

RBC® AVION® VISA INFINITE PRIVILEGE<sup>+</sup>  
FOR PRIVATE BANKING  
CERTIFICATE OF INSURANCE

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**IMPORTANT — PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.



# OUT OF PROVINCE/ COUNTRY EMERGENCY MEDICAL INSURANCE CERTIFICATE OF INSURANCE

## INTRODUCTION

RBC Insurance Company of Canada (the “Insurer”) has issued group insurance policy U-1014451-A to Royal Bank of Canada (“Royal Bank”) to cover emergency medical expenses incurred by *covered persons* while outside their Canadian province or territory of residence. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of this group insurance policy.

## WHAT SHOULD YOU DO IN A MEDICAL EMERGENCY?

If *you* have a *medical emergency*, *you* must call Assured Assistance Inc. (“Assured Assistance”) **before *you* receive *emergency treatment***. Of course, if *your medical condition* prevents *you* from calling, we understand – *you* must call as soon as medically possible or, as an alternative, someone else may call on *your* behalf (relative, friend, nurse or doctor).

If *you* do not call Assured Assistance or if *you* choose to seek care from a non-approved medical service provider, *you* will be responsible for a portion of *your* medical expenses as outlined under “Limitations of coverage”.

Assured Assistance can be contacted by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

## IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that *you* read and understand *your* insurance before *you* travel as *your* coverage may be subject to certain limitations or exclusions.
- A pre-existing exclusion applies to *medical conditions* and/or symptoms that existed prior to *your trip*. Check to see how this applies in *your* Certificate of Insurance and how it relates to *your departure date*, date of purchase, or effective date.
- In the event of an accident, injury or sickness, *your* prior medical history may be reviewed when a claim is reported.
- *Your* insurance provides travel assistance. *You* are required to notify Assured Assistance prior to receiving *emergency treatment*. *Your* insurance limits benefits should *you* not contact Assured Assistance immediately.

## HELPFUL INFORMATION ABOUT OUT OF PROVINCE/ COUNTRY EMERGENCY MEDICAL INSURANCE

- Coverage is provided for the first thirty-one (31) consecutive days of *your trip* if *you* are under 65 years of age, or for the first seven (7) consecutive days of *your trip* if *you* are 65 years of age or older.
- *Top-up* coverage is available if *you* are travelling for more than thirty-one (31) consecutive days and *you* are under 65 years of age or if *you* are travelling for more than seven (7) consecutive days and *you* are 65 years of age or older. Please call the Enrollment Centre at 1-800-565-3129 for further information.
- Remember to call Assured Assistance before *you* receive *emergency treatment*. Of course, if *your medical condition* prevents *you* from calling, we understand – *you* must call as soon as medically possible or, as an alternative, someone else may call on *your* behalf (relative, friend, nurse or doctor).

- Refer to the “What is not covered?” section for a complete description of all exclusions before *you* travel.
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking card, to whom a card has been issued and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Change in medication** means the addition of any new *prescription drug*, the withdrawal of any *prescription drug*, an increase in the dose of any *prescription drug*, or a decrease in the dose of any *prescription drug*.

Exceptions:

- an adjustment in the dosage of insulin or Coumadin (warfarin), if *you* are currently taking these drugs;
- a change from a brand name drug to an equivalent generic drug of the same dosage.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant*, and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Covered person** means any of the following persons who have a valid *government health insurance plan*: the *applicant*, the *applicant’s spouse*, and/or the *applicant’s dependent child* who travels with or joins the *applicant* and/or the *applicant’s spouse* on the same *trip*. An *additional cardholder* is a *covered person* in his/her own right. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance, unless they are otherwise covered as described above (the *applicant*, the *applicant’s spouse*, and/or the *applicant’s dependent child* who travels with or joins the *applicant* and/or the *applicant’s spouse* on the same *trip*).

**Departure point** means the province or territory *you* depart from on the first day of *your* intended *trip*.

**Dependent child (or dependent children)** means an unmarried, natural, adopted, step or foster child, or legal ward of the *applicant* who is covered under a *government health insurance plan* and is:

- under twenty-one (21) years of age, or
- under twenty-six (26) years of age if a full-time student, or
- mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Emergency treatment** means any treatment, surgery or medication that:

- is required for the immediate relief of an acute symptom; or
- upon the advice of a *physician* cannot be delayed until *you* return to Canada, and has to be received during *your trip* because *your medical condition* prevents *you* from returning to Canada.

The *emergency treatment* must be ordered by or received from a *physician* or received in a *hospital* during *your trip*.

**Government health insurance plan** means the health insurance coverage that Canadian provincial and territorial governments provide for their residents.

**Hospital** means an establishment that is licensed as an accredited *hospital*, is operated for the care and treatment of in-patients, has a registered nurse always on duty, and has a laboratory and an operating room on the premises or in facilities controlled by the establishment. *Hospital* does not mean any establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, convalescent, rest or nursing home, home for the aged, health spa or addiction treatment centre.

**Medical condition** means accidental bodily injury or sickness (or a condition related to that accidental bodily injury or sickness), including disease, acute psychoses and complications of pregnancy occurring within the first thirty-one (31) weeks of pregnancy.

**Medical emergency** means any unexpected or unforeseen sickness or bodily injury that occurs during the period of coverage and makes it necessary for *you* to receive immediate treatment from a *physician* or to be hospitalized.

**Mental or emotional disorders** means emotional or anxiety states, situational crisis, anxiety or panic attacks, or other mental health disorders treated with minor tranquilizers or anti-anxiety (anxiolytic) medication.

**Mountain climbing** means the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Physician** means someone who is not *you* or a member of *your family* who is licensed to prescribe drugs and administer medical treatment (within the scope of such license) at the location where the treatment is provided. A *physician* does not include a naturopath, herbalist, homeopath or chiropractor.

**Prescription drugs** means drugs and medicines that can only be issued upon the prescription of a *physician* or dentist and are dispensed by a licensed pharmacist.

**Spouse** means the person who is legally married to *you*, or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

**Stable** means any *medical condition* or related condition (including any heart condition or any lung condition) for which there have been:

- no new treatment, new medical management or new prescribed medication; and
- no change in treatment, change in medical management or *change in medication*; and
- no new symptom or finding, more frequent symptom or finding, or more severe symptom or finding experienced; and
- no new test results or tests showing a deterioration; and
- no investigations or future investigations initiated, or recommended for *your symptoms*; and
- no hospitalization or referral to a specialist (made or recommended) ,

**Top-up** means the coverage *you* purchase from the Enrollment Centre to extend *your* coverage beyond the maximum duration of the first thirty-one (31) consecutive days if *you* are under 65 years of age or the first seven (7) consecutive days if *you* are 65 years of age or older.

**Trip** means travel outside *your* Canadian province or territory of residence up to a maximum duration of the first thirty-one (31) consecutive days if *you* are under the age of 65 or seven (7) consecutive days if *you* are 65 years of age or older.

## WHEN DOES COVERAGE BEGIN AND END?

This insurance coverage begins whenever *you* leave *your departure point*.

*You* will be covered for the first:

- Thirty-one (31) consecutive days of a trip, including the date you leave on your trip and the date you return from your trip, if you are under 65 years of age.

- Seven (7) consecutive days of a trip, including the date you leave on your trip and the date you return from your trip, if you are 65 years of age or older.

Coverage ends, individually for the *applicant* and each *additional cardholder*, at the earliest of:

1. The date *you* have been absent for more than thirty-one (31) consecutive days from *your* province or territory of residence if *you* are under 65 years of age or the date *you* have been absent for more than seven (7) consecutive days from *your* province or territory of residence if *you* are 65 years of age or older; (Note: Coverage for the *applicant's spouse* and the *applicant's dependent child* changes to seven (7) consecutive days when the *applicant* turns the age of 65, unless they are also an *additional cardholder*); or
2. The date *you* return to *your* province or territory of residence; or
3. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled; or
4. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due; or
5. The date the group insurance policy is cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to travel arrangements charged to *your* RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policy.

## WHEN DOES YOUR COVERAGE AUTOMATICALLY EXTEND?

Coverage automatically extends beyond the thirty-one (31) /seven (7)-day limit as follows:

1. When *you* are hospitalized due to a *medical emergency* beyond the thirty-one (31) /seven (7)-day limit, *your* coverage will remain in force during *your* hospitalization and up to five (5) days following *your* discharge from *hospital*.
2. Coverage is automatically extended for up to five (5) days when *you* must delay *your* return beyond the thirty-one (31) /seven (7)-day limit due to a *medical emergency*.
3. Coverage is automatically extended for up to seventy-two (72) hours when the delay of a plane, bus, ship or train in which *you* are a passenger causes *your trip* to extend beyond the thirty-one (31) /seven (7)-day limit.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

This insurance covers reasonable and customary expenses, in excess of any medical expenses payable by *your government health insurance plan* or any other insurance plan, for *emergency treatment* medically required during *your trip* as a result of a *medical emergency*. Unless otherwise noted in this Certificate of Insurance, the maximum benefit for *Emergency* medical insurance is unlimited.

### 1. **Hospital and medical expenses**

Covers the cost of *emergency treatments*, including *hospital*, surgical and medical treatment. Eligible expenses include the following when ordered by a *physician* during *your trip*:

- *hospital* room and board, up to semi-private or the equivalent,
- treatment by a *physician* and/or surgeon,
- out-patient *hospital* charges,
- x-rays and other diagnostic tests,
- use of an operating room, intensive care unit, anaesthesia and surgical dressings,
- *prescription drugs* except when *you* need them to continue to stabilize a chronic *medical condition* or a condition which *you* had before *your trip*,
- local ground ambulance service (or local taxi fare in lieu) to a *hospital*, *physician* or medical service provider in case of a *medical emergency*,
- the lesser of the rental or purchase of a *hospital-type* bed, a wheelchair, brace, crutches and other medical appliances, and

- the cost for the professional services of a registered private nurse while *you* are hospitalized, to a maximum of \$10,000, when these services are recommended by a *physician* and approved in advance through Assured Assistance.

