum [per Trip]³ [per Ticket]³ [per Insured Person]³ [per year]³. All claims must be verified by the [Common Carrier]³[Commercial Airline]³ who must certify to the delay or misdirection. Original receipts for the Necessary Personal Effects purchased must also be submitted with the claim.

LIMITATIONS:

[The Maximum will be reduced by benefits paid or payable by a [Commercial Airline]³ [Common Carrier]³ for the delay or misdirection of the Insured Person's Checked Baggage.]³

[The Company will not pay more than the maximum amount in any 12 consecutive months regardless of the number of Baggage Delay claims made in that 12 month period.]³⁴

Excess Insurance. The insurance provided by this benefit shall be in excess of [any amount due solely from the [Common Carrier]³ [Commercial Airline]³ [or any other third party]³. The Company will be liable only for the excess of the amount of the loss over the amount for which the [Common Carrier]³ [Commercial Airline]³ [or other third party]³ is liable.]³[all other valid and collectible insurance or indemnity , at the time of the occurrence of any loss payable under this Rider, there is other valid and collectible insurance or indemnity in place, the Company shall be liable only for the excess of the amount of the loss, over the amount of such other insurance and indemnity.]³⁵

DEFINITIONS:

Checked Baggage - means [suitcases or other containers [specifically designed]³ for carrying personal property, and the personal property contained therein,]³ [luggage and personal possessions whether owned, borrowed or rented]³ for which a claim check has been issued to the Insured Person by a [Commercial Airline]³ [Common Carrier]³.

Destination – means the place to which the Insured Person expects to travel as shown on the Ticket.]⁶

Location of Permanent Residence – means the city where the Insured Person has established his or her fixed and permanent principal home.]⁷

Necessary Personal Effects – means [clothes and toiletries]³[, but do not include:

1. contact lenses, eyeglasses or hearing aids.
2. artificial teeth, dental bridges or prosthetic devices.
3. tickets, documents, money, securities, check, travelers checks and valuable papers.

business samples]⁸.

Return Destination – means the place to which the Insured Person expects to return [from his or her Trip]³ [as shown on the Ticket.]⁹

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.

A stylized handwritten signature in black ink, consisting of a large 'P' followed by a vertical line and a horizontal line.

President

A handwritten signature in black ink, appearing to start with 'D' followed by several loops and a final flourish.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [_____]

Policy Number: [_____]

BENEFIT B-2 TRIP DELAY BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the Policy's [Master] Application]¹ [effective [Month Day, Year]]². It applies only with respect to Trips that occur on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

Trip Delay Benefit. If the Insured Person's Trip is delayed [for [3, 6, 12 or 24] or more hours]³ [due to any of the Covered Reasons listed below]³ [resulting in the loss of more than [50%] of the Insured Person's scheduled Trip length]³, the Company will reimburse the Insured Person [up to the per Ticket maximum of [\$XX] [per day for a maximum of [X] days]³, [subject to a [\$xxxxx] per Account maximum]³]³ for:

1. [any Reasonable Additional Expenses incurred;]³[and]
2. [an economy [airfare] Ticket, subject to credit applied from the Insured Person's unused Ticket.]³

[This benefit is payable for only [one] delay [per Insured Person]⁴, [per Trip]⁴, up to a maximum of [X] occurrences per [Account] per year]³.]³

[The maximum will be reduced by benefits paid or payable due to any separate maximum under this Rider.]³

Covered Reasons. A Trip Delay Benefit will be payable for the following Covered Reasons:

- [(a) [delay [or cancellation]]³ of a [Common Carrier, Commercial Aircraft]⁴ [caused by Inclement Weather]³.]⁵
- [(b) a Strike or other job action by employees of a [Common Carrier, Commercial Airline]⁴ scheduled to be used by the Insured Person during the Insured Person's Trip;]⁵
- [(c) [delay [or cancellation]]³ caused by Equipment Failure;]⁵
- [(d) a traffic accident in which the Insured Person is [directly] involved while en route to a Trip departure[, documented by a police report]³;]⁵
- [(e) lost or stolen passports, travel documents, or money;]⁵
- [(f) [quarantine,]³ hijacking, Natural Disaster that causes a complete cessation of travel services at the point of Departure or Destination, civil commotion [or riot]³;]⁵
- [(g) breakdown of a rental vehicle en route to a departure [when the rental is part of the Trip]³;]⁵
- [(h) the [flight, passage]⁴ being cancelled or delayed because the [airport, station, depot, terminal]⁴ from which the Insured Person's [flight, passage]⁴ is scheduled to depart is temporarily closed [due to a documented security breach or threat]³;]⁵
- [(i) missed connections;]⁵[or]
- [(j) [Injury or Sickness]⁴ of the Insured Person if a Physician has recommended in writing, that due to the severity of the condition of the Insured Person, it is Medically Necessary that the Insured Person delay the Trip. The Insured Person must be under the direct care and attendance of a Physician]⁵.

Excess Insurance. The insurance provided by this benefit shall be in excess of [any amount due solely from the [Common Carrier]⁴ [Commercial Airline]⁴ [other third party]⁴. The Company will be liable only for the excess of the amount of the loss over the amount for which the [Common Carrier]⁴ [Commercial Airline]⁴ [other third party]⁴ is liable]³[all other valid and collectible insurance or indemnity]³. [If, at the time of the occurrence of any loss payable under this Rider, there is other valid and collectible insurance or indemnity in place, the

Company shall be liable only for the excess of the amount of the loss, over the amount of such other insurance and indemnity.]³

Definitions

[Complications of Pregnancy – means conditions requiring Hospital stays (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include nonelective caesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of Pregnancy do not include false labor, occasional spotting, physician-prescribed rest during the period of pregnancy, morning sickness, hyperemesis gravidarum, preeclampsia and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct complication of pregnancy.]⁶

[Departure – means the travel date, as indicated [on the Ticket]⁴ [or] [in the Travel Itinerary]⁴, upon which the Insured Person is scheduled to leave on the Trip.]⁷

[Equipment Failure - means any sudden, unforeseen breakdown in the [Commercial Aircraft's]⁴ [Common Carrier's]⁴ equipment that causes a delay or interruption of normal trips.]⁸

[Hospital - means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis; (3) has 24 hour nursing service by registered nurses (R.N.'s); and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged; nor does it include any ward, room, wing, or other section of the hospital that is used for such purposes; or (3) any military or veterans hospital or soldiers home or any hospital contracted for or operated by any national government or government agency for the treatment of members or ex-members of the armed forces, except if there is a legal obligation to pay.]⁹

[Inclement Weather - means any severe weather condition which delays the scheduled arrival or departure of a [Common Carrier]⁴ [Commercial Aircraft]⁴.]¹⁰

[Natural Disaster - means flood, hurricane, tornado, earthquake or blizzard that is due to natural causes.]¹¹

Pre-existing Condition - means an Injury, Sickness, or other condition of the Insured Person, for which, in the 60 day period before the purchase date of the Ticket, that person: (a) received medical advice or treatment by a Physician; (b) had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or (c) required taking prescribed drugs or medicine, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription.

[Reasonable Additional Expenses - means any expenses for meals and lodging which were necessarily incurred as the result of a Covered Reason [and which were not provided by the [Common Carrier]⁴ [Commercial Airline]⁴ or any other party free of charge].]¹²

[Sickness - means an illness or disease which requires treatment by a Physician.]³

[Strike – means a stoppage of work: (a) announced, organized and sanctioned by a Labor Union; and (b) which interferes with the normal departure and arrival of a [Common Carrier, Commercial Aircraft]⁴. This includes work slowdowns and sick-outs.]¹³

Exclusions. In addition to all other exclusions in the General Exclusions section of the Policy, benefits payable under this Rider are deemed to exclude losses caused in whole or in part by, or resulting in whole or in part from:

1. [elective or non-emergency treatment or surgery, except for necessary treatment or surgery due to a covered Injury;]¹⁴
2. traveling while on a waiting list for specified medical treatment;
3. traveling for the purpose of obtaining medical treatment;

4. traveling against the advice of a Physician;
5. traveling in the third trimester (seventh month or after) of pregnancy;
6. [dental treatment to teeth, gums or structures directly supporting the teeth except as a result of Injury to sound natural teeth or non-elective, emergency dental surgery;]¹⁴
7. venereal disease or syphilis;
8. Pre-Existing Conditions;
9. a Trip for which the Insured Person's Tickets do not contain specific travel dates(open tickets);
10. [participation in a riot, insurrection or civil disturbance;]¹⁴
11. [any fraudulent, dishonest or criminal acts committed by the Insured Person, alone or in collusion with others;]¹⁴
12. forgery by the Insured Person;
13. [confiscation, detention, destruction or expropriation by order of any government, public authority, customs, or other officials;]¹⁴
14. [nuclear reaction or radioactive contamination;]¹⁴
15. [seizure or destruction under quarantine or custom regulation;]¹⁴
16. [accidental bodily injuries arising from participation in interscholastic, professional or semi-professional sports events, racing or speed contests, including testing, practicing or training, in or on a motorized vehicle, bodily contact sports, professional athletic events; semi-professional, organized or interscholastic team sports, or participation in organized athletic activities;]¹⁴
17. [mountain climbing, rock climbing, mountaineering, caving, ice-climbing; parachuting, skydiving, skin diving, para-sailing, paragliding, hot air ballooning, bungee jumping, uncertified scuba, deep sea diving, hang gliding, extreme sports, ultralight flying, trampoline jumping, snow skiing, luge, snow sports, snowboarding tobogganing, bobsledding, indoor and outdoor ice skating, snow tubing or ice hockey]¹⁴;
18. [the Insured Person's, whether insured or not, commission of or attempt to commit a felony, crime]¹⁴;
19. [pregnancy, childbirth, miscarriage, or elective abortion, except Complications of Pregnancy]¹⁴;
20. [emotional trauma, mental illness; mental, emotional, psychological or nervous disorders including anxiety, depression, neurosis or psychosis, panic attacks and post-traumatic stress disorder, except if Hospitalized]¹⁴;
21. [alcohol or substance abuse or treatment for same;]¹⁴
22. cosmetic surgery, unless such cosmetic surgery is rendered necessary as a result of a loss covered under this Policy;
23. Injury sustained while traveling in or on any two or three-wheeled motor vehicle operated by a person who does not hold a valid operators license;
24. loss incurred as a result of travel in or upon a snowmobile or off-road motorized vehicle not requiring a license as a motor vehicle.

[Exclusion(s) in the General Exclusions section of the Policy are waived with respect to an Insured Person to whom benefits are payable under this Rider, but only with respect to [Injury or Sickness]⁴ [and] a [Covered Reason suffered by such person under the circumstances described under this Rider.]⁴]³

THE CLAIMS PROVISION OF THE POLICY IS AMENDED WITH RESPECT TO THIS RIDER TO INCLUDE THE FOLLOWING PROVISIONS:

Misrepresentation and Fraud. Coverage of the Insured Person will be void if, at any time, the Insured Person has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Insured Person relating to this coverage. Coverage for an Insured Person will be void if, whether before or after a loss, the Policyholder has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Policyholder relating to this coverage.

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.

A stylized handwritten signature in black ink, consisting of several sharp, angular strokes.

President

A handwritten signature in black ink, featuring a cursive 'D' followed by several overlapping loops and a final flourish.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [_____]

Policy Number: [_____]

BENEFIT B-3

[TRIP CANCELLATION]¹/[INTERRUPTION]²/[[AIRLINE]⁴ BANKRUPTCY]³ BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master] Application]⁵ [effective [Month Day, Year]]⁶. It applies only with respect to [Bankruptcies]³[or][Trips][Tickets purchased][covered losses]⁷ that occur on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons[and each Hazard]⁸.

[TRIP CANCELLATION BENEFIT

If the Insured Person is prevented from taking the Trip due to any of the Covered Reasons listed below, occurring on or prior to the Departure, the Company will reimburse the Insured Person [or whoever is responsible for payment of the [Ticket][or][Travel Arrangements]^{7,9} for the unused, non-refundable [portion of each Ticket]¹⁰ [up to the Maximums shown in the Master Application] [up to a maximum of [\$x]for all Insured Persons per trip]⁷.

Covered Reasons:

1. [[Injury or Sickness]¹² of the Insured Person [or Immediate Family Member]¹³, if a Physician has recommended in writing, that due to the severity of the condition of the Insured Person [or the Insured Person's Immediate Family Member]¹³, it is Medically Necessary that the Insured Person cancel the Trip. The Insured Person [or Immediate Family Member]¹³ must be under the direct care and attendance of a Physician;]¹¹
2. [Death of the Insured Person [or Immediate Family Member]¹³, if the death has been certified by a Physician or other person legally qualified to certify a person's death. [Death of the Insured Person's Immediate Family Member must occur within [30] days from the Departure of the Insured Person's Trip;]^{13,11}
3. [Default due to Financial Insolvency, however, such insolvency must occur after the Insured Person has [purchased the Ticket] [made the Travel Arrangements] [made his or her travel reservations and paid at least a portion of the total Trip cost;]^{7,11}
4. [A Terrorist Act occurring in the city of the Insured Person's Destination [and the Travel Supplier does not offer a substitute Travel Itinerary]¹⁴. The Terrorist Act must occur after the effective date of the Insured Person's Trip Cancellation coverage [and within [10-30] days of the date of the Insured Person's Departure]^{15;11}
5. [A Terrorist Act which causes the Federal Aviation Authority or similar agency to cease all travel services at any of the points of Departure and/or Destination;]¹¹
6. [The U. S. Department of State issues a travel warning recommending that travel to the Insured Person's Destination during the time of the Trip, be avoided. The travel warning must be issued and be in force on or after the Insured Person's effective date of Trip Cancellation coverage and while this coverage is in effect for the Insured Person;]¹¹

[Additional Benefit. If a Terrorist Act occurs in [a U.S. city] [or Canada]⁷ to which the Insured Person is scheduled to arrive within [30] days of the Terrorist Act, and the Insured Person chooses to rebook the Trip, the Company will reimburse the Insured Person for the published penalty or change fee incurred [up to the amount of coverage purchased for the original Trip] [, [up to the Maximums shown in the Master Application]⁷. The rebooked Trip must begin within [30] days of the original Contracted Departure Date and the Insured Person must notify [the Company]¹⁶ prior to changing his or her Travel Arrangements. [Any Benefit which becomes payable under any of the Covered Reasons listed in the Trip Cancellation Benefit, will be reduced by amounts paid under this Benefit.]^{18,17,1}

TRIP INTERRUPTION BENEFIT

If after Departure the Insured Person is unable to continue the Trip due to any of the Covered Reasons listed below occurring prior to the Return, the Company will reimburse the Insured Person [or whoever is responsible for payment of the [Ticket/Travel Arrangements],^{7,9} for the unused, non-refundable [Travel Arrangements less the value of any credit for the unused portion of the Travel Arrangements][portion of each Ticket [, less the value of applied credit from an unused return travel Ticket,]^{18a)}⁷ [up to the Maximums shown in the Master Application] [up to a Maximum of[\$x] for all Insured Persons per Trip]⁷.

Covered Reasons:

1. [[Injury or Sickness]¹² of the Insured Person [or Immediate Family Member]¹³, if a Physician has recommended in writing, that due to the severity of the condition of the Insured Person [or Immediate Family Member]¹³, it is Medically Necessary that the Insured Person interrupt the Trip. The Insured Person [or Immediate Family Member]¹³ must be under the direct care and attendance of a Physician;]¹¹
2. [Death of the Insured Person [or Immediate Family Member]¹³, while on the Trip, if the death has been certified by a Physician or other person legally qualified to certify a person's death; and]¹¹
3. [Default due to Financial Insolvency, however, the default must occur after the Insured Person's Departure.]¹¹
4. [A Terrorist Act occurring in the city of the Insured Person's [final]¹⁹ Destination [and the [Travel Supplier] [Travel Arranger]⁷ does not offer a substitute Travel Itinerary]¹⁴. The Terrorist Act must occur after the Insured Person's Departure and before his or her schedule Return;]¹¹
5. [A Terrorist Act which causes the Federal Aviation Authority or similar agency to cease all travel services at any of the points of Departure and [or Destination;]¹¹
6. [The U. S. Department of State issues a travel warning recommending that travel to the Insured Person's [final]¹⁹ Destination during the time of the Insured Person's Trip, be avoided. The travel warning must be issued and be in force on or after the Insured Person's Departure and while this coverage is in effect for the Insured Person;]¹¹

[Additional Benefit. If a Terrorist Act occurs in [a U.S. city] [or Canada]⁷ where the Insured Person usually resides and while the Insured Person is on his or her Trip, [the Company]¹⁶ will pay [up to the [Terrorist Act]¹⁷ Maximums shown in the Master Application for Reasonable Additional Expenses if the Insured Person chooses to return to that city [immediately] [(within three (3) days]⁷ of the Terrorist Act). Prepaid expenses are not covered. [Payments will be reduced by any Benefit paid for any of the Covered Reasons listed in the Trip Interruption Benefit.]¹⁸⁾¹⁷]²

[[AIRLINE]⁴ BANKRUPTCY

If the Insured Person is prevented from taking the Trip due to [Commercial Airline], [Common Carrier] [Travel Supplier]⁷ default resulting solely from the Bankruptcy of such [Commercial Airline] [Common Carrier], [or Travel Supplier]⁷ the Company will reimburse the Insured Person [or whoever is responsible for payment of the [Commercial Airline] [Common Carrier] [Ticket] [Travel Arrangements]⁷]⁹ for the unused, non-refundable portion of the [Ticket] [Travel Arrangements]⁷ up to the Maximums shown in the Master Application. Only [Tickets, Travel Arrangements]⁷ purchased prior to the [Commercial Airline] [Common Carrier] [Travel Supplier]⁷ filing for bankruptcy, Chapter 11 or similar re-organization are covered under this benefit. [Coverage for [Commercial Airline] [Common Carrier] [Travel Supplier]⁷ Bankruptcy will not apply for [delays or flight cancellation due to weather conditions, mechanical breakdown of the scheduled [Common Carrier] [Commercial Aircraft]⁷,]²⁰ changes in the Insured Person's travel plans, an Insured Person's business or contractual obligations, prohibition or regulation by any government or the Insured Person's inability to obtain necessary travel documents, including but not limited to passports, visas or medical inoculation.]²¹

[In the event the Insured Person transfers his or her Ticket to another [Common Carrier] [Commercial Airline] [Travel Supplier]⁷, the claim under this [Airline] Bankruptcy Benefit will be limited to the "change fee" for such Ticket.]²²

[Prior to submitting a claim under this benefit, the Insured Person must first seek reimbursement through the Policyholder. Only if such reimbursement is denied, can a claim be payable under this benefit subject to all terms and conditions of this benefit.]²³

[Special Notification of Claim. The Insured Person must notify the Company or the Policyholder as soon as reasonably possible in the event of a [Trip Cancellation]¹[or] [Trip Interruption]² [or] [[Airline]⁴ Bankruptcy]³ claim. The Company will not be liable for any additional penalty charges incurred that would not have been imposed had notice been provided as soon as reasonably possible.

[The following documents must be furnished to the Company as Proof of Loss:

1. [A copy of the Account statement showing the [Common Carrier][Commercial Airline][Travel Supplier] Ticket charge;]
2. [A copy of the initial claim submitted to the [Common Carrier][Commercial Airline][Travel Supplier];]
3. [Proof of submission of the loss to, and the results of any settlement or denial by, the [Common Carrier][Commercial Airline][Travel Supplier];]

[If no other valid and collectible insurance or indemnity is in effect, a notarized statement from the Insured Person to that effect must be submitted.]]

[It is a condition of this insurance that, in the event of a claim, the Insured Person shall surrender any unused [Ticket/voucher/coupon/travel privileges]⁷ to the Company.]²⁵]²⁴]³

DEFINITIONS

As used in this Rider:

[Bankruptcy – means that the [Commercial Airline] [Common Carrier] [Travel Supplier]⁷ has been declared insolvent by a United States Federal Bankruptcy Court or by a bankruptcy court having jurisdiction.]³

[Complications of Pregnancy – means conditions requiring Hospital stays (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include non-elective caesarean

section, ectopic pregnancy, which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of Pregnancy does not include false labor, occasional spotting, physician-prescribed rest during the period of pregnancy, morning sickness, hyperemesis gravidarum, preeclampsia and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct complication of pregnancy.²⁶

[Departure – means the travel date, as indicated [on the Ticket] [or] [in the Travel Itinerary]⁷, upon which the Insured Person is scheduled to leave on the Trip.²⁷

[Financial Insolvency – means [a Commercial Airline][Common Carrier][a Travel Supplier]⁷ has ceased operations due to: 1) filing a petition for bankruptcy; 2) denial of credit; or 3) inability to meet financial obligations.²⁷

[Hospital - means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis; (3) has 24 hour nursing service by registered nurses (R.N.'s; and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged; nor does it include any ward, room, wing, or other section of the hospital that is used for such purposes; or (3) any military or veterans hospital or soldiers home or any hospital contracted for or operated by any national government or government agency for the treatment of members or ex-members of the armed forces, except if there is a legal obligation to pay.²⁸

[Injury - means bodily injury resulting directly and independently of all other causes from an accident which occurs while the Insured Person is covered under the Policy.²⁷

[Medically Necessary – means within this Rider, the Physician's recommendation is: (1) essential for diagnosis, treatment or care of the Injury [or Sickness] for which it is prescribed or performed; (2) meets generally accepted standards of medical practice; and (3) not primarily for the convenience of the Insured Person or the Insured Person's Immediate Family Member.²⁷

[Pre-existing Condition - means an Injury, Sickness or other condition of the Insured Person [or an Immediate Family Member]¹³, for which, in the [60] day period before the purchase date of the [Ticket, Travel Arrangements]⁷ that person: (a) received medical advice or treatment by a Physician; (b) had symptoms which would have prompted a reasonable person to seek diagnosis, care or treatment; or (c) required taking prescribed drugs or medicine[, unless the condition for which the prescribed drug or medicine is taken remains controlled without any change in the required prescription]³⁰.²⁹

[Reasonable Additional Expenses – means any expense for meals and lodging which were necessarily incurred as the result of a trip interruption and which were not provided by the [Common Carrier] [Commercial Airline]⁷ or any other party free of charge.³¹

[Return – means the travel date, as stated [on the Ticket][or][in the Travel Itinerary]⁷, upon which the Insured Person is scheduled to return from the Trip to his/her Return Destination.³¹

[Return Destination – means the place to which the Insured Person expects to return from his/her Trip [as shown [on the Ticket][or][Travel Itinerary]⁷].³².³¹

[Sickness - means an illness or disease which requires treatment by a Physician.²⁷

[Terrorist Act – means the unsanctioned and illegal use of force which causes destruction of property, injury or death by an individual or group for the express or implied purpose of achieving political, ethnic or religious goals or results [and which is declared as such by the U.S. State Department or other appropriate U.S. government agency]. Losses due to the issuance of travel advisories, bulletins or alerts, war or acts of war,

civil disorder, riot or unrest, bomb scares or threats of terrorist activity, or terrorist acts against any Common Carrier (i.e. airline/cruise line) are not covered.]²⁷

[Travel Arrangements – means any prepaid expenses for the Insured Person's Trip, including but not limited to hotel, rental car, or any land, air or water conveyance.]³³

[Travel Arranger – means the travel agent or agency that is responsible for arranging the pre-paid travel arrangements for the Insured Person's Trip.]³¹

[Travel Itinerary – means the outline of the Insured Person's intended Trip.]²⁷

[Travel Supplier - means the [tour operator][hotel][cruise line,]⁷ and/or [Commercial Airline] [Common Carrier]⁷ that provides Travel Arrangements for the Insured Person's Trip.]³⁴

EXCLUSIONS

All exclusions for Sickness in the **General Exclusions** section of the Policy are deleted with respect to this Benefit.

In addition to all other exclusions in the **General Exclusions** section of the Policy, benefits payable under this Rider are deemed to exclude losses caused in whole or in part by, or resulting in whole or in part from:

1. [Pre-existing Conditions;
2. [pregnancy, childbirth, miscarriage or elective abortion, except Complications of Pregnancy;]³⁶
3. [accidental bodily injuries arising from participation in interscholastic, professional or semi-professional sports events, racing or speed contests, including testing, practicing or training, in or on a motorized vehicle, bodily contact sports, professional athletic events; semi-professional, organized or interscholastic team sports, participation in organized athletic activities;]³⁶
4. cosmetic surgery, unless such cosmetic surgery is rendered necessary as a result of a loss covered under this Policy;
5. traveling against the advice of a Physician;
6. traveling while on a waiting list for specified medical treatment;
7. traveling for the purpose of obtaining medical treatment;
8. traveling in the third trimester (seventh month or after) of pregnancy;
9. [emotional trauma, mental illness; mental, emotional, psychological or nervous disorders including anxiety, depression, neurosis or psychosis, panic attacks and post-traumatic stress disorder ,except if Hospitalized]³⁷;
10. [the Insured Person's [or Immediate Family Member's] commission of or attempt to commit a felony crime]³⁶.
11. [mountain climbing, rock climbing, mountaineering, caving, ice-climbing; parachuting, skydiving, skin diving, para-sailing, paragliding, hot air ballooning, bungee jumping, [uncertified] scuba diving, deep sea diving, hang gliding, extreme sports, ultralight flying, trampoline jumping, snow skiing, lugging, snow sports, snowboarding tobogganing, bobsledding, indoor and outdoor ice skating, snow tubing or ice hockey]³⁶;
- 12 alcohol or substance abuse or treatment for same;
- 13 elective or non-emergency treatment or surgery, except for necessary treatment or surgery due to an Injury that is covered under this Policy;
- 14 [dental treatment to teeth, gums or structures directly supporting the teeth except as a result of an Injury to sound natural teeth or non-elective, emergency dental surgery that is covered under this Policy]³⁶;
- 15 venereal disease or syphilis;
- 16 a Trip for which the Insured Person's Tickets do not contain specific travel dates(open tickets);
- 17 Injury sustained while traveling in or on any two or three-wheeled motor vehicle operated by a person who does not hold a valid operators license;
- 18 [participation in a riot, insurrection or civil disturbance;]³⁶
- 19 loss incurred as a result of travel in or upon a snowmobile or off-road motorized vehicle not requiring a license as a motor vehicle;]³⁵

[[Exclusion(s) [X]] [All exclusions except Exclusion [X]]⁷ in the General Exclusions section of the Policy are waived with respect to an Insured Person to whom benefits are payable under Trip Cancellation and Trip Interruption under this Rider, but only with respect to [Sickness or Injury]⁷ suffered by such person under the circumstances described under this Rider.]³⁷

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.

A stylized handwritten signature consisting of a large 'P' followed by a vertical line and a horizontal line.

President

A handwritten signature that appears to start with 'D' followed by several loops and a period.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Incorporated]

Policy Number: [XXXXXX]

BENEFIT B- 4

[BAGGAGE]¹ [AND] [PERSONAL EFFECTS]² BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the Master Application]³ [effective [Month Day, Year]⁴. It applies only with respect to [Trips that occur/Tickets purchased/a covered loss that occurs]⁵ on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons.

BENEFITS:

[A. If, while on a Trip, the Insured Person's [[Checked]⁷ [and/or] [Carry-On]⁸ Baggage]¹ [and/or] [Personal Effects]² [is][are] documented as being [lost, stolen or damaged]⁹ [due to theft or misdirection]¹⁰ by the [Common Carrier/Commercial Airline]¹¹, the Company will reimburse him or her, up to the Maximums shown in the Master Application.

[If the Insured Person's [Baggage and /or Personal Effects]²⁴ are [lost, stolen or damaged]⁹ while he or she is[:]²⁵

1. [riding as a Passenger in or on (including getting in or out of, or on or off) a Public Conveyance while traveling directly to or from an airport, terminal or station immediately prior to departure or arrival [of/for] a [Common Carrier/Commercial Airline/Trip]²⁷;]²⁶or
2. [while at an airport, terminal or station immediately prior to departure or arrival on a [Common Carrier/Commercial Airline/Trip]²⁷.]²⁸

the Company will reimburse him or her, up to a Maximum Amount of \$[XXX][per [bag]¹⁵[[Common Carrier Fare/Commercial Airline]¹³] Ticket]¹⁴[Insured Person per Trip]¹⁷] ¹⁶[for all Insured Persons per Trip]¹⁸.²³

[For Checked Baggage.]²⁹ [T/t]he Company will pay the [least of the following:]³¹

- [(a) cash value ([original cash value/cost of replacement]³³[, less depreciation as determined by the Company]³⁴);]³²
- [(b) cost of repair;]³⁵[or]
- [(c) cost of replacement]³⁶.³⁰

[[For Carry-On Baggage [and/or] [Personal Effects]²,]²⁹ the Company will pay the [least of the following:]³¹

- [(a) cash value ([original cash value/cost of replacement]³³[, less depreciation as determined by the Company]³⁴);]³²
- [(b) cost of repair;]³⁵[or]
- [(c) cost of replacement]³⁶.³⁷.⁶

[B. If while on a Trip, the Insured Person's [Baggage]¹ [and/or][Personal Effects]² [is/are] documented as [lost, stolen, or damaged]⁹ from the Insured Person's Hotel [other than due to Burglary of his or her room]³⁹ during a Trip, the Company will reimburse him or her, up to a \$[500] maximum [per [bag]¹²[Common Carrier Fare/Commercial Airline]¹³ Ticket]¹⁴ [Insured Person per Trip]¹⁷]¹⁶ [for all Insured Persons per Trip]¹⁸ [,subject to a \$[5,000] [per Account per Trip]²¹ [annual aggregate maximum for all Insured Persons]²²]¹⁹.

The Company will pay the [least of the following:]³¹

- [(a) cash value ((original cash value/cost of replacement)³³, [less depreciation as determined by the Company]³⁴);]³²
- [(b) cost of repair;]³⁵ [or]
- [(c) cost of replacement]³⁶.]³⁸

[C. If, while on a Trip, an Insured Person's Hotel room is Burglarized by means of Forced Entry resulting in his or her personal property being stolen, the Company will reimburse him or her for the replacement cost of the personal property less depreciation as determined by the Company up to a maximum of \$[XXX].]⁴⁰

[

[There is a combined maximum of \$[200] per Trip for the following: [jewelry, watches, furs and articles trimmed with or made mostly of fur, articles consisting in whole or in part of silver, gold or platinum, cameras, including related camera equipment and computer and electronic devices, including but not limited to portable personal computers, cell phones, electronic organizers and portable music players, sporting equipment.]⁴² [The amount paid for this combined maximum will reduce the maximum available under part [A., B., and C.,]⁴⁴ above.]⁴³⁴¹

[Loss of a Pair/Set

In case of loss to a pair or set, the Company may elect to:

- [(a) [repair]⁴⁶ [or] [replace]⁴⁶ any part, to restore the pair or set to its value before the loss; or
- (b) pay the difference between the cash value of the property before and after the loss.]⁴⁵

LIMITATIONS:

[Benefits are not payable for [Checked]⁷ [and/or] [Carry-on]⁸ Baggage until the [Commercial Airline/Common Carrier/Hotel]⁴⁷ [or other third party]⁴⁸ responsible for the loss has settled and paid the claim.]⁴⁹ [Benefits are not payable for [Checked]⁷ [and/or] [Carry-on]⁸ Baggage if the [Commercial Airline/Common Carrier/Hotel]⁴⁷ [or other third party]⁴⁸ responsible for the loss completely denies the claim [(unless the sole reason for denial is the specific exclusion of a particular item under the [Commercial Airline's/Common Carrier's/Hotel's]⁴⁷ [or other third party's applicable insurance contract]⁴⁸)[or] [if the [Common Carrier/Commercial Airline/Hotel]⁴⁷ [or other third party]⁴⁸ responsible for the loss pays the claim in full [or repairs the damage]⁵³].]⁵⁰

[Excess Insurance. [The insurance provided by this benefit [for Checked]⁷] [and/or] [Carry-on]⁸ Baggage shall be in excess of [any amount due solely from the [Common Carrier/Commercial Airline/Hotel]⁴⁷ [other third party]⁴⁸]⁵⁵ [all other valid and collectible insurance or indemnity]⁵⁶.]⁵⁴ [The Company will be liable only for the excess of the amount of the loss over the amount for which the [Common Carrier/[Commercial Airline/Hotel]⁴⁷ [other third party]⁴⁸ is liable.]⁵⁷ [The Company will be liable only for the excess of the amount of the loss over the amount of such other insurance and indemnity.]⁵⁸]⁵⁴

DEFINITIONS

[Baggage – means the [suitcases, carryalls or trunks]⁵⁹ [luggage and personal possessions whether owned, borrowed or rented,]⁶⁰ [and sports gear]⁶¹ of an Insured Person.]¹

[Burglary/Burglarized, as used in this Rider, means the taking of unattended personal property of the Insured Person, from his or her registered Hotel room by Forced Entry while doors, windows and other openings are closed and locked and provided there are marks of Forced Entry. Loss of personal property contained in the Hotel safety deposit box is excluded.]⁶²

[Checked Baggage – means [suitcases or other containers [specifically designed]⁶⁵ for carrying personal property, and the personal property contained therein,]⁶⁷ [luggage and personal possessions whether owned,

borrowed or rented,]⁶⁶ for which a claim check has been issued to the Insured Person by a [Common Carrier/Commercial Airline]⁴⁷.]⁶³

[Carry-On Baggage - means [suitcases or other containers [specifically designed]⁶⁵ for carrying personal property, and the personal property contained therein,]⁶⁴ , [luggage and personal possessions whether owned, borrowed or rented,]⁶⁶ which are carried on board a [Common Carrier/Commercial Airline]⁶⁸ by the Insured Person.]⁶⁷

[Forced Entry – means access to the Insured Person’s Hotel room has been gained by breaking and entering a locked door, window or other opening.]⁶⁹

[Hotel means any establishment used for the purpose of temporary, overnight lodging for which a fee is paid and reservations are required.]

[Personal Effects – means items carried physically on the Insured Person, including but not limited to such things as wallets, jewelry and passports.]²

EXCLUSIONS:

Benefits will not be provided for any loss or damage to:

1. [animals;
2. automobiles or automobile equipment;
3. boats, watercraft, and aircraft;
4. motor vehicles, motors;
5. motorcycles;
6. other conveyances or their appurtenances, (except bicycles while checked as Baggage [with a Common Carrier and/or Commercial Airline, and/or Hotel])⁴⁷;
7. household furniture or household effects;
8. prosthetic limbs/devices, false and artificial teeth, dentures, dental bridges, any type of eyeglasses, sunglasses or contact lenses; hearing aids;
9. keys, money, stamps, stocks, bonds, notes or securities accounts, securities, bills, currency, coins, deeds, negotiable instruments, postal or money orders, food stamps or other evidence of debt, credit/debit/charge cards and other travel documents except passports and visas;
10. tickets and documents, lost or stolen passports, visas, or other valuable documents and valuable papers, except for administrative fees required to reissue Tickets, lost or stolen passports or visas or other documents and valuable papers;
11. bullion or other precious or semi-precious metals as well as stones or gems other than those contained in items of personal jewelry owned by the Insured Person;
12. perfume;
13. sporting equipment, unless checked with the [Common Carrier/Commercial Airline/Hotel]⁴⁷ and for which a claim check has been provided by the [Common Carrier/Commercial Airline/Hotel]⁴⁷
14. sporting equipment if loss or damage results from the use thereof;
15. perishables and consumables;
16. portable personal computers, cell phones, electronic organizers and portable cd players, cameras, camera equipment and other electronic equipment/devices and software;
17. art objects or musical instruments;
18. business items and samples; property used in trade, business or for the production of income;
19. contraband, illegal transportation or trade;
20. items seized by any government, government official or customs official;
21. property shipped as freight, or shipped prior to the departure or return date on the [Common Carrier/Commercial Airline]⁶⁸ Ticket;
22. trees, plants, shrubs, sod;
23. umbrellas, hats and coats except coats packed in [Checked Baggage]⁷¹ [or][Carry-on Baggage]⁷²⁻⁷⁰.

Benefits payable under this Rider are deemed to exclude losses caused by:

1. any fraudulent, dishonest or criminal acts, committed by the Insured Person, alone or in collusion with others;
2. participation in a riot, insurrection, or civil disturbance;
3. forgery by the Insured Person;
4. confiscation, detention, destruction or expropriation by order of any government, public authority, customs, or other officials;
5. nuclear reaction or radioactive contamination;
6. wear and tear or gradual deterioration;
7. natural or latent defect or damage due to any process or repair;
8. defective materials or craftsmanship;
9. animals, rodents, insects or vermin;
10. inherent defect or damage;
11. seizure or destruction under quarantine or custom regulation;
12. theft or pilferage while left unattended in any vehicle, unless there are visible signs of forcible entry;
13. mysterious disappearance or unexplained shortage;
14. corrosion, rust, dampness of atmosphere, freezing or extremes of temperature;
15. use of Insured's Person's property for a military purpose;
16. usurped power or action taken by governmental authority in hindering, combating or defending against such an occurrence
17. transporting contraband or illegal trade;
18. sporting equipment damaged while being used;
19. breakage of brittle or fragile articles, cameras, camera equipment and accessories, musical instruments, radios and similar property;
20. electrical current, including electric arcing that damages or destroys electrical devices or appliances;
21. mechanical breakdown; depreciation; by processing or any work upon the property, but if fire or explosion ensues, then the direct loss or damage caused by such ensuing fire or explosion shall not be excluded; theft, robbery, burglary that does not show any signs of forcible entry⁷³.