## 2. Emergency dental expenses

Covers the cost of the following dental expenses when ordered by and received from a licensed dentist:

- the repair or replacement of natural teeth or permanently attached artificial teeth required as the result of an accidental injury to the mouth during *your trip*, to a maximum of \$2,000. Dental treatment must be received within ninety (90) days of the injury.
- treatment during *your trip*, for the emergency relief of dental pain, to a maximum of \$200.

## 3. Other emergency services

Covers the cost for professional services of a physiotherapist, chiropractor, osteopath, chiropodist or podiatrist to a maximum of \$250 per *covered person* per profession, when ordered by a *physician* during *your trip*.

## 4. Emergency air transportation or evacuation

Covers the cost of the following, when medically required and approved in advance and arranged through Assured Assistance:

- the extra cost of one-way economy airfare on a commercial flight by the most direct route to the point of departure, to receive immediate emergency medical attention; or
- a stretcher fare on a commercial flight by the most direct route to *your departure point*, if a stretcher is medically necessary; and
- return economy airfare on a commercial flight and the usual fees and expenses for a qualified medical attendant to accompany *you*, when the attendant is medically necessary or required by the airline; or
- air ambulance transportation if it is medically essential.

## 5. Return of deceased

Covers:

- the return of *your* remains in the common carrier's standard transportation container to *your departure point*, and up to \$5,000 for the preparation of *your* remains and the cost of the common carrier's standard transportation container; or
- the return of *your* remains to *your departure point*, and up to \$5,000 for the cremation of *your* remains where *your* death occurred; or
- up to \$5,000 for the preparation of *your* remains and the cost of a standard burial container, and up to \$5,000 for the burial of *your* remains where *your* death occurred.

If someone is legally required to identify *your* remains, this insurance covers the cost of round-trip economy class transportation by the most cost-effective route and up to \$300 for meal and hotel accommodation expenses for that person. That person is covered under the terms of *your* insurance during the period in which he or she is required to identify *your* remains but for no longer than three (3) business days.

## 6. Additional hotel and meal expenses

Covers the cost of up to \$150 per day, to a maximum of \$1,500, for meal and commercial accommodation expenses *you* have incurred after the date *you* are scheduled to return to the *departure point*, when *your* return is delayed due to *your medical emergency* or when *you* are relocated to receive *emergency treatment*.

## 7. Bringing relative to bedside

Covers the cost of round-trip economy class transportation by the most cost-effective route, to have a relative visit *you* when *you* are hospitalized during *your trip*. However, if *you* are under age twenty-one (21), or age twenty-one (21) and over and physically handicapped and dependent on *your* bedside companion for support, this insurance provides this benefit to *you* as soon as *you* are admitted to a *hospital*. That person is entitled to a

maximum of \$300 for meal and hotel accommodation expenses and is covered under the terms of *your* insurance during the period in which he or she is required at *your* bedside. The visit must be approved in advance through Assured Assistance.

#### 8. **Return of vehicle**

Covers the reasonable costs for a commercial agency, when arranged and approved through Assured Assistance, to return a vehicle to *your* residence or to a commercial *rental agency*, when *you* are unable to return the vehicle due to a *medical emergency*. The vehicle can be a private passenger automobile, self-propelled mobile home, camper truck, trailer home, or motorcycle that *you* own or rent and which *you* use during *your trip*.

#### 9. **Return of dependent child or dependent children**

If a *dependent child* or *dependent children* insured under *your* insurance travel with or join *you* during *your trip*, and *you* are hospitalized for more than twenty-four (24) hours, or *you* must return to Canada because of *your medical emergency* covered under this insurance, this insurance covers, when arranged and approved through Assured Assistance, the extra cost of one-way economy transportation by the most cost-effective route to the *dependent children's departure point* and the cost of return economy transportation for an escort, when an escort is deemed necessary by the carrier.

#### 10 **Return of your excess baggage**

If *you* return to *your departure point* by air ambulance (pre-authorized by Assured Assistance) because of *your medical emergency*, this insurance covers the cost to return *your* excess baggage up to a maximum of \$500, when medically required and approved in advance and arranged through Assured Assistance.

## LIMITATIONS OF COVERAGE

If *you* do not call Assured Assistance before *you* seek *emergency treatment*, or if *you* choose to seek care from a non-approved medical service provider, *you* will be responsible for 20% of *your* medical expenses covered under this insurance and not recovered from *your government health insurance plan*, to a maximum of \$25,000. If, after reimbursement by *your government health insurance plan*, *your* claim exceeds \$25,000, this insurance will pay 100% of any covered expenses over and above \$25,000.

Should *your medical condition* prevent *you* from calling Assured Assistance before seeking *emergency treatment*, *you* must call as soon as medically possible or someone else may call on *your* behalf.

## WHAT IS NOT COVERED?

### PRE-EXISTING MEDICAL CONDITION EXCLUSIONS

If *you* are under 75 years of age, this insurance does not pay for any expenses incurred directly or indirectly as a result of:

1. *Your medical condition* or related condition (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *you* depart on *your trip*, *your medical condition* or related condition has not been *stable*.
2. *Your* heart condition (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *you* depart on *your trip*:
  - a. any heart condition has not been *stable*; or
  - b. *you* have taken nitroglycerin more than once per week specifically for the relief of angina pain.
3. *Your* lung condition (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *you* depart on *your trip*:
  - a. any lung condition has not been *stable*; or
  - b. *you* have been treated with home oxygen or taken oral steroids (prednisone or prednisolone) for any lung condition.



If *you* are 75 years of age or older, this insurance does not pay for any expenses incurred directly or indirectly as a result of:

1. *Your medical condition* or related condition (whether or not the diagnosis has been determined), if at any time in the one hundred and eighty (180) days before *you* depart on *your trip*, *your medical condition* or related condition has not been *stable*.
2. *Your heart condition* (whether or not the diagnosis has been determined), if at any time in the one hundred and eighty (180) days before *you* depart on *your trip*:
  - a. any heart condition has not been *stable*; or
  - b. *you* have taken nitroglycerin more than once per week specifically for the relief of angina pain.
3. *Your lung condition* (whether or not the diagnosis has been determined), if at any time in the one hundred and eighty (180) days before *you* depart on *your trip*:
  - a. any lung condition has not been *stable*; or
  - b. *you* have been treated with home oxygen or taken oral steroids (prednisone or prednisolone) for any lung condition.

### GENERAL EXCLUSIONS

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. *Any medical condition* for which:
  - *you* are awaiting the outcome of medical tests, the results of which show any irregularities or abnormalities, or
  - future investigation or treatment (except routine monitoring) is planned before *your trip*.
2. The continued treatment, investigation, recurrence or complication of a *medical condition* following *emergency treatment* for that *medical condition* during *your trip* if the medical advisors of Assured Assistance determine that *you* were medically able to return to *your* province or territory of residence and *you* chose not to return.
3. The treatment of any heart or lung condition following *emergency treatment* for a related or unrelated heart or lung condition during *your trip* if the medical advisors of Assured Assistance determine that *you* were medically able to return to *your* province or territory of residence and *you* chose not to return.
4. *Any treatment* that is not *emergency treatment*.
5. Routine care of a chronic condition.
6. *Any medical condition* for which it was reasonable, prior to departure, to expect treatment or hospitalization during *your trip*.
7. Symptoms which would have caused an ordinarily prudent person to seek treatment or medication in the ninety (90) days before *your trip*.
8. *Your medical emergency* or related *medical condition*, if the reason for *your medical emergency* or related *medical condition* is associated in any way with a written formal travel warning issued before *your* effective date by the Department of Foreign Affairs and International Trade of the Canadian Government, advising Canadians not to travel to the country, region or city of *your trip*.
9. Any portion of the benefits that require prior authorization and arrangement by Assured Assistance if such benefits were not pre-authorized and arranged by Assured Assistance.
10. Invasive testing or surgery (including cardiac catheterization and MRI) unless approved by Assured Assistance prior to being performed.
11. *Any medical condition* if *you* undertake *your trip* with the prior knowledge that *you* will require or seek treatment, surgery, investigations, palliative care or alternative therapy of any kind, regardless of whether the treatment, surgery, investigations, palliative care or alternative therapy is related in any way to the *medical condition*.

12. The following:
  - a. routine pre-natal care, or
  - b. complications of pregnancy occurring within nine (9) weeks before or after the expected date of delivery, or
  - c. complications of childbirth occurring within nine (9) weeks before or after the expected date of delivery.
13. Any child born during the *trip*.
14. *Your* participation as a professional in sports, participation as a professional in underwater activities, scuba diving as an amateur unless *you* hold a basic scuba designation from a certified school or other licensing body, participation in a motorized race or motorized speed contest, bungee jumping, parachuting, rock climbing, *mountain climbing*, hang-gliding or skydiving.
15. *Your* committing or attempting to commit a criminal offence.
16. *Your* intentional self-inflicted injury, suicide or attempted suicide (whether sane or insane).
17. *Your mental or emotional disorders*.
18. Any *medical condition*, arising from, or in any way related to, *your* chronic use of alcohol or drugs whether prior to or during *your trip*.
19. *Your* abuse of medication, drugs or alcohol or deliberate non-compliance with prescribed medical therapy or treatment whether prior to or during *your trip*.
20. Act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder.
21. Treatment or surgery for a *medical condition*, or a related condition, which had caused *your physician* to advise *you* not to travel.
22. Any *medical condition* if the medical advisors of Assured Assistance recommend that *you* return to *your* country of residence following *emergency treatment* *you* have received, and *you* chose not to return.
23. Ionizing radiation or radioactive contamination from any nuclear fuel or waste that results from the burning of nuclear fuels; or the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.

## **WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?**

If *you* call Assured Assistance at the time of the *medical emergency* as shown under “What should *you* do in a *medical emergency*?” *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date *emergency treatment* or other expenses were first incurred.

For *your* claim to be reviewed, *you* must submit the following information:

- The completed claim form. Please contact the Claims Centre to obtain a claim form. (Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada.),
- Originals of all bills, invoices and receipts from the service provider(s),
- Any required *government health insurance plan* form,
- Proof of any payment(s) or denial(s) made by other insurance plan(s), and
- A complete diagnosis from the *physician(s)* and/or *hospital(s)* that provided the treatment, including, where applicable, written verification from the *physician* who treated *you* during *your trip* that the expenses were medically necessary.

Submission of claims must be made to the Claims Centre:

**RBC Insurance Company of Canada**  
**Claims Centre**  
**PO Box 97, Station A**  
**Mississauga, ON L5A 2Y9**  
**1-866-426-7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the *emergency treatment* or other expenses were first incurred. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year or *your* claim will not be reviewed.

The Claims Centre will notify *you* of the decision on *your* claim within sixty (60) days of receiving all of the required information.

## **OTHER CLAIM INFORMATION**

During the processing of a claim, the Insurer may require *you* to undergo a medical examination by one or more *physicians* selected by the Insurer and at the Insurer's expense.

*You* agree that the Insurer and its agents have:

- a. *Your* consent to verify *your* health card number and other information required to process *your* claim, with the relevant government and other authorities;
- b. *Your* authorization to physicians, hospitals and other medical providers to provide to us, Assured Assistance and the Claims Centre, any and all information they have regarding *you*, while under observation or treatment, including *your* medical history, diagnoses and test results; and
- c. *Your* agreement to disclose any of the information available under a) and b) above to other sources, as may be required for the processing of *your* claim for benefits obtainable from other sources.

After the Insurer pays *your* health care provider or reimburses *you* for covered expenses, it will seek reimbursement from *your* *government health insurance plan* and any other medical insurance plan under which *you* may have coverage. *You* may not claim or receive in total more than 100% of *your* total covered expenses or the actual expenses which *you* incurred, and *you* must repay to us any amount paid or authorized by the Insurer on *your* behalf if and when the Insurer determines that the amount was not payable under the terms of *your* policy.

If *you* are retired and *your* former employer provides to *you* under an extended health insurance plan, a lifetime maximum coverage of:

- \$50,000 or less, we will not co-ordinate payment with such coverage;
- more than \$50,000, we will co-ordinate payment with such coverage only in excess of \$50,000.

If *you* are actively employed and *your* current employer provides to *you* under a group health plan, a lifetime maximum coverage of:

- \$50,000 or less, we will not co-ordinate payment with such coverage;
- more than \$50,000, we will co-ordinate payment with such coverage only in excess of \$50,000.

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

## **WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

1. This insurance is classified as supplemental or excess, in that it covers expenses in excess of expenses payable by any other insurance plan.
2. When *you* contact Assured Assistance, they will, on the Insurer's behalf, refer *you* or may transfer *you*, when medically appropriate, to one of their recommended medical service providers. They will also request that the approved medical service provider bill the medical expenses covered under this insurance directly to the Insurer instead of to *you*.

3. If *you* are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to *you* by all insurers cannot exceed the actual expense that *you* have incurred. We will coordinate the payment of benefits with all insurers from whom *you* are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.
4. If *you* incur expenses covered under this insurance due to the fault and/or negligence of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party. Where a third party is involved, an accident report is required before any claim payments can be made.
5. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.
6. The Insurer, Customer Service Representatives/Coordinators of Assured Assistance and the Claims Centre, Royal Bank and their agents are not responsible for the availability, quality or results of medical treatment or transportation, or *your* failure to obtain medical treatment.
7. This Certificate of Insurance is the entire contract between *you* and the Insurer and is subject to the Insurance Companies Act of Canada and any governing provincial statutes concerning contracts of accident insurance.
8. The Insurer may, at its discretion, void this contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
9. **This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.**
10. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
11. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

## TRAVEL ACCIDENT INSURANCE CERTIFICATE OF INSURANCE

### INTRODUCTION

RBC Insurance Company of Canada (the “Insurer”) has issued group insurance policy F-2035807-A to Royal Bank of Canada (“Royal Bank”) to cover the *loss* from an *injury* as a result of an *accident* incurred by *covered persons* on a *common carrier* while travelling outside their Canadian province or territory of residence. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of this group insurance policy. This Certificate of Insurance replaces any prior Certificate of Insurance that may have been provided to *you* in connection with this coverage.

### HOW TO OBTAIN ASSISTANCE SERVICES

If *you* require assistance or have questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

## IMPORTANT NOTICE – PLEASE READ CAREFULLY

Travel Accident Insurance is designed to cover *losses* arising from sudden and unforeseeable circumstances. It is important that *you* read and understand *your* insurance before *you* travel as *your* coverage may be subject to certain limitations or exclusions.

## HELPFUL INFORMATION

- The Travel Accident Insurance covers *you* in the event of an accidental bodily *injury* resulting in a *loss*, including death, while travelling on a *common carrier*, for up to \$500,000 CAD.
- Please consult the list of specific *losses* covered under the “Specific *loss* indemnity” section herein.
- *You* are covered for *trips* taken outside *your* province or territory of residence.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Accident** means a sudden and unforeseen event due to an external cause and resulting, directly and independently of any other cause, in any bodily *injury* or death.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Alternate transportation** means the transportation offered to *you* when the *common carrier* providing the transportation for *your* covered *trip* is delayed or re-routed, requiring the transportation company which would have operated such *common carrier* to arrange for such *alternate transportation*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder of an RBC credit card, to whom a card has been issued and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC credit card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC credit card as the *co-applicant*, and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Common carrier** means any *passenger plane*, land, or water conveyance (other than a rental vehicle or cruise ship) for regularly scheduled *passenger* service, which is licensed to transport passengers for compensation or hire and also includes any *alternate transportation*. *Common carrier* does not include any such conveyance that is hired, chartered or used for a sport, gamesmanship, contest, sightseeing, observatory and/or recreational activity, regardless of whether or not such conveyance is licensed. Taxis or limousines are excluded from this definition except in the specific case as outlined in “What is Covered” section 2.

**Contamination** means the poisoning of people by nuclear, chemical and/or biological substances which causes illness and/or death.

**Covered person** means the *applicant*, the *applicant’s spouse*, and/or the *applicant’s dependent child* who travels with or joins the *applicant* and/or the *applicant’s spouse* on the same *trip*. An *additional cardholder* is a *covered person* in his/her own right. The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance, unless they are otherwise covered as described above (the *applicant*, the *applicant’s spouse*, and/or the *applicant’s dependent child* who travels with or joins the *applicant* or the *applicant’s spouse* on the same *trip*). A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. All *covered persons* must be *permanent residents* of Canada.

**Dependent child** means an unmarried, natural, adopted, step or foster child, or legal ward of the *applicant* who resides with the *applicant* and who is:

- Under twenty-one (21) years of age; or

- Under twenty-six (26) years of age if he/she is a full-time student; or
- Mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Family member(s)** means *your spouse, a dependent child, parents, stepparents, grandparents, grandchildren, in-laws, brothers, sisters, stepbrothers and stepsisters.*

**Hospital** means an establishment that is licensed as an accredited *hospital*, is operated for the care and treatment of in-patients, has a registered nurse always on duty, and has a laboratory and an operating room on the premises or in facilities controlled by the establishment. *Hospital* does not mean any establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, convalescent, rest or nursing home, home for the aged, health spa or addiction treatment centre.

**Injury or Injuries** means a bodily *injury*, certified by a *physician*, resulting in a *loss* caused to *you* by an *accident* occurring on a *trip*.

**Loss or losses** means *loss* of life or the total and irrevocable *loss* of use of one or more of the following of limb(s)/organ(s), as follows:

- *loss* of a hand or a foot means the total and irrevocable *loss* of use including the wrist joint and the ankle joint;
- with regard to eyes, total and irrecoverable *loss* of sight;
- with regard to a leg or an arm, the total and irrevocable *loss* of use through or above the knee or elbow joint;
- *loss* of a thumb and index finger means the total and irrevocable *loss* of use, including all phalanges, but excluding the *loss* of the hand or foot;
- with regard to speech and hearing, total and irrecoverable *loss*;
- *loss* of a finger or a toe means the total and irrevocable *loss* of use, including all phalanges, but excluding the *loss* of the hand or foot;
- with regard to paralysis (quadriplegia, paraplegia, hemiplegia), *loss* must result in the complete and irreversible paralysis of such limbs.

**Passenger** means a *covered person* riding onboard a *common carrier*. The definition of *passenger* does not include a person acting as a pilot, operator or crew member.

**Passenger plane** – a certified multi-engine transportation aircraft provided by a regularly scheduled airline on any regularly scheduled *trip* operated between licensed airports and holding a valid Canadian Air Transport Board or Charter Air Carrier licence, or its foreign equivalent, and operated by a certified pilot.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Physician** means someone who is not *you* or a *family member* who is licensed to prescribe drugs and administer medical treatment (within the scope of such license) at the location where the treatment is provided. A *physician* does not include a naturopath, herbalist, homeopath or chiropractor.

**Spouse** means the person who is legally married to *you*, or has been living in a conjugal relationship with *you* and who has been residing in the same household as *you* for a continuous period of at least one (1) year.

**Terrorism or act of Terrorism** means an act, including but not limited to the use of force or violence and/or the threat thereof, including hijacking or kidnapping, of an individual or group in order to intimidate or terrorize any government, group, association or the general public, for religious, political or ideological reasons or ends, and does not include any act of war (whether declared or not), act of foreign enemies or rebellion.

**Trip** means travel outside *your* Canadian province or territory of residence on a *common carrier*, the fare for which is paid in full on the RBC credit card and/or RBC Rewards® points.

## WHEN DOES COVERAGE BEGIN AND END?

This Certificate of Insurance provides coverage whenever *you* have paid for *your trip* on a *common carrier* with *your* RBC credit card and/or RBC Rewards points, prior to any *injury* resulting in any *loss* for which a claim is made under this Policy. If only a partial payment was made with RBC Rewards points, the balance must have been paid with *your* RBC credit card for this Certificate of Insurance to be effective.

Coverage begins on the date *you* leave *your* province or territory of residence on *your trip*.

Coverage ends, individually for each *applicant* and *additional cardholder(s)*, at the earliest of:

1. The date *your* RBC credit card account is cancelled; or
2. The date *your* RBC credit card account is sixty (60) days past due; or
3. The date the Policy is cancelled by the Insurer or Royal Bank. However, such termination of coverage shall not apply to fares charged to *your* account prior to the termination date of the Policy; or
4. The date when coverage is no longer in force as described in the section "What is Covered and What are the Benefits?".