THE CLAIMS PROVISIONS OF THE POLICY ARE DELETED WITH RESPECT TO THIS RIDER AND REPLACED BY THE FOLLOWING PROVISIONS:

Notice of Loss. If the Insured Person's property covered under this Rider is [lost, stolen or damaged]⁹, the Insured Person must:

- (a) notify [AIG, Accident & Health Claims Division, P.O. Box 25987, Shawnee Mission, KS 66225-5987]⁷⁴ [or its authorized representative]⁷⁵ [as soon as possible]^{75a} [within [45] days of the date of loss]^{75a};
- (b) [take immediate steps to [protect,] save and/or recover the covered property;]⁷⁶
- (c) [take reasonable steps to protect his or her covered property from further [loss, theft or damage]⁹ [and make necessary and reasonable temporary repairs. The Company will reimburse the Insured Person for those expenses. The Company will not pay for further damage if the Insured Person fails to protect his or her covered property]^{75, 76};
- (d) [give immediate notice to the [Common Carrier/Commercial Airline]⁶⁸ or bailee who is or may be liable for the loss or damage;]⁷⁶
- (e) notify the [Hotel]⁷⁸ [or] [Common Carrier/Commercial Airline,]⁶⁸ police or other authority in the case of loss, damage, or theft within [24] hours;
- (f) for Checked Baggage, file a written report of the loss, theft or damage with the [Common Carrier/Commercial Airline]⁶⁸ [or] [Hotel]⁷⁸ before leaving the airport, terminal or station;
- (g) for [Carry-On Baggage]⁷² [and/or] [Personal Effects]², file a written report of the loss, theft or damage with a local law enforcement agency;
- (h) in the event of theft or unauthorized use of the Insured Person's credit cards, the Insured Person must notify the credit/debit/charge card(s) company(ies) immediately to reduce his or her loss;
- (i) retain all written reports and receipts until the final claim determination has been made.

Proof of Loss. The Insured Person must furnish the Company with Proof of Loss. Proof of loss includes police or other local authority reports or documentation from the appropriate party responsible for the loss. It must be filed with the Company within [90 days] from the date of loss. Failure to comply with these conditions shall not invalidate any claims under this Rider. Proof of Loss includes:[

- (a) police or other local authority reports or documentation from the appropriate party responsible for the loss;
- (b) documentation providing the amount of loss, date, time and cause of loss, a complete list of damaged/lost items, a copy of the Account statement showing the [[Common Carrier Fare/Commercial Airline]¹³ Ticket charged]⁸⁰ [and/or] [Hotel rental transaction]⁸¹ [and a copy of the initial claim submitted to the [Common Carrier/Commercial Airline]⁶⁸ [Hotel]⁷⁸] [and to any personal insurance company]⁸²;
- (c) all items claimed [over \$[150]]⁸³ must be accompanied by an original receipt. If original receipts are not provided, benefits may be reduced;
- (d) proof of submission of the loss to, and the results of any settlement or denial by, [the Common Carrier/the Commercial Airline]⁶⁸ [Hotel]⁷⁸ [and/or] [to any personal insurance company(ies)]⁸⁴;
- (e) evidence that the personal property has actually been replaced;
- (f) if no other valid and collectible insurance or indemnity is in effect, a notarized statement from the Insured Person to that effect;
- (g) allowing the Company to examine the damaged property and/or send the damaged item to the Company in order to determine if a benefit is payable;
- (h) cooperating with the Company in the investigation, settlement, or handling of any claims including submitting to questioning under oath when deemed necessary by the Company. All statements by the Insured Person will be signed by the Insured Person;
- (i) authorizing the Company to obtain records or reports necessary to the Company's investigation
- (j) sending [sworn/notarized]⁸⁵ Proof of Loss as soon as possible after the date of loss.]⁷⁹

Settlement of Loss. Claims for damage and/or destruction shall be paid [immediately when/within [60] days of the date]⁸⁶ proof of the damage and/or destruction is presented to the Company. Claims for lost property will be paid after the lapse of a reasonable time if the property has not been recovered. The Insured Person must present acceptable Proof of Loss and the value involved to the Company.

Disagreement Over Size of Loss. If there is a disagreement about the amount of the loss either the Insured Person or the Company can make a written demand for an appraisal. After the demand, the Insured Person and the Company each select their own competent appraiser. After examining the facts, each of the two appraisers will give an opinion on the amount of the loss. If they do not agree, they will select an arbitrator. Any figure agreed to by 2 of the 3 (the appraisers and the arbitrator) will be binding. The appraiser selected by the Insured Person is paid by the Insured Person. The Company will pay the appraiser it chooses. The Insured Person will share with the Company the cost for the arbitrator and the appraisal process.

Benefit to Bailee. This insurance will in no way inure directly or indirectly to the benefit of any [Common Carrier and/or Commercial Airline]⁶⁸ or other bailee.

[Subrogation. To the extent the Company pays for a loss suffered by an Insured Person, the Company will take over the rights and remedies the Insured Person had relating to the loss. This is known as subrogation. The Insured Person must help the Company preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured Person's rights, the Insured Person must sign an appropriate subrogation form supplied by the Company.

As a condition to receiving the applicable benefits listed above, as they pertain to this Subrogation provision, the Insured Person agrees, except as may be limited or prohibited by applicable law, to reimburse the Company for any such benefits paid to or on behalf of the Insured Person, if such benefits are recovered, in any form, from any third party or coverage.]⁸⁷

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.

A stylized handwritten signature in black ink, consisting of a large 'P' followed by a vertical line and a horizontal line.

President

A handwritten signature in black ink, appearing to start with 'D' and followed by several loops and a period.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [SRGXXXX]

BENEFIT B-5 CHECKED AND/OR CARRY-ON BAGGAGE BENEFIT RIDER (APPLICABLE TO NEW YORK RESIDENTS ONLY)

This Rider is attached to and made part of the Policy as of the Policy Effective Date shown in the Master Application effective [Month, Day, Year]. It applies only with respect to a covered loss] on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

Baggage Benefit

If, while in transit on a Trip, an Insured Person's Checked and/or Carry-On Baggage is documented as lost or damaged and the Common Carrier Ticket was charged to the Insured's Account, the Company will reimburse him or her up to a \$2,000 maximum per bag, subject to a maximum annual aggregate of \$10,000 for all Insured Persons per Trip. The Company will pay the cash value (cost of replacement, less depreciation as determined by the Company).

In the case of loss or damage, documentation of loss or damage of the Checked and/or Carry-on Baggage must be part of a report by the appropriate party responsible for the loss or damage.

LIMITATIONS:

Benefits are not payable for Checked and/or Carry-on Baggage if the Common Carrier responsible for the loss pays the claim in full.

Excess Insurance. The insurance provided by this benefit shall be in excess of all other valid and collectible insurance and indemnity.

Payment of Loss

The Insured Person must:

- (a) allow the Company to examine the damaged Checked and/or Carry-on Baggage and/or to require the damaged item to be sent in the event of payment;
- (b) send proof of loss as soon as possible after the date of loss, providing the amount of loss, date, time and cause of loss, a complete list of damaged/lost items, a copy of the Account statement showing the Common Carrier Ticket charged and a copy of the initial claim submitted to the Common Carrier and any personal insurance company information;
- (c) if no other valid and collectible insurance or indemnity is in effect, a notarized statement from the Insured Person to that effect; and
- (d) submit proof of settlement from the Common Carrier and/or his or her personal insurance company for any other valid and collectible insurance or indemnity.

DEFINITIONS

Checked Baggage – means suitcases or other containers specifically designed for carrying personal property, and the personal property contained therein, for which a claim check has been issued to the Insured Person by a Common Carrier.

Carry-On Baggage - means suitcases or other containers specifically designed for carrying personal property, and the personal property contained therein, which are carried on board a Common Carrier by the Insured Person.

EXCLUSIONS:

Benefits will not be provided for any loss or damage to:

1. animals;
2. automobiles or automobile equipment;
3. boats, watercraft and aircraft;
4. motors;
5. motorcycles;
6. household furniture;
7. prosthetic limbs, dentures, any type of eyeglasses, contact lenses; hearing aids;
8. money, securities, credit/debit cards;
9. tickets, or other valuable documents and valuable papers;
10. bullion or other precious or semi-precious metals as well as stones or gems other than those contained in items of personal jewelry owned by the Insured Person;
11. sporting equipment, unless checked with the Common Carrier and for which a claim check has been provided by the Common Carrier;
12. perishables;
13. portable personal computers, cell phones, electronic organizers, portable cd players, cameras, camera equipment and other electronic devices;
14. art objects;
15. business items and samples; property used in trade, business or for the production of income;
16. items seized by any government, government official or customs official.

Benefits payable under this Rider are deemed to exclude losses caused by:

1. any fraudulent, dishonest or criminal acts, committed alone or in collusion with others by the Insured Person;
2. forgery by the Insured Person;
3. confiscation by order of any government, public authority, customs, or other officials.
4. nuclear reaction or radioactive contamination.

THE CLAIMS PROVISION SECTION OF THE POLICY IS DELETED WITH RESPECT TO THIS RIDER AND REPLACED BY THE FOLLOWING PROVISIONS:

Misrepresentation and Fraud. Coverage of the Insured Person will be void if, at any time, the Insured Person has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Insured Person relating to this coverage. Coverage for an Insured Person will be void if, whether before or after a loss, the Policyholder has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Policyholder relating to this coverage.

Notice of Loss. If the Insured Person's property covered under this Rider is lost, stolen or damaged, the Insured Person must:

- (a) notify [AIG, Accident and Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225-5987] as soon as possible;
- (b) take immediate steps to protect, save and/or recover the covered property;
- (c) give immediate notice to the Common Carrier or bailee who is or may be liable for the loss or damage;

- (d) notify the police or other authority in the case of robbery or theft within 24 hours.

Proof of Loss. The Insured Person must furnish the Company with Proof of Loss. Proof of loss includes police or other local authority reports or documentation from the appropriate party responsible for the loss. It must be filed with the Company within 45 days from the date of loss. Failure to comply with these conditions shall not invalidate any claims under this Policy.

Settlement of Loss. Claims for damage and/or destruction shall be paid [immediately when] [within 60 days of the date] proof of the damage and/or destruction is presented to the Company. Claims for lost property will be paid after the lapse of a reasonable time if the property has not been recovered. The Insured Person must present acceptable Proof of Loss and the value involved to us.

Valuation. The Company will not pay more than the actual cash value of the property at the time of loss. Damage will be estimated according to actual cash value with proper deduction for depreciation. At no time will payment exceed what it would cost to repair or replace the property with material of like kind and quality.

Disagreement Over Size of Loss. If there is a disagreement about the amount of the loss either the Insured Person or the Company can make a written demand for an appraisal. After the demand, the Insured Person and the Company each select their own competent appraiser. After examining the facts, each of the two appraisers will give an opinion on the amount of the loss. If they do not agree, they will select an arbitrator. Any figure agreed to by 2 of the 3 (the appraisers and the arbitrator) will be binding. The appraiser selected by the Insured Person is paid by the Insured Person. The Company will pay the appraiser it chooses. The Insured Person will share with the Company the cost for the arbitrator and the appraisal process.

Benefit to Bailee. This insurance will in no way inure directly or indirectly to the benefit of any Common Carrier or other bailee.

The following items are added to the "Termination Date" paragraph of the **Policy Effective and Termination Dates provision:**

The Company may terminate the Policy for:

1. conviction of a crime arising out of acts increasing the loss insured against;
2. discovery of fraud or material misrepresentation in the obtaining of the Policy or in the presentation of a claim under the Policy;
3. after issuance of the Policy or after the last renewal date, discovery of an act or omission, or a violation of any policy provision, that substantially and materially increases the loss insured against and which occurred after the current Policy year;
4. a determination by the Superintendent of the New York Insurance Department that the continuation of the present premium volume of the Company would jeopardize the Company's solvency or be hazardous to the interests of the Company's Policyholders, its creditors or the public;
5. a determination by the Superintendent of the New York Insurance Department that the continuation of the Policy would violate or would place the Company in violation of any provisions of Chapter 28 of the Consolidated Laws of New York;
6. where the Company has reason to believe, in good faith and with sufficient cause, that there is a probable risk or danger that the Insured Person will destroy, or permit to be destroyed, the insured property for the purpose of collecting the insurance proceeds, provided, however, that:
 - a. a notice of cancellation for this reason shall inform the Insured in plain language that the Insured must act within ten (10) days if review by the New York Insurance Department of the ground for cancellation is desired pursuant to item (c) of this subparagraph;
 - b. notice of cancellation on this ground will be provided simultaneously by the Company to the New York Insurance Department; and
 - c. upon written request of the Insured made to the new York Insurance Department within ten(10) days from the Insured's receipt of notice of cancellation on this ground, the New York Insurance Department will undertake a review of the ground for cancellation to determine whether or not the Company has satisfied the criteria for cancellation specified in this subparagraph: if after

such review the New York Insurance Department finds no sufficient cause for cancellation on this ground, the notice of cancellation on this ground shall be deemed null and void.

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.

A stylized handwritten signature in black ink, consisting of several bold, sweeping strokes that form a monogram-like shape.

President

A handwritten signature in black ink, appearing to start with a large 'D' followed by several loops and a final flourish.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Incorporated]

Policy Number: [XXXXXX]

BENEFIT B-6 EMERGENCY EVACUATION [WITH FAMILY TRAVEL]⁷ BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master]³[Participating Organization]³ Application]¹ effective [Month Day, Year]². It applies only with respect to [Trips,³ [Tickets purchased,³ accidents or Emergency Sickneses that occur on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

Emergency Evacuation Benefit. The Company will pay for Covered Emergency Evacuation Expenses reasonably incurred if the Insured Person suffers an Injury or Emergency Sickness [while on a Trip]³ that warrants his or her Emergency Evacuation [while he or she is [outside]³[within]³ a [100] mile radius from his or her current place of primary residence]³ [[, up to the Maximum shown in the Master Application]⁴ for all Emergency Evacuations due to all Injuries from the same accident or all Emergency Sickneses from the same or related causes]⁵.

The Physician ordering the Emergency Evacuation must certify that the severity of the Insured Person's Injury or Emergency Sickness warrants his or her Emergency Evacuation. All Transportation arrangements made for the Emergency Evacuation must be by the most direct and economical conveyance and route possible.

[Travel Guard]⁶ must make all arrangements and must authorize all expenses in advance for any benefits under this Rider to be payable. The Company reserves the right to determine the benefit payable, including reductions, if it is not reasonably possible to contact [Travel Guard]⁶ in advance.

[Family Travel Benefit. Following an Emergency Evacuation for which an Emergency Evacuation benefit is payable under the Policy[and for which the Insured Person is hospitalized for more than [7] days]³, the Company will pay, subject to the limitations set out herein, for expenses reasonably incurred:

1. [to return to their current place of primary residence [the Insured Person's Spouse and]⁸ any of the Insured Person's Children who were accompanying the Insured Person when the Emergency Evacuation became necessary, with an attendant for the Children if necessary and if the Children are not accompanied by the Spouse; but not to exceed the cost of a single one-way economy airfare Ticket less the value of applied credit from any unused return travel Tickets per person;]³
2. [for lodging and meals for up to [7] days for the Insured Person's Spouse and Children in the area where the Insured Person is confined, if: (a) they were accompanying the Insured Person when the Emergency Evacuation became necessary; and (b) [the place of confinement is outside a [100] mile radius from the Insured Person's place of primary residence]³. The Company will only pay for such expenses for days in excess of the days that had been planned for the Trip prior to the Insured Person's Emergency Evacuation, and only while he or she remains so confined. The Company will not pay for such expenses in excess of, for the Spouse and Children combined, \$[100] per day for lodging and \$[75] per day for meals.]³
3. [to bring one person chosen by the Insured Person to and from the Hospital or other medical facility where the Insured Person is confined if: (a) [the Insured Person is alone]³ [; and (b) [the place of confinement is outside a [100] mile radius from the Insured Person's place of primary residence;]³ but not to exceed the cost of one round-trip economy airfare Ticket.]³

4. [for lodging and meals for up to [7] days for such person in the area of such place of confinement, but: (a) [only while the Insured Person remains so confined]³; and (b) [not to exceed \$[100] per day for lodging and \$[50] per day for meals.]³]³

[Travel Guard]⁶ must make all arrangements and must authorize all expenses in advance for any benefits under this Rider to be payable. The Company reserves the right to determine the benefit payable, including reductions, if it is not reasonably possible to contact [Travel Guard]⁶ in advance.

[The Exclusions section of the Policy does not apply with respect to this Rider.]³

[Exclusion(s) [X] in the Exclusions section of the Policy are waived with respect to an Insured Person to whom benefits are payable under this Rider, but only with respect to [Injury]³ [or Emergency Sickness]³ suffered by such person under the circumstances described under this Rider.]³

[The Exclusions section of the Policy is amended to add the following exclusion: [16.] [Common Carrier]⁹ tickets charged to fraudulently issued or fraudulently used [debit/credit cards]¹⁰ as determined by [the Policyholder]¹¹].³.]⁷

[Children - as used in this Rider, means unmarried children, including natural, step, foster or adopted children from date of the filing of a petition for adoption if application for coverage is made within 60 days after the filing of the petition, under age [12-25] and primarily dependent on the Insured Person for support and maintenance. However, the age limit does not apply to a child who: (1) otherwise meets the definition of Children; and (2) is incapable of self-sustaining employment by reason of mental or physical incapacity.

Coverage for an adopted child shall begin from the moment of birth if the petition for adoption and application for coverage is filed within 60 days after the birth of the child.]¹²

Covered Emergency Evacuation Expense(s) - as used in this Rider, means an expense that: (1) is charged for a Medically Necessary Emergency Evacuation Service; (2) does not exceed the usual level of charges for similar Transportation, treatment, services or supplies in the locality where the expense is incurred; and (3) does not include charges that would not have been made if no insurance existed.

Emergency Evacuation - as used in this Rider, means, if warranted by the severity of the Insured Person's Injury or Emergency Sickness: (1) the Insured Person's immediate Transportation from the place where he or she suffers an Injury or Emergency Sickness to [the nearest Hospital or other medical facility]³ where appropriate medical treatment can be obtained; or (2) the Insured Person's Transportation to his or her current place of primary residence to obtain medical treatment in a Hospital or other medical facility or to recover after suffering an Injury or Emergency Sickness and being treated at a local Hospital or other medical facility; or (3) both (1) and (2) above. An Emergency Evacuation also includes medical treatment, medical services and medical supplies necessarily received in connection with such Transportation.