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

### WHAT IS COVERED?

When *you* have paid for the full transportation fare for *your trip* with your RBC credit card and/or RBC Rewards points prior to commencing *your trip*, this Certificate of Insurance provides a benefit for any *injury* sustained by *you* as a result of an accident which occurs during *your trip* while *you* are:

1. Travelling as a *passenger* in, on, boarding or disembarking from the *common carrier* which is providing the transportation or *alternate transportation* for *your trip*;
2. Travelling as a *passenger* in, on, boarding or disembarking from the *common carrier* which is providing the transportation or *alternate transportation*, including complementary transportation for this situation only, directly to or from a terminal, station, pier or airport either:
  - a) Immediately preceding a scheduled departure of the *common carrier* during *your trip*;  
or
  - b) Immediately following a scheduled arrival of the *common carrier* during *your trip*;
3. Travelling as a *passenger* in the terminal, station, pier or airport prior to or after boarding or disembarking from a *common carrier* which is providing the transportation or *alternate transportation* to *you* as a *passenger*.

### WHAT ARE THE BENEFITS?

#### A. SPECIFIC LOSS INDEMNITY

When a *covered person* suffers an *injury* resulting in any of the following *losses* within three hundred and sixty-five (365) days of the date of the *accident*, the Insurer will pay the following maximum amount for:

<b>Loss of:</b>	<b>Indemnity:</b>
Life	\$500,000
Both hands or both feet	\$500,000
Total sight in both eyes	\$500,000
One hand and one foot	\$500,000
One hand or one foot and total sight in one eye	\$500,000
Speech and hearing	\$500,000
One leg or one arm	\$375,000

One hand or one foot	\$333,300
Speech or hearing	\$333,300
Total sight in one eye	\$333,300
Thumb and index finger of the same hand	\$166,650
One finger or one toe	\$50,000
<b>Loss of use of:</b>	<b>Indemnity:</b>
Both upper and lower limbs (quadriplegia)	\$500,000
Both lower limbs (paraplegia)	\$500,000
Upper and lower limbs of one side of the body (hemiplegia)	\$500,000

## B. REHABILITATION

When *injuries* result in a payment being made under the “Specific loss indemnity” section above (Benefit A), an additional amount would be payable to *you* by the Insurer as follows:

The reasonable and necessary expenses *you* actually incurred, up to a limit of \$2,500, for special training provided:

- a. such training is required because of such *injuries*, and in order for *you* to be qualified to engage in an occupation in which *you* would not have been engaged except for such *injuries*; and
- b. expenses are incurred within two (2) years from the date of the *accident*.

No payment will be made for ordinary living, travelling or clothing expenses.

## C. FAMILY TRANSPORTATION

When *you* are confined as an inpatient in a *hospital* for *injuries* that result in a payable *loss* under the Policy and *you* require the personal attendance of a *family member* as recommended by the attending *physician*, or where due to *your* accidental death, the attendance of a *family member* is required, the Insurer will pay for the expenses incurred by the *family member* for transportation to *you* by the most direct route by a *common carrier*, but not to exceed an amount of \$1,000.

## WHAT IS NOT COVERED

### EXCLUSIONS

The Policy does not cover any *loss*, fatal or non-fatal, caused by or related to:

1. *Your* intentional self-inflicted *injuries*, suicide or attempted suicide while sane or insane;
2. War (declared or not), an act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder;
3. The commission of a criminal act or direct or indirect attempt to commit a criminal act by *you* or *your* beneficiary, whether or not *you* have been charged;
4. *Your* active full-time service in the armed forces of any country or participation in any military manoeuvre or training exercise;
5. Riding onboard a *common carrier* with a status other than *passenger*;
6. Any *accident* arising from, or in any way related to, *your* chronic use or abuse of alcohol or drugs, including prescription or illegal drugs, or deliberate non-compliance with prescribed medical therapy or treatment whether prior to or during *your trip*;
7. Sickness or disease, even if the cause of its activation or reactivation is an *accident*;
8. Ionising radiation or radioactive *contamination* from any nuclear fuel or waste which results from the burning of nuclear fuels; or, the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it;



9. Contamination due to any act of terrorism;

10. Terrorism.

## LIMITATIONS

1. If, as a result of an *accident*, you sustain *injuries* resulting in multiple *losses*, the maximum indemnity the Insurer will pay to you for all your *losses* will equal the highest indemnity amount for one (1) of your *losses* and will not exceed \$500,000.
2. Indemnity will not be paid while you are in a coma.
3. When your death or loss occurs more than fifty-two (52) weeks after the *accident*, unless you are in a coma at the end of that period; the Insurer will determine which benefits you are entitled to, if applicable, when you regain consciousness.

## WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?

If you call Assured Assistance at the time of the *loss* as shown under “How to Obtain Assistance,” you will receive the necessary claims assistance.

If you do not call Assured Assistance, you must notify the Claims Centre of your claim within thirty (30) days of the date of the *loss* at the following toll-free number:

**RBC Insurance Claims Center: 1-866-426-7494**

The Claims Center will then send you the document(s) you will need to fill out in order to submit a claim and indicate to you which additional document(s) or information is also required for your claim to be reviewed.

**(Please Note:** a legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada.)

In certain circumstances, the Insurer may require that you fill out a consent form in order to give:

- a. your consent to verify your health card number and other information required to process your claim, with the relevant government and other authorities;
- b. your authorization to physicians, hospitals and other medical providers to provide the Insurer any and all information they have regarding you, while under observation or treatment, including your medical history, diagnoses and test results; and
- c. your agreement to disclose any of the information available under a) and b) above to other sources, as may be required for the processing of your claim for benefits obtainable from other sources.

Submission of claims and all required documents/information must be sent to:

**RBC Insurance Company of Canada**

**Claims Centre**

**PO Box 97, Station A**

**Mississauga, ON L5A 2Y9**

**1-866-426-7494**

You must submit the information required for your claim within ninety (90) days of the date of the *loss*. If it is not reasonably possible to provide such information within ninety (90) days, you must do so within one (1) year of the *loss* or your claim will not be reviewed.

The Claims Center will notify you of the decision on your claim within sixty (60) days of receiving all of the required information.

## OTHER CLAIM INFORMATION

### EXAMINATION AND AUTOPSY

The Insurer, at its own expense, shall have the right and opportunity to examine the person of any *covered person* whose *injury* is the basis of a claim hereunder when and so often as it may reasonably require during pendency of a claim hereunder, and also the right and opportunity to make an autopsy in case of death where it is not forbidden by law.

## PAYMENT OF CLAIMS

Benefits for *loss of your life* will be paid to *your* designated beneficiary(ies) (as further described below). Benefits for all other covered *losses* sustained by *you* will be paid to *you*, if living, otherwise to *your* designated beneficiary(ies). If more than one (1) beneficiary is designated and the beneficiaries' respective percentage of policy distribution is not specified, the designated beneficiaries shall share equally. If no beneficiary has been designated, or if the designated beneficiary does not survive *you*, the benefits will be paid to *your* estate.

## BENEFICIARY

Under this Certificate of Insurance, *you* may designate a beneficiary or change a previously designated beneficiary. No one else but *you* may designate or change a previously designated beneficiary. For such designation or change to become effective, *you* must complete a form entitled "Designation, Revocation or Addition of Beneficiary(ies)" and submit it to the Insurer. **You can obtain this form at your convenience from our website at [www.rbcinsurance.com/cardsbeneficiaryform](http://www.rbcinsurance.com/cardsbeneficiaryform).** To obtain a paper copy by mail, please call RBC Insurance Company of Canada at 1-866-774-2878 toll-free from the US & Canada, or (905) 816-2584 collect from anywhere in the world. Such designation or change shall take effect as of the date the form was signed by *you*, but no earlier than June 1, 2013. Any payment made by the Insurer prior to the receipt of such designation or change shall fully discharge the Insurer to the extent of such payment.

## LEGAL ACTIONS

No action at law or in equity shall be brought to recover on the Policy prior to the expiration of sixty (60) days after the written proof of *loss* has been furnished in accordance with the section "What to do if *you* have a claim" above. No such action shall be brought after the expiration of three (3) years from the decision on *your* claim by the Insurer.

## WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?

1. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.
2. Any amount payable to a minor will be paid to the minor's legal ward.
3. If *your* body has not been found within one (1) year of the disappearance, sinking, or wrecking of the *common carrier* in which *you* were riding at the time of the *accident*, it will be presumed that *you* have suffered *loss of life* resulting from a bodily *injury* caused by an *accident* at the time of such disappearance, sinking or wrecking.
4. If *you* incur *losses* covered under this Certificate of Insurance due to the fault of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party. Where a third party is involved, an *accident* report is required before any claim payments can be made.
5. This Certificate of Insurance is the entire contract between *you* and the Insurer and is subject to the statutory conditions of the Insurance Companies Act of Canada and any governing provincial statutes concerning contracts of *accident* insurance.
6. The Insurer may, at its discretion, void this Certificate of Insurance in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
7. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
8. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

This Certificate of Insurance replaces any prior Certificate of Insurance that may have been provided to *you* in connection with the Policy.

## AUTO RENTAL COLLISION/LOSS DAMAGE INSURANCE CERTIFICATE OF INSURANCE

**IMPORTANT – PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.

### INTRODUCTION

Aviva General Insurance Company (referred to in this Certificate as the “Insurer”) has issued group insurance policy F-2000375-A to Royal Bank of Canada (“Royal Bank”) to cover expenses related to Auto Rental Collision/Loss or Damage. All *covered persons* are clients of the Insurer.

### HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have questions about *your* coverage, call:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

### HELPFUL INFORMATION ABOUT AUTO RENTAL COLLISION/LOSS DAMAGE INSURANCE

- This Certificate of Insurance does **not** cover third party liability coverage. Check with *your* personal automobile insurer and the *rental agency* to ensure that *you* and all other drivers have adequate third party liability, personal injury and damage to property coverage.
- This insurance is effective when the full cost of *your* rental vehicle issued by a *rental agency* is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards® points. If only a partial payment is made using RBC Rewards points, the entire balance of that rental vehicle must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.
- The length of time *you* rent the same vehicle must not exceed forty-eight (48) consecutive days, which shall follow one immediately after the other. In order to break the consecutive day cycle, a full calendar date must exist between rental periods. Coverage may not be extended for more than forty-eight (48) consecutive days by renewing or taking out a new rental agreement with the same or another *rental agency* for the same vehicle or another vehicle.
- If the *covered person* does not decline the *rental agency's* CDW option or its equivalent, this Certificate of Insurance is secondary coverage and will cover the deductible amount in the event of a claim.
- Most vehicles are covered by this Certificate of Insurance, but there are some exclusions. (A list of vehicles excluded from this coverage is outlined in the section “What is not covered?”).
- Coverage is available except where prohibited by law.
- Check the rental vehicle carefully for scratches or dents before and after *you* drive the vehicle. Be sure to point out where the scratches or dents are located to a *rental agency* representative.
- If the vehicle has sustained damage of any kind, call 1-866-774-2878 (in Canada or the United States) or 905-816-2584 (collect) immediately.
- Do not sign a blank sales draft to cover the damage and *loss of use* charges or a sales draft with an estimated cost of repair and *loss of use* charges. The rental agent may make a claim on *your* behalf to recover repair and *loss of use* charges by following the procedures outlined in the section “What should *you* do if *you* have a claim?”

- Claims must be reported within forty-eight (48) hours of the loss/damage occurring by calling 1-866-774-2878 (when in Canada or the United States) or 905-816-2584 (collect).
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking card, to whom a card has been issued and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Car sharing** means a car rental club that gives its members twenty-four (24)-hour access to a fleet of cars parked in a convenient location.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant*, and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Covered person** means:

1. The *applicant* or *additional cardholder*, who presents in person at the *rental agency*, signs the rental contract and takes possession of the rental vehicle. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”.
2. Any other person who drives the same rental vehicle with *your* permission whether or not such person has been listed on the rental vehicle contract or has been identified to the *rental agency* at the time of making the rental. However, *you* and all drivers must otherwise qualify under and follow the terms of the rental contract and must be legally licensed and permitted to drive the rental vehicle under the laws of the jurisdiction in which the rental vehicle shall be used.

**Loss of use** means the amount paid to a *rental agency* to compensate it when a rental vehicle is unavailable for rental while undergoing repairs for damage incurred during the rental period.

**Mini-van** means a van made by an automobile manufacturer and classified by the manufacturer or a government authority as a *mini-van* made to transport a maximum of eight (8) people including the driver and which are used exclusively for the transportation of passengers and their luggage.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Rental agency** (or **rental agencies**) means a vehicle *rental agency* licensed to rent vehicles and which provides a rental agreement. For greater certainty, throughout this Certificate of Insurance, the terms ‘rental company’ and ‘rental agency’ refer to both traditional vehicle *rental agencies* and *car sharing* programs.

**Rental agency’s CDW** means an optional Collision Damage Waiver (“CDW”) or similar waiver offered by rental companies and *rental agencies* that relieves renters of financial responsibility if the vehicle is damaged or stolen while under rental contract. The *rental agency’s CDW* is **not** insurance.

**Tax-free car** means a *tax-free car* package that provides tourists with a short-term (seventeen (17) days to six (6) months) tax-free vehicle lease agreement with a guaranteed buyback. The Insurer **will not** provide coverage for *tax-free* cars.

## WHEN DOES COVERAGE BEGIN AND END?

Upon taking possession of the rental vehicle, coverage begins when:

1. You use *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points to pay for the entire cost of the rental from a *rental agency*.
  - If only a partial payment is made using RBC Rewards points, the entire balance of that rental must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.
2. You decline the *rental agency's* CDW option or similar coverage offered by the *rental agency* on the rental contract. If there is no space on the vehicle rental contract for you to indicate that you have declined the coverage, then indicate in writing on the contract "I decline CDW provided by this merchant". (Note: If you decide to purchase the *rental agency's* CDW option or similar coverage, then this Certificate of Insurance will only cover your deductible in the event of a claim provided all terms and conditions of this coverage are met.)

Coverage ends individually, for each *covered person*, on the earliest of:

1. The date and time the *rental agency* reassumes control of the rental vehicle;
2. The date upon which *your* rental period exceeds forty-eight (48) consecutive days or *your* rental period is extended for more than forty-eight (48) consecutive days by renewing or taking out a new rental agreement with the same or another *rental agency* for the same vehicle or other vehicles;
3. The date the group insurance policy is cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to travel arrangements charged to *your* RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policy;
4. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due;
5. The date *your* RBC Avion Visa Infinite Privilege for Private Banking card is cancelled or card privileges are otherwise terminated;
6. The date Royal Bank receives written notice from you that you choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking card.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

When you pay for the entire cost of the rental vehicle using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points, this Certificate of Insurance covers you and/or a *rental agency* for loss/damages up to the actual cash value of the damaged or stolen rental vehicle, as well as valid *rental agency* towing and *loss of use* charges when the conditions described in this Certificate of Insurance are met.

This insurance coverage is available on a twenty-four (24)-hour basis unless precluded by law or the coverage is in violation of the terms of the rental contract in the jurisdiction in which it was formed (other than under "What is not covered?" #8 (a), (b) or (c).

This coverage is primary insurance, except in the following circumstances:

- if the *covered person* decides to purchase the *rental agency's* CDW option or its equivalent; or
- in such circumstances where the applicable government insurance legislation states otherwise.

The following types of rental vehicles are covered:

All cars, sport utility vehicles, and *mini-vans* except those listed in the section "What is not covered?"

Also,

- Rental vehicles that are part of prepaid travel packages are also covered if the total package was paid by *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;

- You are covered if you receive a “free rental” as a result of a promotion where you have had to make previous vehicle rentals and if each such previous rental was entirely paid for with your RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;
- You are covered if you receive a “free rental” day(s) as a result of an RBC Rewards program for the number of days of free rental. If the free rental day(s) are combined with rental days for which you pay the negotiated rate, this entire balance must be paid with your RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points.

## **WHAT IS NOT COVERED?**

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. A replacement vehicle for which your personal automobile insurance is covering all or part of the cost of the rental;
2. Third party liability (which means you injure someone else or damage their property in a motor vehicle *accident*);
3. Your personal injury;
4. Damage to property, (except the rental vehicle itself or its equipment);
5. The operation of the rental vehicle at any time during which any *covered person* is driving while intoxicated or under the influence of any narcotic;
6. Any dishonest, fraudulent or criminal act committed by any *covered person*;
7. Wear and tear, gradual deterioration, or mechanical or electrical breakdown or failure, inherent vice or damage, insects or vermin;
8. Operation of the rental vehicle in violation of the terms of the rental agreement except:
  - a. *covered persons* as defined, may operate the rental vehicle;
  - b. the rental vehicle may be driven on publicly maintained gravel roads;
  - c. the rental vehicle may be driven across provincial and state boundaries in Canada and the U.S. and between Canada and the U.S.
9. Seizure or destruction under a quarantine or customs regulations or confiscated by order government or public authority;
10. Transportation of contraband or illegal trade;
11. War, hostile or warlike action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combating or defending against such action;
12. Transportation of property or passengers for hire;
13. Nuclear reaction, nuclear radiation, or radioactive contamination;
14. Intentional damage to the rental vehicle by a *covered person*;
15. Expenses due to diminished value of the rental vehicle.

**The following vehicles are NOT covered:**

1. Vans, cargo vans or mini cargo vans (other than *mini-vans*);
2. Trucks, pick-up trucks or any vehicle that can be spontaneously reconfigured into a pick-up truck);
3. Limousines;
4. Off-road vehicles – meaning any vehicle used on roads that are not publicly maintained roads unless used to ingress and egress private property;
5. Motorcycles, mopeds or motor bikes;
6. Trailers, campers, recreational vehicles or vehicles not licensed for road use;
7. Vehicles towing or propelling trailers or any other object;
8. Mini-buses or buses;

9. Any vehicle with a Manufacturer's Suggested Retail Price (MSRP) excluding all taxes, over eighty-five thousand dollars Canadian (\$85,000 CDN);
10. Exotic vehicles, meaning vehicles such as Aston Martin, Bentley, Bricklin, Daimler, DeLorean, Excalibur, Ferrari, Jensen, Lamborghini, Lotus, Maserati, Porsche, Rolls Royce;
11. Any vehicle which is either wholly or in part hand made, hand finished or has a limited production of under 2,500 vehicles per year;
12. Antique vehicles, meaning a vehicle over twenty (20) years old or which has not been manufactured for ten (10) years or more; and
13. *Tax-free cars.*

Luxury vehicles, including but not limited to BMW, Cadillac, Lincoln and Mercedes Benz are covered as long as they meet the above requirements.

## **WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?**

**In the event of loss/damage to *your* rental vehicle**, call 1-866-774-2878 (toll-free) **within forty-eight (48) hours** if *you* are in Canada or the United States or 905-816-2584 (collect). The representative will answer *your* questions and send *you* a claim form.

- Decide with the rental agent who will make the claim. (Please note: *You* must notify the *rental agency* and obtain consent prior to completing any repairs on *your* own.
- **If the rental agent decides to settle the claim directly**, complete the *accident* report claim form and assign the right for the *rental agency* to make the claim on *your* behalf on the claim form or other authorized forms. It is important to note that *you* remain responsible for the loss/damage and that *you* may be contacted in the future to answer inquiries resulting from the claims process. The rental agent may fax the required documentation toll-free if they are in Canada or the United States to 1-866-804-2228. Elsewhere the fax number is (905) 813-4791 (collect). Original documentation may also be required in some instances. (If *you* have any questions, are having any difficulties, or would like the claims administrator to be involved immediately, call the number provided above).
- **If *you* will be making the claim**, *you* must call the claims administrator within forty-eight (48) hours of the loss/damage having occurred. *Your* claim must be submitted with as much documentation as possible, as requested below, within forty-five (45) days of discovering the loss/damage. *You* will need to provide all documentation within ninety (90) days of the date of loss or damage to the claims administrator at the address provided below.
- For *your* claim to be reviewed, *you* must submit the following original documentation, as applicable:
  - the claim form, completed and signed;
  - *your* RBC Visa statement and/or receipt showing that the rental was paid in full with *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;
  - a copy of *your* invoice showing all prepaid expenses (prepaid rental car payment);
  - a copy of *your* receipt showing amount of RBC Rewards points redeemed;
  - a copy of *your* previous rental agreements resulting in a free rental;
  - the original copy of both sides of the vehicle rental agreement;
  - the *accident* or damage report, including photographs of the damage;
  - the itemized repair bill, or if not available, a copy of the estimate;
  - receipt for paid repairs;
  - the police report, when available;
  - a copy of *your* billing or pre-billing statement if any repair charges were billed to *your* account; and
  - a copy of *your* paid statement or billing indicating the deductible amount (if *you* have purchased the *rental agency's* CDW or similar coverage).