Emergency Sickness - as used in this Rider, means an illness or disease, diagnosed by a Physician, which meets all of the following criteria: (1) there is present a severe or acute symptom requiring immediate care and the failure to obtain such care could reasonably result in serious deterioration of the Insured Person's condition or place their life in jeopardy; (2) the severe or acute symptom occurs suddenly and unexpectedly; and (3) the severe or acute symptom occurs while the coverage is in force as to the Insured Person suffering the symptom and under the circumstances described in a Hazard applicable to that person and to which this Rider applies. For purposes of this Rider, any references to "Injury" in such a Hazard are deemed to be references to "Injury or Emergency Sickness".

[Hospital – as used in this Rider, means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis; (3) has 24 hour nursing service by registered nurses (R.N.'s); and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged; nor does it include any

ward, room, wing, or other section of the hospital that is used for such purposes; or (3) any military or veterans hospital or soldiers home or any hospital contracted for or operated by any national government or government agency for the treatment of members or ex-members of the armed forces, except if there is a legal obligation to pay.]³.]¹²

Medically Necessary Emergency Evacuation Service - as used in this Rider, means any Transportation, medical treatment, medical service or medical supply that: (1) is an essential part of an Emergency Evacuation due to the Injury or Emergency Sickness for which it is prescribed or performed; (2) meets generally accepted standards of medical practice; and (3) either is ordered by a Physician and performed under his or her care or supervision or order, or is required by the standard regulations of the conveyance transporting the Insured Person.

[Spouse – as used in this Rider, means the Insured Person’s [legally married partner]³[legal spouse]³[Domestic Partner]³.]¹²

Transportation - as used in this Rider, means moving the Insured Person during an Emergency Evacuation by a land, water or air conveyance. Conveyances include, but are not limited to, air ambulances, land ambulances and private motor vehicles.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider:



President



Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

BENEFIT B-8 REPATRIATION OF REMAINS BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the [Master Application].]¹ [effective [Month Day, Year]]². It applies only with respect to loss of life that occurs on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

Repatriation of Remains Benefit. If an Insured Person suffers loss of life due to Injury or Emergency Sickness [while [on a Trip]³ [[outside]³ [within]³ a [100] mile radius from his or her current place of primary residence]³]³, the Company will pay, subject to the limitations set out herein, for covered expenses reasonably incurred to return his or her body to his or her current place of primary residence [, up to the Maximum shown in the Master Application]⁴.

Covered expenses include, but are not limited to, expenses for: (1) embalming or cremation; (2) the most economical coffins or receptacles adequate for transportation of the remains; and (3) transportation of the remains by the most direct and economical conveyance and route possible.

[Travel Guard]⁵ must make all arrangements and must authorize all expenses in advance for this benefit to be payable. The Company reserves the right to determine the benefit payable, including any reductions, if it was not reasonably possible to contact [Travel Guard]⁵ in advance.

Emergency Sickness - as used in this Rider, means an illness or disease, diagnosed by a Physician, which meets all of the following criteria: (1) there is a present severe or acute symptom requiring immediate care and the failure to obtain such care could reasonably result in serious deterioration of the Insured Person's condition or place his or her life in jeopardy; (2) the severe or acute symptom occurs suddenly and unexpectedly; and (3) the severe or acute symptom occurs while the coverage is in force as to the Insured Person suffering the symptom and under the circumstances described in a Hazard applicable to that person and to which this Rider applies. For purposes of this Rider, any references to "Injury" in such a Hazard are deemed to be references to "Injury or Emergency Sickness".

[The Exclusions section of the Policy does not apply with respect to this Rider.]³

[Exclusion(s) [X] in the General Exclusions section of the Policy are waived with respect to an Insured Person for whom benefits are payable under this Rider, but only with respect to Injury or Emergency Sickness suffered by such person under the circumstances described under this Rider.]³

Exclusion [2], regarding sickness and disease, in the Exclusions section of the Policy does not apply with respect to this Rider. [In addition to the Exclusions in the Exclusions section of the Policy, Repatriation of Remains benefits are not payable if loss of life is caused in whole or in part by, or results in whole or in part from, any condition for which the Insured is entitled to benefits under any Workers' Compensation Act or similar law.]⁶

[The Exclusions section of the Policy is amended to add the following exclusion: [16.] [Common Carrier]⁷ tickets charged to fraudulently issued or fraudulently used [debit/credit cards]⁸ as determined by [the Policyholder]⁹.]³

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider:

A stylized handwritten signature consisting of a large 'P' followed by a vertical line and a horizontal line.

President

A handwritten signature that appears to start with 'D' followed by several loops and a period.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: _____

Policy Number _____

BENEFIT B-9

[LOSS][COLLISION] DAMAGE COVERAGE BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the Policy's Master Application][effective [Month Day, Year]]. It applies only with respect to [Trips that occur][a covered loss] on or after that date.] It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

[Loss][Collision] Damage Coverage. If [while on a Trip,] the Insured Person:

- (a) rents a Vehicle from a Rental Agency; and
- (b) rejects any waiver of liability for [damage or loss][Collision] available from the Rental Agency at the time of the rental;[and
- (c) has the entire rental fee for the Vehicle charged or debited to the Insured's Account;] and

while the Vehicle is in his or her possession and during the Coverage Period [, and in the Coverage Territory(ies),] the Vehicle sustains [Collision damage][, or] [damage or loss due to direct and accidental loss] [or] [the Vehicle is stolen], the Company will pay on [an Actual Cash Value basis][a current market value basis] [less [depreciation][and][salvage]]] the lesser of:

- (a) the cost of repairs of the Vehicle; or
- (b) the cost to replace the Vehicle [with a vehicle of like kind and quality];

[minus any salvage obtained for the Vehicle or for its parts] subject to [the Deductible][and] [the Maximum] shown in the Master Application. In no event will the Company be liable beyond the amounts actually paid either by the Insured Person or the Rental Agency.

[[Loss][Collision] Damage Coverage also includes towing to the nearest [[qualified] collision repair facility] [or] [storage facility][and] [Rental Charges imposed by the rental Agency while the Vehicle is being repaired or replaced].]

For coverage to apply, the Insured Person must be a licensed driver and be listed on the Rental Agreement.

[This coverage is primary to other forms of insurance or indemnity.]

[This coverage is excess to any other valid or collectible insurance or any other form of reimbursement payable by those responsible for the loss.]

DEFINITIONS:

As used in this Rider:

[Actual Cash Value] means [purchase price][the cost to repair or replace the Vehicle] less depreciation [and salvage].]

[Antique Motor Vehicle(s)] means any vehicle over 25 years old, or any vehicle which has not been manufactured for 10 years or more.]

S30606NUFIC-AR

[Collision] means the direct and accidental damage to a Vehicle caused by upset or collision with another object. **Collision** does not include loss caused by missiles, falling objects, fire, theft or larceny, explosion, earthquake, windstorm, hail, water, flood, malicious mischief or vandalism, riot or civil commotion.]

Coverage Period means [the period of time from the date the Insured Person picks up the Vehicle to the earlier of the date the Vehicle is returned to the Rental Agency or the return date stated in the Rental Agreement, not to exceed[:

- (a) [45] consecutive days [in the case of a business Cardholder/Cardmember of a Corporate Cardholder]; or,
- (b) [31] consecutive days [in the case of any other Insured Person]. [;

from the same Rental Agency, regardless of whether the original Rental Agreement is extended, or a new Rental Agreement is entered into, or a new Vehicle is rented].

[Coverage Territory] means [the United States and Canada][worldwide]. [However, Coverage Territory does not include the following countries/states: [Insert Countries/states]]]

[Deductible] means the dollar amount the Insured Person must pay before a benefit becomes payable under this Rider. The Company will not reimburse any amount paid as the Deductible.]

[Exotic Vehicle(s)] means any vehicle with an original manufacturer's suggested retail price greater than [\$50,000] and Antique Motor Vehicles, including but not limited to: [Alfa Romeo; Aston Martin; Auburn; Avanti; Bentley; Bertone; BMC/Leyland; BMW M Series; Bradley; Bricklin; Cosworth; Citroen; Clenet; De Lorean; Excalibre; Ferrari; Fiat; Iso; Jaguar; Jensen; Jensen Healy; Lamborghini; Lancia; Lotus; Maserati; MG; Morgan; Opel; Pantera; Panther; Pininfarina; Rolls Royce; Stutz; Sterling; Triumph; TVR and Yugo]. [The Insured [Person] must contact [XYZ customer service at 1-800-xxx-xxxx] before renting to confirm whether the vehicle is covered.]]

[High Value Motor Vehicles(s)] mean motor vehicles whose replacement value exceeds \$[50,000].]

[Limited Editions Motor Vehicle] means a High Value Motor Vehicle, an Exotic Vehicle, high performance or collector type vehicle.]

Rental Agency means a commercial automobile rental agency licensed under the laws of the applicable jurisdiction. [When membership rewards redemption certificates are used, Rental Agencies are limited to [Hertz, National and Budget].]

Rental Agreement means the contract signed by the Insured Person whereby the Insured Person agrees to rent a vehicle from a Rental Agency for a specific period of time.

[Rental Charges] means the unavailability of a Vehicle and consequent loss of revenue by the Rental Agency due to damage to [or theft of] the Vehicle. Unless otherwise required by law, the Rental Agency must submit a fleet utilization log indicating that during such time: 1) no other Vehicle was available; and 2) there was a demand for such Vehicle.]

Vehicle means a four-wheeled two axle private passenger type motor vehicle or a mini-van [or] [compact] sport utility vehicle] manufactured and designed to transport a maximum of seven passengers and used exclusively to carry passengers. A Vehicle must be designed for and used to travel on public roads and rented from a Rental Agency. [A Vehicle does not include a leased or mini-leased vehicle.]

EXCLUSIONS:

[Coverage is not provided [, in whole or in part,] for any loss due to:

- (a) war or act of war, whether declared or not [, civil commotion, insurrection or riot][confiscation [or damage] by [any [government, public] authority] [authorities][or customs official,][invasion, rebellion, military action]];
- (b) intentional damage to the Vehicle by the Insured Person;
- (c) participation in contests of speed [,motor sport or motor racing including training or practice for the same];
- (d) any unlawful acts [or activity][, committed by the Insured Person [or Immediate Family Member whether insured or not]];
- (e) risks of contraband;
- (f) commission or attempt to commit a [felony or misdemeanor][crime]][any dishonest or fraudulent act or criminal act];
- (g) driving under the influence of alcohol[as defined by the jurisdiction in which the loss occurred];
- (h) [driving while][being] under the influence of drugs or intoxicants, unless prescribed by a Physician;
- (i) reckless driving;
- (j) any obligation the Insured Person assumes under any agreement [except an insurance collision deductible];
- (k) [rentals of trucks, pick-ups, cargo vans, custom vans, campers, trailers, off-road or four wheel drive vehicles, motor bikes, motorcycles, mopeds, motorbikes, golf or motorized carts, recreational vehicles, limousines, mini-buses, Limited Edition Motor Vehicles, Antique Motor Vehicles, or Exotic Vehicles;]
- (l) violation of the Rental Agreement;
- (m) failure to report the loss to the proper local authorities and the Rental Agency;
- (n) nuclear reaction or radioactive contamination;
- (o) costs attributed to the Rental Agency's normal course of doing business;
- (p) [mechanical failures caused by] wear and tear, including gradual deterioration, or mechanical breakdown;
- (q) Theft of or damage to unlocked or unsecured vehicles;
- (r) damage which is due and confined to wear and tear, freezing, mechanical or electrical breakdown or failure, unless such damage results from a theft covered by this Rider;
- (s) pre-existing damage or defect;
- (t) damage to tires [unless damaged by fire, malicious mischief or vandalism, or stolen][or] unless the loss is coincident with a covered loss;
- (u) damage sustained on any surface other than a paved road or bound surface such as concrete or tarmac;
- (v) use of the Vehicle for [commercial purposes or] to carry passengers or property for hire;
- (w) use of the Vehicle by a person other than one authorized to operate the Vehicle by the terms of the Rental Agreement;
- (x) [loss of use of the Vehicle;]
- (y) subsequent damages resulting from a failure to protect the Vehicle from further damage;
- (z) damage to any other vehicle, structure or person as a result of a covered loss;
- (aa) rentals of full-sized vans [mounted on truck chassis][, including but not limited to Ford Econoline or Club Wagon, Chevy Van or Sportvan, GMC Vandura and Rally, Dodge Ram Vans and Ram Wagon].
- (bb) rentals of vehicles which have been customized or modified from the manufacturer's factory specifications except for driver's assistance equipment for the physically challenged.
- (cc) rentals of full sized sport utility vehicles[, including but not limited to, Chevrolet/GMC Suburban, Tahoe and Yukon, Ford Expedition, Lincoln Navigator, Toyota Land Cruiser, Lexus LX450, Range Rover or full-sized Ford Bronco].
- (dd) rentals of sport utility trucks (vehicles that have been or can be converted to an open, flat-bed truck)[, including but not limited to Chevy Avalanche, BMC Envoy and Cadillac Escalade EXT].].

[Coverage is not provided [, in whole or in part,] and benefits will not be paid for:

- (a) sales tax related to repair of damages, unless reimbursement of such sales tax is required by law;
- (b) any personal item stolen from the interior or exterior of the Vehicle;
- (c) expenses assumed, waived or paid for by the Rental Agency or its insurer;

- (d) [expenses covered by the Insured Person's personal auto insurer, employer or employer's insurer, or Authorized Driver's insurer;]
- (e) value added tax or similar tax, unless reimbursement of such tax is required by law;
- (f) diminishment of value;
- (g) administrative or other fees charged by the Rental Agency; and
- (h) depreciation, unless reimbursement for depreciation is required by law.]

THE CLAIMS PROVISIONS OF THE POLICY ARE DELETED WITH RESPECT TO THIS RIDER AND REPLACED BY THE FOLLOWING PROVISIONS:

Misrepresentation and Fraud. Coverage of the Insured Person will be void if, at any time, the Insured Person has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Insured Person relating to this coverage. Coverage for an Insured Person will be void if, whether before or after a loss, the Policyholder has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Policyholder relating to this coverage.

Notice of Claim. Written notice of claim must be given to the Company within [45] days after an Insured Person's loss, or as soon thereafter as reasonably possible. Notice given by or on behalf of the claimant to the Company at CHARTIS, Accident & Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225-5987 with information sufficient to identify the Insured Person, is deemed notice to the Company.

In the event of a loss, the Insured Person must:

- a. take all reasonable, necessary steps to protect the Vehicle and prevent further loss or damage to it;
- b. report the damage or loss within 24 hours to the appropriate local authorities and to the Rental Agency;
- c. obtain all information on any other party involved in an "accident," such as name, address, insurance information and driver's license number;
- d. cooperate with the Company in the investigation, settlement or handling of any claims;
- e. permit the Company to question the Insured Person under oath whenever the Company's investigation deems it necessary. All statements taken will be signed by the Insured Person; and
- f. authorize the Company to obtain records or reports necessary to the Company's investigation.

Claim Forms. The Company will send claim forms to the claimant upon receipt of a written notice of claim. If such forms are not sent within [15] days after the giving of notice, the claimant will be deemed to have met the proof of loss requirements upon submitting, within the time fixed in this Policy for filing proof of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made. The notice should include the Insured's name, the Policyholder's name and the Policy number.

Proof of Loss. Written proof of loss must be furnished to the Company within [45] days after the date of the loss. Failure to furnish proof within the time required neither invalidates nor reduces any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity of the claimant, later than one year from the time proof is otherwise required. The Insured must submit[:

- (a) a copy of the Account statement [and charge slip] showing the Vehicle rental transaction;
- (b) a copy of the Rental Agreement;
- (c) a copy of the police report;
- (d) a copy of the initial loss report submitted to the Rental Agency;
- (e) damage estimate as soon as reasonably possible
- (f) an itemized repair bill [from a factory-authorized collision repair facility];
- (g) photos of the damaged Vehicle, if available;

- (h) a copy of the driver's license of the Insured [Person] and/or Authorized Driver, unless the driver's license number shows on the rental agreement;
- (i) a copy of the Rental Agency's [location class-specific fleet] utilization log, if Rental Charges are being claimed.
- (j) a copy of the paid claim presented by the Rental Agency for the damage or loss for which the Insured Person is responsible;
- (k) proof of submission of the loss to, and the results of any settlement or denial by the applicable insurance carrier(s); and
- (l) if no other valid or collectible insurance is applicable, a notarized statement from the Insured Person to that effect.]

If the Insured Person fails to cooperate, or fails to send the Company any of the requested documentation, the Company reserves the right to refuse any further protection for the accident.

Payment and Time of Payment of Claims. Reimbursement for covered loss or damage will be paid to either the Insured Person or the Rental Agency within [60] days after the Company receives Proof of Loss.

Benefit to Bailee. This insurance will in no way inure directly or indirectly to the benefit of any insurer, person, organization or other bailee.

[Subrogation. To the extent the Company pays for a covered loss of an Insured Person, the Company will take over the rights and remedies the Insured Person has relating to the loss. This is known as subrogation. The Insured Person must help the Company preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured Person's rights, the Insured Person must sign an appropriate subrogation form supplied by the Company.

As a condition to receiving the applicable benefits listed above, as they pertain to this Subrogation provision, the Insured Person agrees, except as may be limited or prohibited by applicable law, to reimburse the Company for any such benefits paid to or on behalf of the Insured Person, if such benefits are recovered, in any form, from any third party or coverage.]

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.



President



Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038
(212) 458-5000

(a capital stock company, herein referred to as the Company)

MASTER APPLICATION FOR BLANKET ACCIDENT INSURANCE POLICY

Application is hereby made for a plan of accident insurance based on the statements and representations below:

1. Name of Policyholder: [ABC Organization]
Address of Policyholder: [Wilmington, Delaware 19801]
Policy Number: [XXXXXX]

2. [a.] The following Hazards are made part of the Policy as of the Policy Effective Date:

FORM NUMBER	HAZARD NUMBER	DESCRIPTION
S30409NUFIC	H-1	Land, Water or Air Common Carrier(Public Conveyance)
S30410NUFIC	H-2	Land, Water or Air Common Carrier(mode of transportation)

- b.] Check one and only one:

B-1 Accidental Death Benefit Only
 B-2 Accidental Dismemberment Benefit Only
 B-1 and B-2[[n]] Both Accidental Death and Accidental Dismemberment Benefits

[The following Benefits and Benefit Riders are attached to and made part of the Policy as of the Policy Effective Date.