Forward this documentation to:

**Aviva General Insurance Company**  
**Attention: RBC Visa Claims**  
**PO Box 6, Station A**  
**Mississauga, ON L5A 2Y9**

Under normal circumstances, the claim will be reviewed within fifteen (15) days after the claims administrator has received all necessary documentation. If the claim cannot be assessed on the basis of the information that has been provided, it may be closed.

After the Insurer has paid *your* claim, *your* rights and recoveries will be transferred to the Insurer to the extent of the Insurer's payment for the loss/damage incurred when the rental vehicle was under *your* responsibility. This means the Insurer will then be entitled, at its own expense, to sue another party in *your* name. If the Insurer chooses to sue another party in *your* name, *you* must give the Insurer all the assistance the Insurer may reasonably require to secure its rights and remedies. This may include providing *your* signature on all necessary documents that enable the Insurer to sue in *your* name.

Once *you* report loss or damage, a claim file will be opened and will remain open for six (6) months from the date of the loss, or damage. Payment will only be made on a claim or any part of a claim that is completely substantiated as required by the claims administrator within six (6) months of the date of loss/damage.

*You* should use due diligence and do all things necessary to avoid or reduce any loss or damage to property protected by this Auto Rental Collision/Loss Damage Insurance.

#### **OTHER CLAIM INFORMATION**

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

### **WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

1. *Your* RBC Avion Visa Infinite Privilege for Private Banking account must be open and in good standing during the rental period.
2. Only the *covered person* may rent a vehicle and may decide to decline the *rental agency's* CDW or an equivalent alternative coverage offering. This coverage applies only to the *covered person's* personal and business use of the rental vehicle.
3. Coverage is limited to one (1) rental vehicle at a time; i.e. if during the same period there is more than one (1) vehicle rented by the *covered person*, only the first rental will be eligible for these benefits.
4. If *you* make a claim knowing it to be false or fraudulent in any respect, *you* will not be entitled to the benefits of this protection, nor to the payment of any claim made under this Certificate of Insurance.
5. The Insurer may, at its discretion, void this insurance contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
6. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
7. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.



# TRIP CANCELLATION/TRIP INTERRUPTION INSURANCE CERTIFICATE OF INSURANCE

**IMPORTANT - PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.

## INTRODUCTION

RBC Insurance Company of Canada (the “Insurer”) has issued group insurance policy U-1014452-A to Royal Bank of Canada (“Royal Bank”) to cover expenses related to Trip Cancellation, and group insurance policy U-1014453-A to Royal Bank to cover expenses related to Trip Interruption. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of these group insurance policies.

## HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

Trip Cancellation/Trip Interruption Insurance will reimburse only the *cancellation penalties* in effect at the time of the cause of cancellation or interruption.

- When the cause of cancellation occurs before the scheduled departure from the *departure point*, and while coverage is in effect, *you* must cancel *your trip* through *your* travel agent, airline, tour company, carrier or travel authority immediately, but no later than the next business day following the cause of cancellation. *You* must also call Assured Assistance immediately.
- When *you* are forced to interrupt or discontinue *your trip* due to one of the covered reasons, and while coverage is in effect, *you* must call Assured Assistance immediately.

## IMPORTANT NOTICE – PLEASE READ CAREFULLY

- Travel insurance is designed to cover losses arising from sudden and unforeseeable circumstances. It is important that *you* read and understand *your* insurance before *you* travel as *your* coverage may be subject to certain limitations or exclusions.
- A pre-existing exclusion applies to *medical conditions* and/or symptoms that existed prior to *your effective date*. Check to see how this applies in *your* insurance and how it relates to *your effective date*.
- In the event of an accident, injury or sickness, *your* prior medical history may be reviewed when a claim is reported.

## HELPFUL INFORMATION ABOUT TRIP CANCELLATION/TRIP INTERRUPTION INSURANCE

- The maximum amount covered under the Trip Cancellation Insurance for each *covered person* is \$2,500 per *trip*.
- The maximum amount covered under the Trip Cancellation Insurance for a *dependent child* aged 16-25 travelling on their own is \$2,500 per *trip*.
- The maximum amount covered under the Trip Cancellation Insurance for each *additional cardholder* is \$2,500 per *trip*.
- The maximum amount covered under the Trip Interruption Insurance for each *covered person* is \$5,000 per *trip*.

- If you need to top-up *your* RBC Royal Bank credit card coverage beyond the maximum amount offered on *your* card, contact the Enrollment Center at 1-800-565-3129 (toll free from USA or Canada) or 905-816-2577 (collect call from anywhere).
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking card, to whom a card has been issued and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Cancellation penalties** means the amount forfeited under the terms and conditions of the applicable travel arrangements when *your trip* is cancelled, and for which there will be no form of compensation. The travel arrangements must be paid with *your* RBC Avion Visa Infinite Privilege for Private Banking and/or equivalent RBC Rewards® points.

**Change in medication** means the addition of any new *prescription drug*, the withdrawal of any *prescription drug*, an increase in the dose of any *prescription drug*, or a decrease in the dose of any *prescription drug*.

Exceptions:

- an adjustment in the dosage of insulin or Coumadin (warfarin), if *you* are currently taking these drugs;
- a change from a brand name drug to an equivalent generic drug of the same dosage.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant*, and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Common carrier** means any land, air or water conveyance for regular passenger service, which is licensed to transport passengers for compensation or hire.

**Covered person** means the *applicant*, the *applicant's spouse*, or the *applicant's dependent child* who travels with or joins the *applicant* or the *applicant's spouse* on the same *trip*. Note: *Dependent children* 16 - 25 years of age are eligible for this insurance when travelling without the *applicant* or the *applicant's spouse*. An *additional cardholder* is a *covered person* in his/her own right. A *covered person* may be referred to as "*you*" or "*your*" or "*yourself*". The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance.

**Departure date** means the date of *your* departure from *your departure point*.

**Departure point** means the province or territory *you* depart from on the first day of *your* intended *trip*.

**Dependent child** means an unmarried, natural, adopted, step or foster child, or legal ward of the *applicant*, who is:

- under twenty-one (21) years of age, or
- under twenty-six (26) years of age if a full-time student, or
- mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Effective date** means the date and time of purchase of prepaid travel, accommodations and recreation arrangements and before any *cancellation penalties* have been incurred, provided *you* pay the entire cost with *your* RBC Avion Visa Infinite Privilege for Private Banking and/or RBC Rewards points.

**Emergency** means any unexpected or unforeseen sickness or bodily injury that occurs during the period of coverage and makes it necessary for *you* to receive immediate treatment from a *physician* or to be hospitalized.

**Family** means *your spouse*, parent, step-parent, grandparent, grandchild, in-law, natural or adopted child, step-child, brother, sister, step-brother step-sister, legal guardian, or legal ward.

**Hospital** means an establishment that is licensed as an accredited *hospital*, is operated for the care and treatment of in-patients, has a registered nurse always on duty, and has a laboratory and an operating room on the premises or in facilities controlled by the establishment. *Hospital* does not mean any establishment used mainly as a clinic, extended or palliative care facility, rehabilitation facility, convalescent, rest or nursing home, home for the aged, health spa or addiction treatment centre.

**Key employee** means an employee whose continued presence is critical to the ongoing affairs of the business during *your* absence.

**Medical condition** means accidental bodily injury or sickness (or a condition related to that accidental bodily injury or sickness), including disease, acute psychoses and complications of pregnancy occurring within the first thirty-one (31) weeks of pregnancy.

**Mental or emotional disorders** means emotional or anxiety states, situational crisis, anxiety or panic attacks, or other mental health disorders treated with minor tranquilizers or anti-anxiety (anxiolytics) medication.

**Mountain climbing** means the ascent or descent of a mountain requiring the use of specialized equipment, including crampons, pick-axes, anchors, bolts, carabiners and lead-rope or top-rope anchoring equipment.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Physician** means someone who is not *you* or a member of *your family* who is licensed to prescribe drugs and administer medical treatment (within the scope of such license) at the location where the treatment is provided. A *physician* does not include a naturopath, herbalist, homeopath or chiropractor.

**Prescription drug** means drugs and medicines that can only be issued upon the prescription of a *physician* or dentist and are dispensed by a licensed pharmacist.

**Return date** means the date and time on which *you* are scheduled to return to *your departure point*.

**Spouse** means the person who is legally married to *you*, or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

**Stable** means any *medical condition* or related condition (including any heart condition or any lung condition) for which there has been:

- no new treatment, new medical management or new prescribed medication; and
- no change in treatment, change in medical management or *change in medication*; and
- no new symptom or finding, more frequent symptom or finding or more severe symptom or finding experienced; and
- no new test results or tests showing a deterioration; and
- no investigations or future investigations initiated, or recommended for *your* symptoms; and
- no hospitalization or referral to a specialist (made or recommended).

**Travelling companion** means the person who is sharing travel arrangements with *you*, to a maximum of three (3) persons.

**Trip** means the period of time from *your departure date* up to and including *your* scheduled *return date*, as shown on *your* travel documents.

## WHEN DOES COVERAGE BEGIN AND END?

This insurance provides coverage whenever prepaid travel, accommodations and recreation arrangements are paid with *your* RBC Avion Visa Infinite Privilege for Private Banking and/ or RBC Rewards points, and before any *cancellation penalties* have been incurred. If only a partial payment is made using RBC Rewards points, the entire balance of the prepaid travel, accommodations and recreations arrangements must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.

Coverage starts on *your effective date*.

Coverage ends, individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. Midnight of *your return date*;
2. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled;
3. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due; or
4. The date the group insurance policy or policies are cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to travel arrangements charged to *your* RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policy or policies.

## WHAT ARE THE SUMS INSURED?

Under **Trip Cancellation Insurance** (when the covered reason occurs BEFORE *your trip*), the maximum amount of coverage per *trip* for:

- a. Each *covered person* is \$2,500.
- b. A *dependant child* aged 16-25 travelling without the *applicant* or the *applicant's spouse* is \$2,500.
- c. Each *additional cardholder* is \$2,500.

Note: If the *applicant's spouse* or the *applicant's dependent child* is also an *additional cardholder*, the maximum sum insured for this *covered person* is the amount listed for an *additional cardholder*.

Under **Trip Interruption Insurance** (when the covered reason occurs DURING *your trip*), or Trip Delay (when the covered reason occurs during *your trip* and results in *your* being delayed beyond *your* scheduled *return date* from returning to *your departure point*), the maximum amount payable for each *covered person* is \$5,000.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

What are <i>you</i> covered for?		What are the benefits?	
Covered Reasons:		Under Trip Cancellation	Under Trip Interruption & Trip Delay
<b>Medical condition or death</b>			
1	<i>Your emergency medical condition</i> or death.	Benefit A	B & C*, or B & D
2	The <i>emergency medical condition</i> or death of <i>your travelling companion</i> .	Benefit A	B & C, or B & D
3	The <i>emergency medical condition</i> or death of <i>your spouse</i> or <i>your dependent child</i> .	Benefit A	B & C
4	The <i>emergency medical condition</i> or death of a member of <i>your</i> or <i>your travelling companion's family</i> .	Benefit A	B & C
5	Hospitalization or the death of <i>your</i> host at destination, <i>your</i> legal business partner or <i>key employee</i> .	Benefit A	B & C

Other covered reasons			
6	A written formal travel warning issued by the Department of Foreign Affairs and International Trade of the Canadian government after the purchase of <i>your trip</i> , advising Canadians not to travel to a country, region or city originally ticketed for a period that includes <i>your trip</i> .	Benefit A	B & C
7	A transfer by the employer with whom <i>you</i> or <i>your spouse</i> is employed on <i>your effective date</i> , which requires the relocation of <i>your</i> principal residence.	Benefit A	n/a
8	Delay of <i>your common carrier</i> , resulting from the mechanical failure of that carrier, a traffic accident or an <i>emergency</i> police-directed road closure (either must be substantiated by a police report), or weather conditions, causing <i>you</i> to miss a connection or resulting in the interruption of <i>your trip</i> . The outright cancellation of a flight is not considered a delay.	Benefit D	Benefit D
9	A natural disaster that renders <i>your</i> principal residence uninhabitable.	Benefit A	B & C
10	<i>Your</i> quarantine or hijacking.	Benefit A	B & C
11	<i>You</i> being called for jury duty; being subpoenaed as a witness; or required to appear as a party in a judicial proceeding, during <i>your trip</i> .	Benefit A	n/a
12	<i>You</i> or <i>your travelling companion</i> being summoned to service in the case of reservists, active military, police, essential medical personnel and fire personnel.	Benefit A	B & C
13	The legal adoption of a child by <i>you</i> or <i>your travelling companion</i> , when the actual date of that adoption is scheduled to take place after <i>your effective date</i> and prior to or during <i>your trip</i> .	Benefit A	B & C

## WHAT ARE THE BENEFITS?

Reimbursement to *you* of the expenses *you* actually incur as a result of one (1) of the covered reasons up to the sum insured for:

- A. In case of cancellation of *your trip*, the non-refundable portion of *your* prepaid travel arrangements.
- B. In case of interruption of *your trip*, the non-refundable unused portion of *your* prepaid travel arrangements, excluding the cost of prepaid unused transportation back to *your departure point*.
- C. *Your* economy-class transportation via the most cost-effective route to *your departure point*. Travel must be undertaken on the earliest of:
  - i. The date when *your* travel is medically possible, and
  - ii. Within ten (10) days following *your* originally scheduled *return date* if *your* delay is not the result of hospitalization, or
  - iii. Within thirty (30) days following *your* originally scheduled *return date* if *your* delay is the result of hospitalization.

Fly to Bedside or Funeral – Note: If *you* are required to interrupt *your trip* to attend a funeral or travel to the bedside of a hospitalized *family* member, business partner, or *key employee*, *you* have the option to purchase a ticket to the destination where the death or hospitalization has occurred. *You* will be reimbursed the cost of the ticket, up to the maximum amount of what it would have cost for one-way economy class transportation via

the most cost-effective route back to *your departure point* (applicable to covered reasons #4 and #5).

- **This option is subject to the pre-authorization of Assured Assistance Inc.**
  - This option can only be used once during *your trip*.
  - If *you* choose this option, it will replace Benefit C.
- D. *Your one-way economy airfare via the most cost-effective route to your next destination (in-bound and outbound).*
- \* **Return of a travelling companion** – Should a decision be made by the Insurer to transport *you* to a treatment facility in *your* province or territory of residence, the Insurer will pay the cost of economy-class transportation for one (1) *travelling companion* to his/her *departure point*, provided that he/she is unable to make use of the original ticket as a result of the delay caused by *your emergency medical condition* or death.

## WHAT IS NOT COVERED?

### PRE-EXISTING MEDICAL CONDITION EXCLUSIONS

This insurance does not pay for any expenses incurred directly or indirectly as a result of:

1. *Your medical condition* or related condition (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *your effective date*, *your medical condition* or related condition has not been *stable*.
2. *Your heart condition* (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *your effective date*:
  - a. any heart condition has not been *stable*, or
  - b. *you* have taken nitroglycerin more than once per week specifically for the relief of angina pain.
3. *Your lung condition* (whether or not the diagnosis has been determined), if at any time in the ninety (90) days before *your effective date*:
  - a. any lung condition has not been *stable*, or
  - b. *you* have been treated with home oxygen or taken oral steroids (prednisone or prednisolone) for any lung condition.

### GENERAL EXCLUSIONS

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. Cancellation or interruption when *you* are aware, on the *effective date*, of any reason that might reasonably prevent *you* from travelling as booked.
2. A *trip* undertaken to visit or attend an ailing person, when the *medical condition* or ensuing death of that person is the cause of the claim.
3. The inability to obtain desired rental accommodation, financial difficulties or unwillingness to travel.
4. *Your* failure to appear at the airport, except in circumstances described as covered reasons.
5. Any travel rewards provided by any frequent flyer program, excluding the RBC Rewards program.
6. Any *medical condition* if *you* undertake *your trip* with the prior knowledge that *you* will require or seek treatment, surgery, investigations, palliative care or alternative therapy of any kind, regardless of whether the treatment, surgery, investigations, palliative care or alternative therapy is related in any way to the *medical condition*.
7. The following:
  - routine pre-natal care, or
  - complications of pregnancy occurring within nine (9) weeks before or after the expected date of delivery, or
  - complications of childbirth occurring within nine (9) weeks before or after the expected date of delivery.

8. Any child born during the *trip*.
9. *Your* participation as a professional in sports, participation as a professional in underwater activities, scuba diving as an amateur unless *you* hold a basic scuba designation from a certified school or other licensing body, participation in a motorized race or motorized speed contest, bungee jumping, parachuting, rock climbing, *mountain climbing*, hang-gliding or skydiving.
10. *Your* committing or attempting to commit a criminal offence.
11. *Your* intentional self-inflicted injury, suicide or attempted suicide (whether sane or insane).
12. *Your mental or emotional disorders*.
13. Any *medical condition*, arising from, or in any way related to, *your* chronic use of alcohol or drugs whether prior to or during *your trip*.
14. *Your* abuse of medication, drugs or alcohol or deliberate non-compliance with prescribed medical therapy or treatment whether prior to or during *your trip*.
15. Act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder.
16. Ionizing radiation or radioactive contamination from any nuclear fuel or waste which results from the burning of nuclear fuels; or, the radioactive, toxic, explosive or other dangerous properties of nuclear machinery or any part of it.

## WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?

If *you* call Assured Assistance at the time of the cancellation or interruption as shown under “How to Obtain Assistance” *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date of the cause of cancellation or interruption.

For *your* claim to be reviewed, *you* must submit the following information:

- The completed claim form. Please contact the Claims Centre to obtain a claim form. (Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada),
- The medical certificate (contact the Claims Centre to obtain a medical certificate), fully completed by the legally qualified *physician* in active personal attendance and in the locality where the *medical condition* occurred stating the reason why travel was not recommended,
- A copy of *your* RBC Visa statement or itemized receipt showing that *your* payment for *your trip* was paid in full with *your* RBC Avion Visa Infinite Privilege for Private Banking and/or RBC Rewards points,
- Written evidence of the covered reason, which was the cause of cancellation, interruption, or delay,
- Complete original unused transportation tickets and vouchers,
- Receipts for the prepaid land arrangements,
- Original passenger receipts for new tickets,
- Reports from police, *common carrier* or local authorities documenting the cause of the missed connection, and
- Detailed invoices and/or receipts from the service provider(s).

Submission of claims must be made to the Claims Centre:

**RBC Insurance Company of Canada**  
**Claims Centre**  
**PO Box 97, Station A**  
**Mississauga, ON L5A 2Y9**  
**1-866-426-7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the cause of cancellation or interruption. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year or *your* claim will not be reviewed.

The Claims Centre will notify *you* of the decision on *your* claim within sixty (60) days of receiving all of the required information.

## **OTHER CLAIM INFORMATION**

When a cause of cancellation occurs (the event or series of events that triggers one of the 13 covered reasons) before *your departure date*, *you* must:

- a. Cancel *your trip* with the travel agent, airline, tour company, carrier or travel authority immediately, but no later than the business day following the cause of cancellation, and
- b. Advise the Insurer at the same time.

The Insurer's maximum liability is the amounts or portions indicated in *your trip* contract that are non-refundable at the time of the cause of cancellation or on the next business day.