FORM NUMBER	BENEFIT NUMBER	DESCRIPTION
None]		

3. Policy Effective Date: [Month XX, 20XX]
4. Policy Anniversary Date: [Month XX, 20XX]
[5. Policy Termination Date: [Month XX, 20XX]]

Signed for the Policyholder

Title

Date

Signed by Licensed Resident Agent
(Where Required by Law)]

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

[[MASTER]][PARTICIPATING ORGANIZATION] APPLICATION FOR BLANKET ACCIDENT INSURANCE POLICY

Application is hereby made for a plan of accident insurance based on the statements and representations below:

1. Name of Policyholder: [ABC Organization] Policy Number: [XXXXXX]
Address of Policyholder: [Wilmington, Delaware 19801]

2. Name of Participating Organization: [XYZ Bank, N.A.]
Address of Participating Organization: [999 XYZ Street, Anytown, USA]

3. Classification of Eligible Persons:

[Class	Description of Class
I	All Gold MasterCard and Visa Cardmembers of ABC Bank, N.A., their Eligible Spouses, Eligible Dependent Children and any Authorized Users.
II	All Platinum Select and Platinum Select 500 MasterCard and Visa Cardmembers of ABC Bank, N.A., their Eligible Spouses, Eligible Dependent Children and any Authorized Users.
III	All Cardmembers of ABC Bank, N.A., their Eligible Spouses, Eligible Dependent Children and any Authorized Users.
IV	All Authorized Travelers on an ABC Bank, N.A. Corporate Travel System account, their Eligible Spouses, Eligible Dependent Children and any authorized travelers (any person traveling at the request of a designated organization whose tickets are charged to an ABC Bank, N.A. Corporate Travel System account).
V	All Account Holders of ABC Bank, N.A., their Eligible Spouses, Eligible Dependent Children and any Authorized Users.]

[**Eligible Spouse** - means the Insured's legal spouse.]

[**Eligible Dependent Children** - means the Insured's unmarried children, including natural children from the moment of birth, step or foster children, or adopted children from the date of the filing of a petition for adoption if application for coverage is made within 60 days after the filing of the petition , under age [19] ([25] if attending an accredited institution of higher learning on a full time basis) and primarily dependent on the Insured for support and maintenance [and who reside with the Insured]. [However the age limit does not apply to a child who: (1) otherwise meets the definition of Dependent Children; and (2) is incapable of self-sustaining employment by reason of mental or physical incapacity.]

Coverage for an adopted child shall begin from the moment of birth if the petition for adoption and application for coverage is filed within 60 days after the birth of the child.]

4. **Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons:**

Any Benefit shown in any row of the chart below applies only to an Insured Person in a Class shown in that row, only with respect to an accident that occurs under the circumstances described in a Hazard

shown in that row as to such Insured Person. Any other Rider or Endorsement shown in any row of the chart below applies only with respect to the Classes, Hazards, and Benefits shown in that row.

Section 4A.

Class(es)	Principal Sum
I	\$ 150,000 [*]
II	\$ 1,000,000 [*]
III	\$ 100,000 [*]
IV	\$ 100,000 [*]
V	\$ 100,000 [*]

- [Note: a. [*] In the event of a change in the amount of the Principal Sum due to a change in the Insured Person's Class or a change in the amount of the Principal Sum applicable to the Insured Person's Class, the amount of the Principal Sum applicable to the Insured Person will be the Principal Sum that was in effect on the date the Common Carrier passenger fare was charged to the applicable credit card.
- b. [*] The Principal Sum for an Insured Spouse for whom a Common Carrier passenger fare is purchased using the Insured's credit card is an amount equal to [50]% of the Insured's Principal Sum[, subject to the account maximum].
- c. [*] The Principal Sum for an Insured Dependent Child for whom a Common Carrier passenger fare is purchased using the Insured's credit card is [25]% of the Insured's Principal Sum[, subject to the account maximum].
- d. The account maximum is 200% of the Insured's Principal Sum. In no event will benefits in excess of the account maximum be payable for the combined losses of any Account Holder.]

Section 4B.

Class(es)	Hazard(s)	Benefit(s) and Benefit Riders
I	H-1	B-1 B-2
II	H-1	B-1 B-2
III	H-1	B-1 B-2
IV	[H-2	B-1 B-2]
V	H-1	B-1 B-2]

5. [Aggregate Limit: \$30,000,000 per accident]

6. [a. The following Hazards are made part of the Policy as of the Policy Effective Date:

FORM NUMBER	HAZARD NUMBER	DESCRIPTION
S30409NUFIC	H-1	Land, Water or Air Common Carrier (Public Conveyance)
S30410NUFIC	H-2	Land, Water or Air Common Carrier (mode of transportation)

b.] [Check one and only one:

<u> </u>	B-1	Accidental Death Benefit Only
<u> </u>	B-2	Accidental Dismemberment Benefit Only
<u> X </u>	B-1 and B-2	Both Accidental Death and Accidental Dismemberment Benefits

[The following Benefits and Benefit Riders are attached to and made part of the Policy as of the Policy Effective Date.

FORM NUMBER	BENEFIT NUMBER	DESCRIPTION
None		

7. Coverage Effective and Termination Dates:

Subject to the Policy provisions regarding the effective date of insurance for individuals, coverage will become effective as to each Insured Person on the earliest of the following:

- (1) when the Insured Person boards the Common Carrier; or
- (2) when the Insured Person boards any [Public Conveyance][mode of transportation]; or
- (3) when the Insured Person arrives on the premises of the airport, terminal or station prior to boarding such Common Carrier;

provided, the Common Carrier passenger fare is charged to the credit/debit card or account specified in the Classification of Eligible Classes in this Master Application, issued to the Insured and bearing the Insured's name, prior to boarding such Common Carrier or [Public Conveyance][mode of transportation] or arriving at the airport, terminal or station. Otherwise, coverage becomes effective when the Common Carrier passenger fare is purchased. [However, if a Common Carrier passenger fare was purchased prior to the Effective Date of the [Policy/Participating Organization], no coverage will be provided under the Policy for the use of that Common Carrier passenger fare.]

Subject to the Policy provisions regarding the termination date of insurance for individuals, coverage will end on the latest of the following:

- (1) when the Insured Person alights from any [Public Conveyance][mode of transportation] after arrival at the airport, terminal or station; if the Common Carrier passenger fare was charged to the credit/debit card or account specified in the Classification of Eligible Classes in this Master Application, issued to the Insured and bearing the Insured's name prior to departure for the airport, terminal or station; [or]
- (2) [when the Insured Person leaves the premises of the airport, terminal or station after alighting from the Common Carrier, if the Insured Person travels from the airport, terminal or station using other than a Public Conveyance]; [or]
- (3) when the Insured Person alights from the [Public Conveyance] [mode of transportation] when traveling directly from the airport, terminal or station after arrival of the Common Carrier.

8. **Premiums:**

[It is hereby agreed and understood that the premium amounts, and the manner in which premiums are due and payable, are as follows:

The Premium for the insurance provided under this Policy is an amount calculated by multiplying the number of Statement Active Accounts (an account to which a statement has been issued during the reporting month) by the Statement Active Account Rate shown below for Classes X-X and by multiplying the number of [Common Carrier] transactions by the appropriate rate per [Common Carrier] transaction shown below for Class X (the Premium). The Premium is due and payable monthly in arrears within 60 days of the end of each month commencing with the Policy Effective Date.

<u>Class</u>	<u>Statement Active Account Rate</u>
X	\$.XXX per Statement Active Account per year

<u>Class</u>	<u>[Common Carrier] Transaction Rate</u>
X	\$.XXX per [Common Carrier] transaction

The Policyholder agrees to pay the required premium for these coverages.

[In addition to the premium payable as set forth above, for the twelve (12) month Policy period from [Month XX, 20XX, to Month XX, 20XX], the [Policy][Participating Organization] shall pay an additional premium of 100% of the losses incurred by the Company under this Policy, up to the first \$1,250,000 in incurred losses, plus the Processing Fee, and annually thereafter.

Processing Fee – means 3% of the incurred loss, up to the first \$500,000 of a single incurred loss.

The [Policy][Participating Organization] shall pay such additional premium within thirty (30) days after the Company gives notice of a paid claim.]]

[\$XXXX per Insured, due and payable in advance of the policy term]

[\$XXXX per Insured per month, due and payable on the first of each month for coverage to be provided for that month]

[The premium for the policy term is the greater of (1) \$XXX (the Minimum Premium) or (2) an amount calculated by multiplying the number of persons insured by a per-person rate of \$XXX (the Calculated Premium). The Minimum Premium is due and payable in advance of the [Policy][Participating Organization] Effective Date. The Calculated Premium will be determined upon completion of an audit by the Company or its representative during the policy term. If the Calculated Premium is greater than the Minimum Premium, the difference between the two is due and payable on the date of written notice by the Company to the [Policyholder][Participating Organization] of the amount owed.]]

- 9. **[Policy] [Participating Organization] Effective Date:** [Month XX, 20XX]
- 10. **[Policy] [Participating Organization] Anniversary Date:** [Month XX, 20XX]
- [11. **[Policy] [Participating Organization] Termination Date:** [Month XX, 20XX]]

Signed for the [Policyholder][Participating Organization]

Title

Date

Signed by Licensed Resident Agent
(Where Required by Law)

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

MASTER APPLICATION FOR BLANKET ACCIDENT INSURANCE POLICY

Application is hereby made for a plan of accident insurance based on the statements and representations below:

1. Name of Policyholder: [ABC Organization]
Address of Policyholder: [Wilmington, Delaware 19801]
Policy Number: [XXXXXX]

2. [a.] The following Hazards are made part of the Policy as of the Policy Effective Date:

FORM NUMBER	HAZARD NUMBER	DESCRIPTION
S30414NUFIC	H-1	Commercial Aircraft (Public Conveyance)

- b.] Check one and only one:

<input type="checkbox"/> B-1	Accidental Death Benefit Only
<input type="checkbox"/> B-2	Accidental Dismemberment Benefit Only
<input checked="" type="checkbox"/> B-1 and B-2	Both Accidental Death and Accidental Dismemberment Benefits

[The following Benefits and Benefit Riders are attached to and made part of the Policy as of the Policy Effective Date.

FORM NUMBER	BENEFIT NUMBER	DESCRIPTION
None		

3. **Policy Effective Date:** [Month XX, 20XX]
4. **Policy Anniversary Date:** [Month XX, 20XX]
5. **Policy Termination Date:** [Month XX, 20XX]

Signed for the Policyholder

Title

Date

Signed by Licensed Resident Agent
(Where Required by Law)

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

[[MASTER][PARTICIPATING ORGANIZATION] APPLICATION FOR BLANKET ACCIDENT INSURANCE POLICY

Application is hereby made for a plan of accident insurance based on the statements and representations below:

1. Name of Policyholder: [ABC Organization] Policy Number: [XXXXXX]
Address of Policyholder: [Wilmington, Delaware 19801]

2. Name of Participating Organization: [ABC Bank, N.A.]
Address of Participating Organization: [999 XYZ Street, Anytown, USA]

3. Classification of Eligible Persons:

[Class Description of Class

I All Cardmembers of ABC Bank, N.A., their Eligible Spouses, Eligible Dependent Children and any authorized users (any person who is authorized by the Cardmember and registered with ABC Bank, N.A. to use the Cardmember's account).]

[Eligible Spouse - means the Insured's legal spouse.]

[Eligible Dependent Children - means the Insured's unmarried children, including natural children from the moment of birth, step or foster children, or adopted children from the date of the filing of a petition for adoption if application for coverage is made within 60 days after the filing of the petition, under age [19] ([25] if attending an accredited institution of higher learning on a full time basis) and primarily dependent on the Insured for support and maintenance [and who reside with the Insured]. [However the age limit does not apply to a child who: (1) otherwise meets the definition of Dependent Children; and (2) is incapable of self-sustaining employment by reason of mental or physical incapacity.]

Coverage for an adopted child shall begin from the moment of birth if the petition for adoption and application for coverage is filed within 60 days after the birth of the child.]

4. **Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons:**

Any Benefit shown in any row of the chart below applies only to an Insured Person in a Class shown in that row, only with respect to an accident that occurs under the circumstances described in a Hazard shown in that row as to such Insured Person. Any other Rider or Endorsement shown in any row of the chart below applies only with respect to the Classes, Hazards, and Benefits shown in that row.

Section 4A.

[Class(es)]	Principal Sum
I	\$ 150,000 [*]

[Note: a. [*]The Principal Sum for an Insured Spouse for whom a Commercial Aircraft passenger fare is purchased using the Insured's credit card is an amount equal to [50]% of the Insured's Principal Sum[, subject to the account maximum].

b. [*]The Principal Sum for an Insured Dependent Child for whom a Commercial Aircraft passenger fare is purchased using the Insured's credit card is [25]% of the Insured's Principal Sum[, subject to the account maximum].]

- c. The account maximum is 200% of the Insured's Principal Sum. In no event will benefits in excess of the account maximum be payable for the combined losses of any Insured Person.]]

Section 4B.

Class(es)	Hazard(s)	Benefit(s) and Benefit Riders
I	H-1	B-1 B-2]

5. **[Aggregate Limit: \$20,000,000 per accident]**

6. **[a.** The following Hazards are made part of the Policy as of the Policy Effective Date:

FORM NUMBER	HAZARD NUMBER	DESCRIPTION
S30414NUFIC	H-1	Commercial Aircraft (Public Conveyance)]

b.] **[Check one and only one:**

- B-1 Accidental Death Benefit Only
- B-2 Accidental Dismemberment Benefit Only
- B-1 and B-2[[n]] Both Accidental Death and Accidental Dismemberment Benefits]

[The following Benefits and Benefit Riders are attached to and made part of the Policy as of the Policy Effective Date..

FORM NUMBER	BENEFIT NUMBER	DESCRIPTION
None]		

7. **Coverage Effective and Termination Dates:**

Subject to the Policy provisions regarding the effective date of insurance for individuals, coverage will become effective as to each Insured Person on the earliest of the following:

- (1) when the Insured Person boards the Commercial Aircraft]; or
- (2) when the Insured Person boards any Public Conveyance]; or
- (3) when the Insured Person arrives on the premises of the airport terminal or station prior to boarding such Commercial Aircraft];

provided, the Commercial Aircraft passenger fare is charged to the credit/debit card or account specified in the Classification of Eligible Classes in this Master Application, issued to the Insured and bearing the Insured's name, prior to boarding such Commercial Aircraft or Public Conveyance or arriving at the airport, terminal or station. Otherwise, coverage becomes effective when the Commercial Aircraft passenger fare is purchased. **[However, if a Commercial Aircraft passenger fare was purchased prior to the Effective Date of the [Policy/Participating Organization], no coverage will be provided under the Policy for the use of that Commercial Aircraft passenger fare.]**

Subject to the Policy provisions regarding the termination date of insurance for individuals, coverage will end on the latest of the following:

- (1) when the Insured Person alights from the Commercial Aircraft; **[or]**

- (2) when the Insured Person alights from any Public Conveyance after arrival at the airport, terminal or station; if the Commercial Aircraft passenger fare was charged to the credit/debit card or account specified in the Classification of Eligible Classes in this Master Application, issued to the Insured and bearing the Insured's name prior to departure for the airport, terminal or station; **or**
- (3) **when the Insured Person leaves the premises of the airport, terminal or station after alighting from the Commercial Aircraft, if the Insured Person travels from the airport using other than a Public Conveyance;** **or**
- (4) when the Insured Person alights from the Public Conveyance when traveling directly from the airport, terminal or station after arrival of the Commercial Aircraft.

Coverage for a Commercial Aircraft ticket purchased prior to termination of insurance is effective for one year (or 18 months in the case of "open" Commercial Aircraft tickets) from the charge to the Insured's account.

8. Premiums:

It is hereby agreed and understood that the premium amounts, and the manner in which premiums are due and payable, are as follows:

\$XXXX per Insured, due and payable in advance of the policy term

\$XXXX per Insured per month, due and payable on the first of each month for coverage to be provided for that month

The premium for the policy term is the greater of (1) \$XXX (the Minimum Premium) or (2) an amount calculated by multiplying the number of persons insured by a per-person rate of \$XXX (the Calculated Premium). The Minimum Premium is due and payable in advance of the [Policy][Participating Organization] Effective Date. The Calculated Premium will be determined upon completion of an audit by the Company or its representative during the policy term. If the Calculated Premium is greater than the Minimum Premium, the difference between the two is due and payable on the date of written notice by the Company to the [Policyholder][Participating Organization] of the amount owed.

- 9. **[Policy] [Participating Organization] Effective Date: [Month XX, 20XX]**
- 10. **[Policy] [Participating Organization] Anniversary Date: [Month XX, 20XX]**
- 11. **[Policy] [Participating Organization] Termination Date: [Month XX, 20XX]**

Signed for the **[Policyholder][Participating Organization]**

Title

Date

Signed by Licensed Resident Agent
(Where Required by Law)

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXXX]

PARTICIPATING ORGANIZATION ENDORSEMENT

This Endorsement is attached to and made part of the Policy [as of the Policy Effective Date shown in the Policy's Master Application.] effective [Month Day, Year]. It applies only with respect to accidents that occur on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Endorsement.

The following definition is added to the Definitions section of the Policy:

Participating Organization - means an organization: 1) which elects to offer coverage under the Policy by completing a Participation Organization Application that has been accepted by the Company; 2) which completes a participation agreement with the Policyholder; 3) which remits the required premium when due; if applicable, and 4) while coverage through the Participating Organization is available under the Policy.

The following section is added to the Policy:

PARTICIPATING ORGANIZATION EFFECTIVE AND TERMINATION DATES

Effective Date. A Participating Organization's coverage under the Policy begins on the later of: 1) Participating Organization Effective Date shown in the Participating Organization Application at 12:01 AM Standard Time at the address of the Participating Organization shown in the Participating Organization Application; or 2) the Policy Effective Date shown in the Master Application.

Termination Date. [The Company may terminate the Participating Organization's coverage under the Policy [on any Participating Organization Anniversary date]¹ by giving [30 days]² advance notice in writing to the Participating Organization.]³ [The Participating Organization may terminate the Participating Organization's coverage under the Policy [at any time]¹ [on any Participating Organization Anniversary date]¹ by giving [30 days]² advance written notice to the Company.]⁴ The Participating Organization's coverage under the Policy may also, at any time, be terminated by the mutual written consent of the Company and the Participating Organization. A Participating Organization's coverage terminates automatically on [the earlie[r][st] of: 1)]⁵ [the Participating Organization Termination Date shown on the Participating Organization Application;]¹ [2) the premium due date if premiums are not paid when due; if applicable,]¹ [or 3)] the date the Policy terminates. Termination of the Participating Organization's coverage takes effect at 12:01 AM Standard Time at the Participating Organization's address on the date of termination.

The references in the Policy to "this Policy/coverage under this Policy" and "Policyholder" may also, where applicable, mean "a Participating Organization's coverage under this Policy" and "Participating Organization", respectively.

The references in the Policy to "Application" or "Master Application" may also, where applicable, mean a "Participating Organization's Application".

The following language applies to each Rider attached to the Policy:

Any Riders attached to the Policy apply only with respect to accidents that occur on or after the later of: 1) the effective date of each Rider; or 2) the effective date of the Participating Organization's coverage under each Rider. Each Rider applies with respect to a Participating Organization's coverage under the Policy only if the Participating Organization has elected the coverage described in each Rider as indicated in the Participating Organization Application.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Endorsement:

A stylized handwritten signature in black ink, consisting of several sharp, angular strokes.

President

A handwritten signature in black ink, appearing to start with a large 'D' followed by several loops and a final flourish.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: _____

Policy Number: _____

BENEFIT B-1A

[TRIP CANCELLATION/INTERRUPTION]¹ [AIRLINE BANKRUPTCY]² BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the Master Application]³ [effective [Monty Day, Year]]⁴. It applies only with respect to accidents that occur on or after that date. It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and Other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

[Trip Cancellation. If the Insured Person is prevented from taking the Trip due to Sickness, Injury or death of the Insured Person or the Insured Person's Immediate Family Member occurring on or prior to the departure date stated on the Commercial Aircraft ticket ("Ticket"), the Company will reimburse the Insured Person or whoever is responsible for payment of the airline charge, for the unused, non-refundable portion of each Ticket up to a maximum of [\$500] per Ticket, provided:

1. with regard to Sickness or Injury of the Insured Person or the Insured Person's Immediate Family Member, a Physician has recommended in writing, that due to the severity of the condition of the Insured Person or the Insured Person's Immediate Family Member, it is Medically Necessary that the Insured Person cancel the Trip. The Insured Person or the Insured Person's Immediate Family Member must be under the direct care and attendance of a Physician; and
2. with regard to death of the Insured Person or the Insured Person's Immediate Family Member, such death has been certified by a Physician or other person legally qualified to certify a person's death. [Death of the Insured Person's Immediate Family Member must occur within [30] days of the Insured Person's Trip.]⁵

It is a condition of this insurance that, in the event of a claim for Trip Cancellation, the Insured Person shall surrender the Ticket to the Company.]⁶

[Trip Interruption. If the Insured Person is unable to continue the Trip due to Sickness, Injury or death of the Insured Person or the Insured Person's Immediate Family Member, occurring prior to the return date stated on the Ticket, the Company will reimburse the Insured Person or whoever is responsible for payment of the airline charge, for the unused, non-refundable portion of each Ticket, less the value of applied credit from an unused return travel ticket, up to a maximum of [\$500] per Ticket, provided:

1. with regard to Sickness or Injury of the Insured Person or the Insured Person's Immediate Family Member, a Physician has recommended that due to the severity of the condition of the Insured Person or the Insured Person's Immediate Family Member, it is Medically Necessary that the Insured Person interrupt the Trip. The Insured Person or the Insured Person's Immediate Family Member must be under the direct care and attendance of a Physician; and
2. with regard to death of the Insured Person or the Insured Person's Immediate Family Member, such death has been certified by a Physician or other person legally qualified to certify a person's death.

It is a condition of this insurance that, in the event of a claim for Trip Interruption, the Insured Person shall surrender the unused portion of the Ticket to the Company.]⁷

[Airline Bankruptcy. If the Insured Person is prevented from taking the Trip due to Commercial Aircraft default resulting solely from the Bankruptcy of such Commercial Aircraft, the Company will reimburse the Insured Person

or whoever is responsible for payment of the airline charge, for the unused, non-refundable portion of the Ticket, up to a maximum of [\$500] per Ticket. Only Tickets purchased prior to the airline filing for bankruptcy, Chapter 11 or similar re-organization are covered under this benefit. Coverage for Commercial Aircraft default will not apply for delays or flight cancellation due to weather conditions, mechanical breakdown of the scheduled aircraft, changes in the Insured Person's travel plans, an Insured Person's business or contractual obligations, prohibition or regulation by any government or the Insured Person's inability to obtain necessary travel documents, including but not limited to passports, visas or medical inoculation.

In the event the Insured Person transfers his or her Ticket to another airline, the claim under this Airline Bankruptcy Benefit will be limited to the "change fee" for such Ticket.

Prior to submitting a claim under this benefit, the Insured Person must first seek reimbursement through the Policyholder. Only if such reimbursement is denied, will a claim be payable under this benefit subject to all terms and condition of this benefit.

It is a condition of this insurance that, in the event of a claim for default, the Insured Person shall surrender the Ticket to the Company.]²

[Special Notification of Claim. The Insured Person must notify the Company or the Policyholder as soon as reasonably possible in the event of a Trip Cancellation or Interruption claim. The Company will not be liable for any additional penalty charges incurred that would not have been imposed had notice been provided as soon as reasonably possible.]⁸

[Exclusions. In addition to all other exclusions in the General Exclusions section of the Policy, benefits payable under Trip Cancellation and Trip Interruption under this Rider are deemed to exclude losses caused in whole or in part by, or resulting in whole or in part from:

1. Pre-existing Conditions
2. pregnancy and childbirth, except Complications of Pregnancy.

Exclusions [2]., [2][3][4][5]., [2][3][4][5][6][7][8][9][10][11][12]., and [2][3][4][5][6][7][8][9][10][11][12][13]. in the General Exclusions section of the Policy are waived with respect to an Insured Person to whom benefits are payable under Trip Cancellation and Trip Interruption under this Rider, but only with respect to Sickness suffered by such person under the circumstances described under this Rider.]⁹

[Bankruptcy - as used in this Rider, means that the Commercial Aircraft has been declared insolvent by a United States Federal Bankruptcy Court.]²

[Complications of Pregnancy – means conditions requiring Hospital stays (when the pregnancy is not terminated) whose diagnoses are distinct from pregnancy but are adversely affected by pregnancy or are caused by pregnancy. These conditions include acute nephritis, nephrosis, cardiac decompensation, missed abortion and similar medical and surgical conditions of comparable severity. Complications of Pregnancy also include nonelective caesarean section, ectopic pregnancy which is terminated and spontaneous termination of pregnancy, which occurs during a period of gestation in which a viable birth is not possible.

Complications of Pregnancy do not include false labor, occasional spotting, physician-prescribed rest during the period of pregnancy, morning sickness, hyperemesis gravidarum, preeclampsia and similar conditions associated with the management of a difficult pregnancy not constituting a nosologically distinct complication of pregnancy.]⁹

[Hospital - means a facility that: (1) is operated according to law for the care and treatment of injured people; (2) has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis; (3) has 24 hour nursing service by registered nurses (R.N.'s); and (4) is supervised by one or more Physicians. A Hospital does not include: (1) a nursing, convalescent or geriatric unit of a hospital when a patient is confined mainly to receive nursing care; (2) a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged; nor does it include any ward, room, wing, or other section of the hospital that is used for such purposes; or (3) any military or veterans hospital or soldiers

home or any hospital contracted for or operated by any national government or government agency for the treatment of members or ex-members of the armed forces.]⁹

[Medically Necessary - means, in our opinion the Physician's recommendation is: (a) consistent with the symptoms, diagnosis and treatment of the condition of the Insured Person or the Insured Person's Immediate Family Member; (b) appropriate with regard to standards of good medical practice; and (c) not primarily for the convenience of the Insured Person or the Insured Person's Immediate Family Member.]¹

[Pre-existing Condition - means a sickness, disease, or other condition of the Insured Person or an Immediate Family Member of the Insured Person, which, in the 60 day period before the purchase date of the Ticket, medical advice or treatment by a Physician was received by the Insured Person or an Immediate Family Member of the Insured Person.]⁹

[Sickness - means an illness or disease which requires treatment by a Physician.]¹

Trip – means scheduled travel for which a Commercial Aircraft passenger fare is purchased as specified in the Coverage Effective and Termination Dates section of the [Master]¹⁰[Participating Organization]¹⁰ Application.

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pennsylvania witness this Rider.

A stylized handwritten signature in black ink, consisting of several large, sweeping strokes.

President

A handwritten signature in black ink, appearing to start with the letter 'D' followed by several loops and a period.

Secretary

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: [ABC Organization]

Policy Number: [XXXXX]

BLANKET ACCIDENT INSURANCE

Policy Amendment [No. 1]

This Policy Amendment is attached to and made part of the Policy effective [Month Day, Year] at 12:01 AM, Standard Time at the address of the Policyholder. [Any changes in coverage apply only with respect to accidents that occur on or after that date.][Any changes in premium apply as of the first premium due date on or after the effective date of this Amendment.]

[Master Application XXXXX]

The **Premiums** section of the Master Application has been amended to read as follows:

It is hereby agreed and understood that the premium amounts, and the manner in which premiums are due and payable, are as follows:

\$XXX per Insured, due and payable on or before [Month XX, 19XX]

This Policy Amendment expires concurrently with the Policy and is subject to all of the provisions, limitations and conditions of the Policy except as they are specifically modified by this Policy Amendment.

The President and Secretary of National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider:



President



Secretary

SERFF Tracking Number: MCHX-G127813842 State: Arkansas
 Filing Company: National Union Fire Insurance Company of Pittsburgh, PA State Tracking Number: 50246
 Company Tracking Number: S30406NUFIC-AR
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: S30406NUFIC (Rev. 7/11) Blanket Accident - Nationa
 Project Name/Number: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA /S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA

Supporting Document Schedules

	Item Status:	Status Date:
Satisfied - Item: Flesch Certification Comments: Attachments: AR - READABILITY CERTIFICATION.PDF AR Cert of Compliance with Rule 19.PDF AR Certificate of Compliance 23-79-138 and RR 49.PDF	Approved-Closed	11/28/2011

	Item Status:	Status Date:
Satisfied - Item: Application Comments: Please see forms tab	Approved-Closed	11/28/2011

	Item Status:	Status Date:
Bypassed - Item: PPACA Uniform Compliance Summary Bypass Reason: Not a PPACA related filing Comments:	Approved-Closed	11/28/2011

	Item Status:	Status Date:
Satisfied - Item: Guaranty Association Notice Comments: Attachment: AR Guaranty Assoc Notice.PDF	Approved-Closed	11/28/2011

	Item Status:	Status
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SERFF Tracking Number: MCHX-G127813842 State: Arkansas
 Filing Company: National Union Fire Insurance Company of Pittsburgh, PA State Tracking Number: 50246
 Company Tracking Number: S30406NUFIC-AR
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: S30406NUFIC (Rev. 7/11) Blanket Accident - Nationa
 Project Name/Number: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA /S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA

Satisfied - Item: AR Service Information Approved-Closed **Date:** 11/28/2011
Comments:
Attachment:
 AR-Service Info.PDF

Item Status: **Status**
Date:
Satisfied - Item: Authorization Letter Approved-Closed 11/28/2011
Comments:
Attachment:
 11-0615 NUFIC MCR Authorization.PDF

Item Status: **Status**
Date:
Satisfied - Item: Statement of Variability Approved-Closed 11/28/2011
Comments:
Attachment:
 AR EO.V.PDF

STATE OF ARKANSAS
READABILITY CERTIFICATION

COMPANY NAME: National Union Fire Insurance Company of Pittsburgh, PA

This is to certify that the form(s) referenced below has achieved a Flesch Reading Ease Score as indicated below and complies with the requirements of Ark. Stat. Ann. Section 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Form Number	Score
S30406NUFIC (Rev. 7/11)-AR	50.7
S30411NUFIC (Rev. 7/11)-AR	50.1
S30409NUFIC (Rev. 4/07)	52.1
S30410NUFIC (Rev. 4/07)	50.3
S30435NUFIC (Rev. 4/07)	51.8
S30436NUFIC (Rev. 4/07)	52.7
S30437NUFIC (Rev. 4/07)	51.6
S30414NUFIC (Rev. 4/07)	51.2
S30595NUFIC	50.1
S30596NUFIC	51.6
S30597NUFIC	51.2
S30598NUFIC	51.1
S30599NUFIC	51.8
S30600NUFIC	50.1
S30601NUFIC	50.4
S30602NUFIC	51.8

STATE OF ARKANSAS
READABILITY CERTIFICATION

Form Number	Score
S30603NUFIC-AR	51.1
S30605NUFIC	52.8
S30606NUFIC	50.2
S30415NUFIC	51.4
S30434NUFIC	50.7
S30488NUFIC	50.5



Signed: _____

Name: **Susan E. Martin**

Title: **Assistant Vice Presiden**

Date: November 11, 2011

Certificate of Compliance with Arkansas Rule and Regulation 19

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Form Number(s): S30406NUFIC (Rev. 7/11)-AR, et al and S30411NUFIC (Rev. 7/11)-AR et al

I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19.



Signature of Company Officer

Susan E. Martin

Name

Assistant Vice President

Title

November 9, 2011

Date

CERTIFICATE OF COMPLIANCE

Insurer: National Union Fire Insurance Company of Pittsburgh, Pa.

Form Numbers: S30406NUFIC (Rev. 7/11)-AR, et al and S30411NUFIC (Rev. 7/11)-AR et al

I hereby certify that the filing above meets all applicable Arkansas requirements including Regulation 49 (Life and Health Guaranty Fund Notice) and Ark. Code Ann. 23-79-138 and Bulletin 11-88 (Consumer Information Notice).



Signature of Company Officer

Susan E. Martin

Name

Assistant Vice President

Title

November 9, 2011

Date

LIMITATIONS AND EXCLUSIONS UNDER THE ARKANSAS LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION ACT

Residents of this state who purchase life insurance, annuities or health and accident insurance should know that the insurance companies licensed in this state to write these types of insurance are members of the Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association"). The purpose of the Guaranty Association is to assure that policyholders will be protected, within certain limits, in the unlikely event that a member insurer becomes financially unable to meet its obligations. If this should happen, the Guaranty Association will assess its other member insurance companies for the money to pay the claims of insured persons who live in this state and, in some cases, to keep coverage in force. The valuable extra protection provided by the member insurers through the Guaranty Association is not unlimited, however. And, as noted below, this protection is not a substitute for consumers' care in selecting insurance companies that are well managed and financially stable.

DISCLAIMER

The Arkansas Life and Health Insurance Guaranty Association ("Guaranty Association") may not provide coverage for this policy. If coverage is provided, it may be subject to substantial limitations or exclusions, and require continued residency in this state. You should not rely on coverage by the Guaranty Association in selecting an insurance policy.

Coverage is NOT provided for your policy or any portion of it that is not guaranteed by the insurer or for which you have assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract.

Insurance companies or their agents are required by law to provide you with this notice.

The Arkansas Life and Health Insurance Guaranty Association
C/o The Liquidation Division
1023 West Capitol, Suite 2
Little Rock, Arkansas 72201

Arkansas Insurance Department
1200 West Third Street
Little Rock, Arkansas 72201-1904

The state law that provides for this safety-net coverage is called the Arkansas Life and Health Insurance Guaranty Association Act ("Act"). Below is a brief summary of the Act's coverages, exclusions and limits. This summary does not cover all provisions of the Act; nor does it in any way change anyone's rights or obligations under the Act or the rights or obligations of the Guaranty Association.

COVERAGE

Generally, individuals will be protected by the Guaranty Association if they live in this state and hold a life, annuity or health insurance contract, or policy, or if they are insured under a group insurance contract, issued by a member insurer. The beneficiaries, payees or assignees of insured persons are protected as well, even if they live in another state.

EXCLUSIONS FROM COVERAGE

However, persons holding such policies are NOT protected by the Guaranty Association if:

- they are eligible for protection under the laws of another state (this may occur when the insolvent insurer was incorporated in another state whose guaranty association protects insureds who live outside that state);
- the insurer was not authorized to do business in this state;
- their policy was issued by a nonprofit hospital or medical service organization, an HMO, a fraternal benefit society, a mandatory state pooling plan, a mutual assessment company or similar plan in which the policyholder is subject to future assessments, or by an insurance exchange.

The Guaranty Association also does NOT provide coverage for:

- any policy or portion of a policy which is not guaranteed by the insurer or for which the individual has assumed the risk, such as non-guaranteed amounts held in a separate account under a variable life or variable annuity contract;
- any policy of reinsurance (unless an assumption certificate was issued);
- interest rate yields that exceed an average rate;
- dividends and voting rights and experience rating credits;
- credits given in connection with the administration of a policy by a group contract holder;
- employers' plans to the extent they are self-funded (that is, not insured by an insurance company, even if an insurance company administers them);
- unallocated annuity contracts (which give rights to group contract holders, not individuals).
- unallocated annuity contracts issued to/in connection with benefits plans protected under Federal Pension Benefit Corporation ("FPBC" (whether the FPBC is yet liable or not);
- portions of an unallocated annuity contract not owned by a benefit plan or government lottery (unless the owner is a resident) or issued to a collective investment trust or similar pooled fund offered by a bank or other financial institution);
- portions of a policy or contract to the extent assessments required by law for the Guaranty Association are preempted by State or Federal law;
- obligations that do not arise under the policy or contract,, including claims based on marketing materials or side letters, riders, or other documents which do not meet filing requirements, or claims for policy misrepresentations, or extra-contractual or penalty claims;
- contractual agreements establishing the member insurer's obligations to provide book value accounting guarantees for defined contribution benefit plan participants (by reference to a portfolio of assets owned by a nonaffiliate benefit plan or its trustees).

LIMITS ON AMOUNT OF COVERAGE

The Act also limits the amount the Guaranty Association is obligated to cover: The Guaranty Association cannot pay more than what the insurance company would owe under a policy or contract. Also, for any one insured life, the Guaranty Association will pay a maximum of \$300,000 - no matter how many policies and contracts there were with the same company, even if they provided different types of coverage. Within this overall \$300,000 limit, the Guaranty Association will not pay more than \$300,000 in health insurance benefits, \$300,000 in present value of annuities, or \$300,000 in life insurance death benefits or net cash surrender values - again, no matter how many policies and contracts there were with the same company, and no matter how many different types of coverages. There is a \$1,000,000 limit with respect to any contract holder for unallocated annuity benefits, irrespective of the number of contracts held by the contract holder. These are limitations for which the Guaranty Association is obligated before taking into account either its subrogation and assignment rights or the extent to which those benefits could be provided out of the assets of the impaired or insolvent insurer.

If you are having problems with your insurance company or agent, do not hesitate to contact the company or agent to resolve your problem:

INSURANCE COMPANY:

National Union Fire Insurance Company of Pittsburgh, Pa.
Customer Service
503 Carr Road, 3rd Floor
Wilmington, DE 19809
1-888-396-5369
or
1-302-765-1600

INSURANCE AGENT:

[John Doe
XXX Any Street
Any City, Any State XXXXX]

If we at National Union Fire Insurance Company of Pittsburgh, Pa. fail to provide you with reasonable and adequate service you may contact the Office of the Commissioner of Insurance, a state agency which enforces Arkansas' insurance laws, and file a complaint. You can contact the Office of the Commissioner of Insurance at:

Arkansas Insurance Department
Consumer Services Division
1200 West Third Street
Little Rock, AR 72201-1904
1-800-852-5494
1-501-371-2640
Fax Number: 1-501-371-2749
E-Mail: insurance.consumers@arkansas.gov
Web Site: www.insurance.arkansas.gov

NATIONAL UNION FIRE INSURANCE
COMPANY OF PITTSBURGH, PA.

Administrative Offices:

A&H Regulatory Affairs Department
P.O. Box 9708
Wilmington, DE 19809

CHARTIS 

June 15, 2011

NAIC Company Code: National Union Fire Insurance Company of Pittsburgh, Pa.
NAIC # 012-19445, FEIN 25-0687550

Re: Attached Filing Submission

Please accept this letter as authorization from National Union Fire Insurance Company of Pittsburgh, Pa. for McHugh Consulting Resources, Inc. to file any or all policy forms and/or rates as referenced in the corresponding SERFF filing on behalf of National Union Fire Insurance Company of Pittsburgh, Pa.

Sincerely,



Susan E. Martin

Assistant Vice President

National Union Fire Insurance Company of Pittsburgh, Pa.

Blanket Accident Insurance Policy - S30406NUFIC(Rev.7/11)-AR and S30411NUFIC(Rev.7/11)-AR
Explanation of Variables

Blanket Accident Insurance Policy (S30406NUFIC(Rev.7/11)-AR and S30411NUFIC(Rev.7/11)-AR):

- Brackets around numbers or alphas in a listing and punctuation or words such as “and”/”or” in a listing will be included or deleted as needed in order to make the statement read correctly.
- Numeric variables within the Policy are shown as typical ranges. If only specific increments apply, these increments will be listed. These variables will always comply with the minimum statutory requirements of the state in which the Policy is delivered.
- The Policyholder Name and Policyholder Number will vary on a case-by-case basis.

Note that the above variables will not be explained everywhere they appear.

Blanket Accident Insurance Policy – S30406NUFIC(Rev.7/11)-AR

1. Applies if a Policy is written for a specific term of insurance.
2. Applies if this Policy is renewable.
3. Insert if term applies.
4. Either or may be used.
5. Use if the definition of Insured is to be limited.
6. Use if there is a distinction between the defined term and undefined authorized traveler.
7. Include if covered under Policy.
8. Include if termination is limited to the Policy Anniversary Date.
9. The number of days for notice of termination will vary on a case-by-case basis. However, this number will always comply with the minimum statutory requirements of the state in which the Policy is delivered.
10. This language will be included when both choices (#11 and #12 below) for automatic Policy termination are to be included in the Policy.
11. The reference to a Policy Termination Date will only be included if the Policy is written for a specific term of insurance.
12. The reference to a premium due date will only be included if premium for the Policy is paid on other than a single premium basis.
13. Include if applicable.
14. Included when Policy coverage includes dependent coverage.
15. The premiums can be changed on any one of the dates specified. This will vary on a case-by-case basis.
16. The number of days for notice of premium change will vary on a case-by-case basis. However, this number will always comply with the minimum statutory requirements of the state in which the Policy is delivered.
17. Applies if there is a rate guarantee.
18. The sentence giving the Company the right to change the premiums as a condition of renewal will be included in the Policy at the option of the Company.
19. The number of days of the Grace Period may be increased at the option of the Company by will never be decreased below 31.
20. This language may be included in the Policy at the option of the Company.
21. Included if time period is required between injury and death.
22. Included if Accidental Death is included.
23. Speech and Hearing will be included or excluded.
24. Thumb and index finger of the same hand will be included or excluded.
25. Included or excluded.
26. Included if Accidental Dismemberment is included in the Policy.
27. Exposure and Disappearance will be included or excluded.
28. Included if there is more than one benefit with limitations in Policy.
29. Language will vary based on benefits in Policy.
30. Included if there is more than one Hazard with limitations in Policy.
31. Hazards in policy listed here.
32. Include if an Aggregate Limit applies to Policy.
33. Included or excluded subject to state law.
34. Included or excluded.
35. Include if there is a limit restriction on an Insured’s account.
36. Language included or excluded.

37. Exclusion included or excluded.
38. The numbers will never be less than the statutory minimum.
39. The address is bracketed for possible future address changes.
40. The number of days for Claim forms to be sent is bracketed in case of future regulation changes by will never be more than the statutory requirement.
41. This language will be included or excluded to satisfy statutory requirements.
42. This language will appear if the Insured may not assign his or her rights under the Policy.
43. This language will appear if the Insured may assign his or her rights under the Policy.

Master Application for Blanket Accident Insurance Policy – S30407NUFIC

1. The Master Application is considered to be variable in its entirety. It contains sample language for filing purposes.

[Master][Participating Organization] Application for Blanket Accident Insurance Policy – S30408NUFIC-AR

1. The application is considered to be variable in its entirety. It contains sample language for filing purposes. All references to Participating Organization will be included only if coverage under the Policy is available through a Participating Organization.

[Land][Water][or][Air] Common Carrier (Public Conveyance) – S30409NUFIC (Rev.4/07)

1. Include if applicable.
2. Include all that apply.

[Land][Water][or][Air] Common Carrier [(mode of transportation)] – S30410NUFIC (Rev.4/07)

1. Include if applicable.
2. Include all that apply.

Participating Organization Endorsement – S30415NUFIC

1. Included or excluded.
2. Vary as required by Policyholder. Will comply with minimum statutory requirements.
3. Include when Company has option to terminate coverage.
4. Included or excluded and only if premium is paid on other than single premium basis.
5. Include if there is more than one termination option.

[Land][Water][or][Air] Common Carrier [(Public Conveyance)] (Business Only) – S30435NUFIC(Rev.4/07)

1. Include if applicable.
2. Include all that apply.
3. Include whichever term is appropriate.
4. Include if Authorized user/Authorized Traveler is covered.

24-Hour Accident Protection While on a Trip (Business Only) – S30436NUFIC(Rev.4/07)

1. Include if applicable.
2. Include all that apply.
3. Include if there are mileage restrictions.
4. Include if Sojourn or Personal Deviation is included.

24-Hour Accident Protection While on a Trip – S30437NUFIC (Rev.4/07)

1. Include if a length of time limitation applies.
2. Include all that apply.
3. Include if applicable.

Amendatory Endorsement for Policy Form No. S30406NUFIC – S30595NUFIC

1. This section may be included or excluded.
2. This definition may be included or excluded.
3. This item will be included if appropriate to the policy.

Amendatory Endorsement for Policy Form No. S30411NUFIC – S30596NUFIC

1. This section may be included or excluded.
2. This definition may be included or excluded.

3. This item will be included if appropriate to the policy.

Amendatory Endorsement for Domestic Partners – S30597NUFIC

1. Include if opposite sex partner can be considered a Domestic Partner.
2. Include if same sex partner can be considered a Domestic Partner.
3. Include one or the other.
4. Include if part of the definition.

Baggage Delay Benefit Rider – S30598NUFIC

1. Include if Rider issued with Policy.
2. Include if Rider issued after Policy.
3. Include if applicable.
4. Include if Limitations are part of the Rider.
5. Include if Excess Insurance is part of the Rider.
6. Definition will be included if Baggage Delay Benefit reimbursement is based on Destination.
7. Definition will be included if Baggage Delay Benefit reimbursement is based on Location of Permanent Residence.
8. Include all that apply.
9. Definition will be included if Baggage Delay Benefit reimbursement is based on Return Destination.

Trip Delay Benefit Rider – S30599NUFIC

1. Include if Rider issued with Policy.
2. Include if Rider issued after Policy.
3. Include if applicable.
4. Include all that apply.
5. Each Covered Reason can be included or excluded.
6. Definition will be included if Complications of Pregnancy is covered.
7. Definition will be included if Covered Reason (f) is included.
8. Definition will be included if Covered Reason (c) is included.
9. Definition will be included if Complications of Pregnancy or emotional trauma et al is included.
10. Definition will be included if Covered Reason (a) is included.
11. Definition will be included if Covered Reason (f) is included.
12. Definition will be included if reimbursable benefit includes Reasonable Additional Expenses.
13. Definition will be included if Covered Reason (b) is included.
14. Each individual exclusion within the group can be included or excluded.

[Trip Cancellation][Interrupted][Airline][Bankruptcy] Benefit Rider – S30600NUFIC

1. Include if Trip Cancellation is included.
2. Include if Trip Interruption is included.
3. Include if Bankruptcy is included.
4. Include if Airline Bankruptcy is included.
5. Include if the rider is issued with the Policy.
6. Include if the rider is issued after the Policy.
7. Include all that apply.
8. Include if more than one Hazard is included in the Policy.
9. Include if someone other than the Insured Person is responsible for purchasing ticket.
10. Include if more than one ticket is involved.
11. Include if Covered Reason is included.
12. Include applicable coverage.
13. Include if Immediate Family Member is covered.
14. Include if a substitute Travel Itinerary is not available.
15. Include if a time limit applies.
16. The name of the Company may be substituted here.
17. Include if Additional Benefit is offered.
18. Include if there will be a reduction in Covered Benefits due to the Additional Benefit.
- 18a. Include if reimbursement is based on applied credit of unused return ticket.
19. Include if Covered Reason only applies to final destination.
20. Include if coverage not offered for weather conditions or mechanical breakdowns.

21. Include if coverage not offered for changes in travel plans, business obligations, government prohibitions or inability to obtain travel documents.
22. Include if benefits limited by change fee.
23. Include if reimbursement must first be attempted through Policyholder.
24. Include if Special notification of claim applies.
25. Include if tickets must be surrendered to the Company.
26. Include if pregnancy is an exclusion.
27. Definition may or may not be included.
28. Include if Complications of Pregnancy or hospitalized emotional conditions are covered.
29. Include if pre-existing conditions are excluded.
30. Include if excluded from definition.
31. Definition may or may not be included.
32. Language may or may not be included.
33. Definition may or may not be included.
34. Include if Travel Supplier is a party to this rider.
35. Each of these Exclusions can be included or excluded.
36. Each of these activities or events can be included or excluded.
37. Language may or may not be included.

[Baggage] [and] [Personal Effects] Benefit Rider – S30601NUFIC

1. Insert if Baggage is to be covered.
2. Insert if Personal Effects is to be covered.
3. Insert if the rider is included on the date the policy is effective.
4. Insert if the rider is added after the effective date of the policy.
5. Insert one of the three options.
6. Include if Baggage and/or Personal Effects is/are to be covered while on a Common Carrier or Commercial Airline.
7. Insert if Checked Baggage is covered.
8. Insert if Carry-on Baggage is covered.
9. Insert types of losses that are to be covered. All three are not required.
10. Insert if damaged Baggage is not covered.
11. Insert either Common Carrier or Commercial Airline. Must be consistent on applicable coverages.
12. Insert if there are separate maximums for Checked Baggage and Personal Effects.
13. Insert either Common Carrier Fare or Commercial Airline.
14. Insert if the maximum is either Common Carrier Fare Ticket or Commercial Airline Ticket.
15. Insert if the maximum is per bag.
16. Insert if the maximum is per bag, per Ticket or per Insured Person per Trip.
17. Insert if the maximum is per Insured Person per Trip.
18. Insert if the maximum is for all Insured Persons per Trip.
19. Insert if there is an overall maximum.
20. Insert if there is an overall maximum and internal maximums for Checked and Carry-on and/or Personal Effects.
21. Insert if the overall maximum is per Insured Person's Account per Trip.
22. Insert if the overall maximum is an annual aggregate for all Insured Persons under the Policy.
23. Insert if the Baggage and/or Personal Effects are to be covered either/or both while on a Public Conveyance and/or while at the airport, station, or terminal.
24. Insert either or both.
25. Include if both while on a Public Conveyance and while at a station, terminal or airport are included.
26. Insert if coverage is provided while on a Public Conveyance.
27. Insert one of the three, as applicable.
28. Insert if coverage is to be provided while at an airport, terminal or station.
29. Insert if Checked Baggage and Carry-on and/or Personal Effects are covered and the amount that will be paid for Checked and Carry-on and/or Personal Effects is different.
30. Insert if for all covered possessions or for Checked Baggage only.
31. Insert if there is more than one possible payment basis.
32. Insert if cash value is to be a payment basis.
33. Insert either original cash value or cost of replacement to define cash value.
34. Insert if cash value is to be less depreciation.
35. Insert if cost of repair is to be a payment basis.

36. Insert if cost of replacement is to be a payment basis. Cannot be used if cash value is used and is defined to be cost of replacement.
37. Insert only if payment basis for Carry-on and/or Personal Effects is to be different than for Checked Baggage.
38. Insert if Baggage and/or Personal Effects are to be covered at a hotel.
39. Insert if Burglary while at a hotel is excluded or if cross-reference 40 is used.
40. Insert if there is a separate benefit for hotel burglary.
41. Insert if there is a combined maximum for certain listed items.
42. Insert any or all of the items.
43. Insert if the combined maximum is to reduce maximums available under coverage A, B, or C
44. Insert the identifying letter of the coverages whose maximum the combined maximum will reduce.
45. Insert if the Loss of a Pair/Set provision is to apply.
46. Insert either or both.
47. Insert either Common Carrier or Commercial Carrier and/or Hotel, as applicable.
48. Insert if all Third Parties are to pay first.
49. Insert if this coverage applies only after parties responsible for the loss have paid.
50. Insert if benefits will not be paid if parties responsible deny the claim or pays it in full.
- 50a. Insert if benefits will not be paid if parties responsible deny the claim because it is excluded under their insurance contract.
51. Insert if the exception to cross reference 50 is to apply.
52. Insert if no benefits are to be paid if the Parties responsible pay in full for the loss.
53. Insert if damaged Baggage is covered.
54. Insert if the Excess Insurance provision is to apply. Do not use if cross reference 49 is used.
55. Insert if this insurance is to be excess of amounts due only from Common Carrier/Commercial Airline and/or hotel or other third parties.
56. Insert if this insurance is to be excess of all other valid and collectible insurance.
57. Insert to limit benefits to amounts excess of Common Carrier, Commercial Airline or Hotel or other parties' liability.
58. Insert to limit Company's liability to excess of other insurance or indemnity.
59. Insert if Baggage is to be defined as suitcases, carryalls or trunks.
60. Insert if Baggage is to be defined as luggage and personal possessions whether owned, borrowed or rented.
61. Insert if sports gear is to be covered.
62. Insert of cross reference(s) 39 and/or 40 is/are used.
63. Insert to define Checked Baggage, if the term is used.
64. Insert if this description is to apply to the definition.
65. Insert if containers must be specifically designed for "carrying personal property".
66. Insert if this description is to apply to the definition.
67. Insert if Carry-on Baggage is covered.
68. Insert whichever term is to apply.
69. Insert if cross reference 62 is used.
70. Each exclusion may be inserted or deleted.
71. Insert if coats packed in Checked Baggage are to be covered.
72. Insert if coats packed in Carry-on Baggage are to be covered.
73. Each cause of loss may be included or deleted.
74. Name and address of Company is bracketed in case of change.
75. Included is a Third Party Administrator may be used.
- 75a. Insert one or the other.
76. Each bracketed item may be included or excluded.
77. Insert to require the Insured Person to protect his or her property from further damage.
78. Insert if hotel coverage is provided.
79. Each item (a) through (j) may be included or deleted.
80. Insert if Common Carrier or Commercial Airline Baggage is covered.
81. Insert if hotel coverage is included.
82. Insert if cross reference 56 is used.
83. Insert to include a dollar threshold above which original receipts are required.
84. Insert of cross reference 56 is used.
85. Insert either term.
86. Insert either time frame.
87. Insert to include subrogation provision.

87a. Insert to include arbitration provision.

Emergency Evacuation [with Family Travel] Benefit Rider – S30603NUFIC-AR

1. Include if Rider issued with Policy.
2. Include if Rider issued after Policy.
3. Include if applicable.
4. Include if there is a Maximum stated in the application.
5. Include if the maximum amount is per cause.
6. Travel Guard is bracketed to allow for future changes in service.
7. Include if Family Travel Benefit is included.
8. Include if spouses are to be included for coverage.
9. Include the defined covered method of travel.
10. Include the covered method of payment for the tickets.
11. The name of the Policyholder may be substituted.
12. Include if Family Travel Benefit is included and the coverage that includes this definition is offered.

Repatriation of Remains Benefit Rider – S30605NUFIC

1. Include if Rider issued with Policy.
2. Include if Rider issued after Policy.
3. Include if applicable.
4. Include if there is a Maximum stated in the application.
5. Travel Guard is bracketed to allow for future changes in service.
6. Included when the Workers Compensation exclusion is deleted from policy.
7. Include the defined covered method of travel.
8. Include the covered method of payment for the tickets.
9. The name of the Policyholder may be substituted.

[Loss][Collision] Damage Coverage Benefit Rider - S30606NUFIC

1. Include if Loss Damage is covered.
2. Include if Collision Damage is covered.
3. Include if the rider is included on the date the policy is effective
- 3a. Include if the rider is added after effective date of policy.
4. Include if this is for trip coverage.
5. Include one or the other.
6. Include if Loss or Collision damage is covered.
7. Include if applicable.
8. Include one of the three options.
9. Include either Actual Cash Value or Current market value.
10. This will be included if value is less depreciation.
11. This will be included if value is less salvage.
12. This will be included if applicable.
13. This will be included or excluded.
14. This will be included if there is a deductible.
15. This will be included if there is a maximum.
16. Qualified be included or excluded.
17. Include one of the two options.
18. Include if rental changes are covered.
19. Include if loss and or collision is covered.
20. Include if this coverage is primary.
21. Include if this coverage is excess.
22. One of the three options will be included.
23. Include if Actual Cash Value is covered.
24. Include if Antique Motor Vehicle is covered.
25. Include if Collision is covered.
26. Include for business cardholder/cardmember
27. Include for another Insured Person.
28. This will be included if applicable.
29. Include for United States and Canada coverage

30. Include if Worldwide is covered.
31. Include if country(s) are excluded.
32. Include list of countries excluded.
33. This sentence is included if Coverage Territory is included.
34. Include if there is a deductible.
35. This dollar amount will vary depending on coverage.
36. This vehicle will be included or excluded.
37. This is included or excluded.
38. This is included if Exotic Vehicles are covered.
39. This definition will be included or excluded depending on coverage.
40. One of the three will be included.
41. This will be included or excluded.
42. This will be included or excluded depending on coverage.
43. This will be included or excluded.
44. Either of these two may be included or excluded depending on coverage.
45. This sentence will be included or excluded depending on coverage.
46. This will be included or excluded.
47. This language will be included or excluded.
48. This exclusion will be included or excluded.
49. These may be included.
50. This will be included or excluded.
51. The number will never be less than the statutory minimum.
52. This language will be included or excluded.
53. These items will be included or excluded.
54. This provision will be in or out depending on coverage.

Blanket Accident Insurance Policy – S30411NUFIC(Rev.7/11)-AR

1. Applies if a Policy is written for a specific term of insurance.
2. Applies if this Policy is renewable.
3. Insert if term applies.
4. Either or may be used.
5. Use if the definition of Insured is to be limited.
6. Use if there is a distinction between the defined term and undefined authorized traveler.
7. Include if covered under Policy.
8. Include if termination is limited to the Policy Anniversary Date.
9. The number of days for notice of termination will vary on a case-by-case basis. However, this number will always comply with the minimum statutory requirements of the state in which the Policy is delivered.
10. This language will be included when both choices (#11 and #12 below) for automatic Policy termination are to be included in the Policy.
11. The reference to a Policy Termination Date will only be included if the Policy is written for a specific term of insurance.
12. The reference to a premium due date will only be included if premium for the Policy is paid on other than a single premium basis.
13. Include if applicable.
14. Included when Policy coverage includes dependent coverage.
15. The premiums can be changed on any one of the dates specified. This will vary on a case-by-case basis.
16. The number of days for notice of premium change will vary on a case-by-case basis. However, this number will always comply with the minimum statutory requirements of the state in which the Policy is delivered.
17. Applies if there is a rate guarantee.
18. The sentence giving the Company the right to change the premiums as a condition of renewal will be included in the Policy at the option of the Company.
19. The number of days of the Grace Period may be increased at the option of the Company by will never be decreased below 31.
20. This language may be included in the Policy at the option of the Company.
21. Included if time period is required between injury and death.
22. Included if Accidental Death is included.
23. Speech and Hearing will be included or excluded.
24. Thumb and index finger of the same hand will be included or excluded.
25. Included or excluded.

26. Included if Accidental Dismemberment is included in the Policy.
27. Exposure and Disappearance will be included or excluded.
28. Included if there is more than one benefit with limitations in Policy.
29. Language will vary based on benefits in Policy.
30. Included if there is more than one Hazard with limitations in Policy.
31. Hazards in policy listed here.
32. Include if an Aggregate Limit applies to Policy.
33. Included or excluded subject to state law.
34. Included or excluded.
35. Include if there is a limit restriction on an Insured's account.
36. Language included or excluded.
37. Exclusion included or excluded.
38. The numbers will never be less than the statutory minimum.
39. The address is bracketed for possible future address changes.
40. The number of days for Claim forms to be sent is bracketed in case of future regulation changes by will never be more than the statutory requirement.
41. This language will be included or excluded to satisfy statutory requirements.
42. This language will appear if the Insured may not assign his or her rights under the Policy.
43. This language will appear if the Insured may assign his or her rights under the Policy.

Master Application for Blanket Accident Insurance Policy – S30412NUFIC

1. The Master Application is considered to be variable in its entirety. It contains sample language for filing purposes.

[Master][Participating Organization] Application for Blanket Accident Insurance Policy – S30413NUFIC-AR

1. The application is considered to be variable in its entirety. It contains sample language for filing purposes. All references to Participating Organization will be included only if coverage under the Policy is available through a Participating Organization.

[Commercial Aircraft][Civilian or Military Aircraft] [(Public Conveyance)] – S30414NUFIC (Rev.4/07)

1. Include whichever term is appropriate.
2. Include all that apply.

[Trip Cancellation/Interruption][Airline Bankruptcy] Benefit Rider – S30434NUFIC

1. Include if Trip Cancellation/Interruption is included.
2. Include if Airline Bankruptcy is included.
3. Include if Rider is issued with Policy.
4. Include if Rider is issued after Policy.
5. Include if Immediate Family Member is covered.
6. Include if Trip Cancellation is included.
7. Include if Trip Interruption is included.
8. Include if Special Notification of Claims applies.
9. Include if Exclusions is to be amended in the Policy.
10. Include whichever term applies.

SERFF Tracking Number: MCHX-G127813842 State: Arkansas
 Filing Company: National Union Fire Insurance Company of Pittsburgh, PA State Tracking Number: 50246
 Company Tracking Number: S30406NUFIC-AR
 TOI: H04 Health - Blanket Accident/Sickness Sub-TOI: H04.000 Health - Blanket Accident/Sickness
 Product Name: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA
 Project Name/Number: S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA /S30406NUFIC (Rev. 7/11) Blanket Accident - National Union Fire Insurance Company of Pittsburgh, PA

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
11/11/2011	Form	B-9 [Loss] [Collision] Damage Coverage Benefit Rider	11/21/2011	S30606NUFIC.PDF (Superseded)

NATIONAL UNION FIRE INSURANCE COMPANY OF PITTSBURGH, PA.

Executive Offices: 175 Water Street, 18th Floor, New York, NY 10038

(212) 458-5000

(a capital stock company, herein referred to as the Company)

Policyholder: _____

Policy Number _____

BENEFIT B-9

[LOSS][COLLISION] DAMAGE COVERAGE BENEFIT RIDER

This Rider is attached to and made part of the Policy [as of the Policy Effective Date shown in the Policy's Master Application][effective [Month Day, Year]]. It applies only with respect to [Trips that occur][a covered loss] on or after that date.] It is subject to all of the provisions, limitations and exclusions of the Policy except as they are specifically modified by this Rider. See the Principal Sums, Hazards, Benefits and other Riders and Endorsements for Insured Persons section of the Master Application for the applicability of this Rider with respect to each class of Insured Persons and each Hazard.

[Loss][Collision] Damage Coverage. If [while on a Trip,] the Insured Person:

- (a) rents a Vehicle from a Rental Agency; and
- (b) rejects any waiver of liability for [damage or loss][Collision] available from the Rental Agency at the time of the rental;[and
- (c) has the entire rental fee for the Vehicle charged or debited to the Insured's Account;] and

while the Vehicle is in his or her possession and during the Coverage Period [, and in the Coverage Territory(ies),] the Vehicle sustains [Collision damage][, or] [damage or loss due to direct and accidental loss] [or] [the Vehicle is stolen], the Company will pay on [an Actual Cash Value basis][a current market value basis] [less [depreciation][and][salvage]]] the lesser of:

- (a) the cost of repairs of the Vehicle; or
- (b) the cost to replace the Vehicle [with a vehicle of like kind and quality];

[minus any salvage obtained for the Vehicle or for its parts] subject to [the Deductible][and] [the Maximum] shown in the Master Application. In no event will the Company be liable beyond the amounts actually paid either by the Insured Person or the Rental Agency.

[[Loss][Collision] Damage Coverage also includes towing to the nearest [[qualified] collision repair facility] [or] [storage facility][and] [Rental Charges imposed by the rental Agency while the Vehicle is being repaired or replaced].]

For coverage to apply, the Insured Person must be a licensed driver and be listed on the Rental Agreement.

[This coverage is primary to other forms of insurance or indemnity.]

[This coverage is excess to any other valid or collectible insurance or any other form of reimbursement payable by those responsible for the loss.]

DEFINITIONS:

As used in this Rider:

[Actual Cash Value] means [purchase price][the cost to repair or replace the Vehicle] less depreciation [and salvage].]

[Antique Motor Vehicle(s)] means any vehicle over 25 years old, or any vehicle which has not been manufactured for 10 years or more.]

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Collision means the direct and accidental damage to a Vehicle caused by upset or collision with another object. **Collision** does not include loss caused by missiles, falling objects, fire, theft or larceny, explosion, earthquake, windstorm, hail, water, flood, malicious mischief or vandalism, riot or civil commotion.]

Coverage Period means [the period of time from the date the Insured Person picks up the Vehicle to the earlier of the date the Vehicle is returned to the Rental Agency or the return date stated in the Rental Agreement, not to exceed[:

- (a) [45] consecutive days [in the case of a business Cardholder/Cardmember of a Corporate Cardholder]; or,
- (b) [31] consecutive days [in the case of any other Insured Person]. [;

from the same Rental Agency, regardless of whether the original Rental Agreement is extended, or a new Rental Agreement is entered into, or a new Vehicle is rented].

Coverage Territory means [the United States and Canada][worldwide]. [However, Coverage Territory does not include the following countries/states: [Insert Countries/states]]]

Deductible means the dollar amount the Insured Person must pay before a benefit becomes payable under this Rider. The Company will not reimburse any amount paid as the Deductible.]

Exotic Vehicle(s) means any vehicle with an original manufacturer's suggested retail price greater than [\$50,000] and Antique Motor Vehicles, including but not limited to: [Alfa Romeo; Aston Martin; Auburn; Avanti; Bentley; Bertone; BMC/Leyland; BMW M Series; Bradley; Bricklin; Cosworth; Citroen; Clenet; De Lorean; Excalibre; Ferrari; Fiat; Iso; Jaguar; Jensen; Jensen Healy; Lamborghini; Lancia; Lotus; Maserati; MG; Morgan; Opel; Pantera; Panther; Pininfarina; Rolls Royce; Stutz; Sterling; Triumph; TVR and Yugo]. [The Insured [Person] must contact [XYZ customer service at 1-800-xxx-xxxx] before renting to confirm whether the vehicle is covered.]]

High Value Motor Vehicles(s) mean motor vehicles whose replacement value exceeds \$[50,000].]

Limited Editions Motor Vehicle means a High Value Motor Vehicle, an Exotic Vehicle, high performance or collector type vehicle.]

Rental Agency means a commercial automobile rental agency licensed under the laws of the applicable jurisdiction. [When membership rewards redemption certificates are used, Rental Agencies are limited to [Hertz, National and Budget].]

Rental Agreement means the contract signed by the Insured Person whereby the Insured Person agrees to rent a vehicle from a Rental Agency for a specific period of time.

Rental Charges means the unavailability of a Vehicle and consequent loss of revenue by the Rental Agency due to damage to [or theft of] the Vehicle. Unless otherwise required by law, the Rental Agency must submit a fleet utilization log indicating that during such time: 1) no other Vehicle was available; and 2) there was a demand for such Vehicle.]

Vehicle means a four-wheeled two axle private passenger type motor vehicle or a mini-van [or] [compact] sport utility vehicle] manufactured and designed to transport a maximum of seven passengers and used exclusively to carry passengers. A Vehicle must be designed for and used to travel on public roads and rented from a Rental Agency. [A Vehicle does not include a leased or mini-leased vehicle.]

EXCLUSIONS:

[Coverage is not provided [, in whole or in part,] for any loss due to:

- (a) war or act of war, whether declared or not [, civil commotion, insurrection or riot][confiscation [or damage] by [any [government, public] authority] [authorities][or customs official,][invasion, terrorism, rebellion, military action]];
- (b) intentional damage to the Vehicle by the Insured Person;
- (c) participation in contests of speed [,motor sport or motor racing including training or practice for the same];
- (d) any unlawful acts [or activity][, committed by the Insured Person [or Immediate Family Member whether insured or not]];
- (e) risks of contraband;
- (f) commission or attempt to commit a [felony or misdemeanor][crime]][any dishonest or fraudulent act or criminal act];
- (g) driving under the influence of alcohol[as defined by the jurisdiction in which the loss occurred];
- (h) [driving while][being] under the influence of drugs or intoxicants, unless prescribed by a Physician;
- (i) reckless driving;
- (j) any obligation the Insured Person assumes under any agreement [except an insurance collision deductible];
- (k) [rentals of trucks, pick-ups, cargo vans, custom vans, campers, trailers, off-road or four wheel drive vehicles, motor bikes, motorcycles, mopeds, motorbikes, golf or motorized carts, recreational vehicles, limousines, mini-buses, Limited Edition Motor Vehicles, Antique Motor Vehicles, or Exotic Vehicles;]
- (l) violation of the Rental Agreement;
- (m) failure to report the loss to the proper local authorities and the Rental Agency;
- (n) nuclear reaction or radioactive contamination;
- (o) costs attributed to the Rental Agency's normal course of doing business;
- (p) [mechanical failures caused by] wear and tear, including gradual deterioration, or mechanical breakdown;
- (q) Theft of or damage to unlocked or unsecured vehicles;
- (r) damage which is due and confined to wear and tear, freezing, mechanical or electrical breakdown or failure, unless such damage results from a theft covered by this Rider;
- (s) pre-existing damage or defect;
- (t) damage to tires [unless damaged by fire, malicious mischief or vandalism, or stolen][or] unless the loss is coincident with a covered loss;
- (u) damage sustained on any surface other than a paved road or bound surface such as concrete or tarmac;
- (v) use of the Vehicle for [commercial purposes or] to carry passengers or property for hire;
- (w) use of the Vehicle by a person other than one authorized to operate the Vehicle by the terms of the Rental Agreement;
- (x) [loss of use of the Vehicle;]
- (y) subsequent damages resulting from a failure to protect the Vehicle from further damage;
- (z) damage to any other vehicle, structure or person as a result of a covered loss;
- (aa) rentals of full-sized vans [mounted on truck chassis][, including but not limited to Ford Econoline or Club Wagon, Chevy Van or Sportvan, GMC Vandura and Rally, Dodge Ram Vans and Ram Wagon].
- (bb) rentals of vehicles which have been customized or modified from the manufacturer's factory specifications except for driver's assistance equipment for the physically challenged.
- (cc) rentals of full sized sport utility vehicles[, including but not limited to, Chevrolet/GMC Suburban, Tahoe and Yukon, Ford Expedition, Lincoln Navigator, Toyota Land Cruiser, Lexus LX450, Range Rover or full-sized Ford Bronco].
- (dd) rentals of sport utility trucks (vehicles that have been or can be converted to an open, flat-bed truck)[, including but not limited to Chevy Avalanche, BMC Envoy and Cadillac Escalade EXT].].

[Coverage is not provided [, in whole or in part,] and benefits will not be paid for:

- (a) sales tax related to repair of damages, unless reimbursement of such sales tax is required by law;
- (b) any personal item stolen from the interior or exterior of the Vehicle;
- (c) expenses assumed, waived or paid for by the Rental Agency or its insurer;

- (d) [expenses covered by the Insured Person's personal auto insurer, employer or employer's insurer, or Authorized Driver's insurer;]
- (e) value added tax or similar tax, unless reimbursement of such tax is required by law;
- (f) diminishment of value;
- (g) administrative or other fees charged by the Rental Agency; and
- (h) depreciation, unless reimbursement for depreciation is required by law.]

THE CLAIMS PROVISIONS OF THE POLICY ARE DELETED WITH RESPECT TO THIS RIDER AND REPLACED BY THE FOLLOWING PROVISIONS:

Misrepresentation and Fraud. Coverage of the Insured Person will be void if, at any time, the Insured Person has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Insured Person relating to this coverage. Coverage for an Insured Person will be void if, whether before or after a loss, the Policyholder has concealed or misrepresented any material fact or circumstance concerning this coverage or the interest of the Insured Person in this coverage, or in the case of any fraud or false swearing by the Policyholder relating to this coverage.

Notice of Claim. Written notice of claim must be given to the Company within [45] days after an Insured Person's loss, or as soon thereafter as reasonably possible. Notice given by or on behalf of the claimant to the Company at CHARTIS, Accident & Health Claims Department, P.O. Box 25987, Shawnee Mission, KS 66225-5987 with information sufficient to identify the Insured Person, is deemed notice to the Company.

In the event of a loss, the Insured Person must:

- a. take all reasonable, necessary steps to protect the Vehicle and prevent further loss or damage to it;
- b. report the damage or loss within 24 hours to the appropriate local authorities and to the Rental Agency;
- c. obtain all information on any other party involved in an "accident," such as name, address, insurance information and driver's license number;
- d. cooperate with the Company in the investigation, settlement or handling of any claims;
- e. permit the Company to question the Insured Person under oath whenever the Company's investigation deems it necessary. All statements taken will be signed by the Insured Person; and
- f. authorize the Company to obtain records or reports necessary to the Company's investigation.

Claim Forms. The Company will send claim forms to the claimant upon receipt of a written notice of claim. If such forms are not sent within [15] days after the giving of notice, the claimant will be deemed to have met the proof of loss requirements upon submitting, within the time fixed in this Policy for filing proof of loss, written proof covering the occurrence, the character and the extent of the loss for which claim is made. The notice should include the Insured's name, the Policyholder's name and the Policy number.

Proof of Loss. Written proof of loss must be furnished to the Company within [45] days after the date of the loss. Failure to furnish proof within the time required neither invalidates nor reduces any claim if it was not reasonably possible to give proof within such time, provided such proof is furnished as soon as reasonably possible and in no event, except in the absence of legal capacity of the claimant, later than one year from the time proof is otherwise required. The Insured must submit[:

- (a) a copy of the Account statement [and charge slip] showing the Vehicle rental transaction;
- (b) a copy of the Rental Agreement;
- (c) a copy of the police report;
- (d) a copy of the initial loss report submitted to the Rental Agency;
- (e) damage estimate as soon as reasonably possible
- (f) an itemized repair bill [from a factory-authorized collision repair facility];
- (g) photos of the damaged Vehicle, if available;

- (h) a copy of the driver's license of the Insured [Person] and/or Authorized Driver, unless the driver's license number shows on the rental agreement;
- (i) a copy of the Rental Agency's [location class-specific fleet] utilization log, if Rental Charges are being claimed.
- (j) a copy of the paid claim presented by the Rental Agency for the damage or loss for which the Insured Person is responsible;
- (k) proof of submission of the loss to, and the results of any settlement or denial by the applicable insurance carrier(s); and
- (l) if no other valid or collectible insurance is applicable, a notarized statement from the Insured Person to that effect.]

If the Insured Person fails to cooperate, or fails to send the Company any of the requested documentation, the Company reserves the right to refuse any further protection for the accident.

Payment and Time of Payment of Claims. Reimbursement for covered loss or damage will be paid to either the Insured Person or the Rental Agency within [60] days after the Company receives Proof of Loss.

Benefit to Bailee. This insurance will in no way inure directly or indirectly to the benefit of any insurer, person, organization or other bailee.

[Subrogation. To the extent the Company pays for a covered loss of an Insured Person, the Company will take over the rights and remedies the Insured Person has relating to the loss. This is known as subrogation. The Insured Person must help the Company preserve its rights against those responsible for the loss. This may involve signing any papers and taking any other steps the Company may reasonably require. If the Company takes over an Insured Person's rights, the Insured Person must sign an appropriate subrogation form supplied by the Company.

As a condition to receiving the applicable benefits listed above, as they pertain to this Subrogation provision, the Insured Person agrees, except as may be limited or prohibited by applicable law, to reimburse the Company for any such benefits paid to or on behalf of the Insured Person, if such benefits are recovered, in any form, from any third party or coverage.]

The President and Secretary of the National Union Fire Insurance Company of Pittsburgh, Pa. witness this Rider.



President



Secretary