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

## **WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

1. This insurance is classified as supplemental or excess, in that it covers expenses in excess of expenses payable by any other insurance plan.
2. If *you* are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to *you* by all insurers cannot exceed the actual expense that *you* have incurred. We will coordinate the payment of benefits with all insurers from whom *you* are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.
3. If *you* incur expenses covered under this insurance due to the fault and/or negligence of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party. Where a third party is involved, an accident report is required before any claim payments can be made.
4. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.
5. The Insurer, Customer Service Representatives/Coordinators of Assured Assistance and the Claims Centre, Royal Bank and their agents are not responsible for the availability, quality or results of medical treatment or transportation, or *your* failure to obtain medical treatment.
6. This Certificate of Insurance is the entire contract between *you* and the Insurer and is subject to the Insurance Companies Act of Canada and any governing provincial statutes concerning contracts of accident insurance.
7. The Insurer may, at its discretion, void this contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
8. *You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.
9. **This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.**
10. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.



11. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

## EMERGENCY PURCHASES AND FLIGHT DELAY INSURANCE CERTIFICATE OF INSURANCE

**IMPORTANT – PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.

### INTRODUCTION

RBC Insurance Company of Canada (the “Insurer”) has issued group insurance policy U-1014455-A to Royal Bank of Canada (“Royal Bank”) to cover expenses incurred by *covered persons* relating to a Missed Connection, Delayed Flight Departure or Denied Boarding (as further described below). Aviva General Insurance Company (the “Insurer”) in Quebec and RBC Insurance Company of Canada (the “Insurer”) in the rest of Canada have issued group insurance policy U-1014456-A to Royal Bank of Canada (“Royal Bank”) to cover expenses incurred by *covered persons* relating to *emergency purchases* due to lost or stolen luggage that has been checked with an *air carrier*. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of this group insurance policy.

### HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

### HELPFUL INFORMATION ABOUT *EMERGENCY PURCHASES* AND FLIGHT DELAY INSURANCE

- Coverage begins four (4) hours after the occurrence of *your* Missed Connection, Delayed Flight, or Denied Boarding, or the arrival of *your* flight at *your* destination when *your* checked luggage is lost or delayed.
- For Flight Delay insurance, the maximum amount of coverage for reasonable and necessary expenses is \$500 per day per *covered person* to an overall total of \$1,000 per occurrence for all *covered persons*.
- For *Emergency Purchases* insurance, the maximum amount of coverage for reasonable and necessary expenses is \$750 per occurrence for each *covered person* to a maximum of \$3,000 per occurrence in aggregate for all *covered persons*.
- Remember to obtain a report from the *air carrier* to substantiate the Missed Connection, Delayed Flight, Denied Boarding, or loss or delay of *your* checked luggage.
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

### DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

***Additional cardholder*** means a *co-applicant* or an *authorized user*.

***Air carrier*** means a commercial air service licensed by the airline authority of the country of registration.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking\* card, to whom a card has been issued, and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Covered person** means the *applicant*, the *applicant's spouse*, or the *applicant's dependent child* who travels with or joins the *applicant* or the *applicant's spouse* on the same trip. An *additional cardholder* is a *covered person* in his/her own right. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant* and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Dependent child** means an unmarried, natural, adopted, step or foster child, or legal ward of the *applicant* who is:

- under twenty-one (21) years of age, or
- under twenty-six (26) years of age if a full-time student, or
- mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Emergency purchases** means the minimum essential clothing and toiletries, the purchase of which is rendered absolutely necessary and indispensable due to the loss or delay of *your* checked luggage.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Spouse** means the person who is legally married to *you* or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

## PART 1 – EMERGENCY PURCHASES INSURANCE

### WHEN DOES COVERAGE BEGIN AND END?

This insurance is effective when the full cost of *your* airline ticket issued by an *air carrier* is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards® points, and *your* luggage is checked with that *air carrier*. If only a partial payment is made using RBC Rewards points, the entire balance of that airline ticket must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.

Coverage begins for *you* four (4) hours after the arrival of *your* flight at the scheduled flight destination, when the luggage *you* had checked with the *air carrier* is lost or delayed.

Coverage ends, individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. The date and time that *your* luggage is returned to *you*;
2. Four (4) days after the arrival of *your* flight at the scheduled flight destination;
3. The date that *you* arrive at the final destination on the return portion of *your* trip;
4. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled;
5. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due;
6. The date the group insurance policies are cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to travel arrangements charged to *your*

RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policies;

7. The date Royal Bank receives written notice from *you* that *you* choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking card.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

Reimbursement to *you*, up to a maximum of \$750, for the reasonable and necessary expenses *you* incur with respect to *emergency purchases* per any one (1) occurrence of the loss or delay of *your* checked luggage. If there is more than one (1) *covered person* making a claim, the maximum payable for all *covered persons* under this Certificate of Insurance is \$3,000 in aggregate per any one (1) occurrence of the loss or delay of *your* checked luggage.

## PART 2 – FLIGHT DELAY INSURANCE

### WHEN DOES COVERAGE BEGIN AND END?

This insurance is effective when the full cost of *your* airline ticket issued by an *air carrier* is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points and *you* have checked in with that *air carrier*. If only a partial payment is made using RBC Rewards points, the entire balance of that airline ticket must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.

*Your* coverage begins as follows:

**Missed Connection** – Coverage begins four (4) hours after the *air carrier's* aircraft has arrived at *your* connecting point for *your* onward connecting flight when, due to the delay of *your* incoming flight, *you* miss a confirmed onward connecting flight; and no alternative onward transportation is made available to *you* by the *air carrier* within four (4) hours of the scheduled departure time of the onward connecting flight.

**Delayed Flight Departure** – Coverage begins four (4) hours after the scheduled departure time of *your* confirmed scheduled flight, which was delayed, when no alternative transportation is made available to *you* by the *air carrier* within four (4) hours of the scheduled departure time of *your* original flight.

**Denied Boarding** – Coverage begins four (4) hours after *you* have been denied boarding of the aircraft due to overbooking on *your* confirmed scheduled flight, when no alternative transportation is made available to *you* by the *air carrier* within four (4) hours of the scheduled departure time of *your* original flight.

Coverage ends, individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. Forty-eight (48) hours after the arrival of *your* flight at the scheduled flight destination;
2. The date that *you* arrive at the final destination on the return portion of *your* trip;
3. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled;
4. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is 60 days past due;
5. The date the group insurance policy is cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to travel arrangements charged to *your* RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policy;
6. The date Royal Bank receives written notice from *you* that *you* choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking card.

### WHAT IS COVERED AND WHAT ARE THE BENEFITS?

Reimbursement to *you*, up to a maximum of \$500 per day, for the reasonable and necessary expenses *you* incur as a result of a Missed Connection, Denied Boarding or Delayed Flight Departure. Reasonable and necessary expenses include hotel accommodation, restaurant meals, refreshments, *emergency purchases* and other sundry items (such as a magazine,

paperback book and other such small items) for a maximum of forty-eight (48) hours or until reasonable alternative transportation is made available.

This benefit is subject to an overall maximum of \$1,000 per any one (1) occurrence of Missed Connection, Denied Boarding and Delayed Flight Departure. If there is more than one (1) *covered person* making a claim, the maximum payable for all *covered persons* under this certificate is \$1,000 in the aggregate per any one (1) occurrence of Missed Connection, Denied Boarding and Delayed Flight Departure.

## **PART 3 – EMERGENCY PURCHASES AND FLIGHT DELAY INSURANCE**

### **WHAT IS NOT COVERED?**

#### **GENERAL EXCLUSIONS**

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. Any *emergency purchases* made after *your* luggage was returned to *you*;
2. Any losses incurred at the final destination of the return portion of *your* trip;
3. *Your* failure to check *your* luggage within the minimum guidelines published by the *air carrier*;
4. The insufficient allotment of time for connecting flights according to *air carrier* recommendations;
5. An act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder;
6. *Your* committing or attempting to commit a criminal offence;
7. *Your* being denied boarding by immigration officials or other authorities;
8. *Your* inebriated state.

### **WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?**

If *you* call Assured Assistance at the time of the loss as shown under “How to Obtain Assistance”, *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date of the loss.

Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada.

For *your* claim to be reviewed, *you* must submit the following original documentation:

- Airline tickets;
- *Your* RBC Visa statement and/or itemized receipt showing that the airline ticket was paid in full using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;
- The *air carrier's* report substantiating the reason for *your* Missed Connection, Delayed Flight Departure, Denied Boarding, or loss or delay of *your* checked luggage;
- Receipts for hotel accommodation, restaurant meals, refreshments, *emergency purchases* and other sundry items.

Submission of claims from all provinces must be made to the Claims Centre:

**RBC Insurance Company of Canada**  
**Claims Centre**  
**PO Box 97, Station A**  
**Mississauga, ON L5A 2Y9**  
**1-866-426-7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the loss. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year of the date of the loss or *your* claim will not be reviewed.

## **OTHER CLAIM INFORMATION**

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

## **WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

1. This insurance is classified as supplemental or excess, in that it covers expenses in excess of expenses payable by any other insurance plan.
2. If *you* are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to *you* by all insurers cannot exceed the actual expense that *you* have incurred. We will coordinate the payment of benefits with all insurers from whom *you* are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.
3. If *you* incur expenses covered under this insurance due to the fault and/or negligence of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party.
4. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.
5. The Insurer may, at its discretion, void this insurance contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
6. **This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.**
7. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
8. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

## **HOTEL/MOTEL BURGLARY INSURANCE CERTIFICATE OF INSURANCE**

**IMPORTANT — PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.

## **INTRODUCTION**

Aviva General Insurance Company (the “Insurer”) in Quebec and RBC Insurance Company of Canada (the “Insurer”) in the rest of Canada have issued group insurance policy U-1014454-A to Royal Bank of Canada (“Royal Bank”) to cover expenses incurred by *covered persons* relating to a hotel/motel *burglary*. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of this group insurance policy.

## HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have any questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

### HELPFUL INFORMATION ABOUT HOTEL/MOTEL BURGLARY INSURANCE

- The maximum reimbursement under this insurance for the repair or replacement of *your personal property* that is lost or damaged due to a *burglary* is \$3,000 per occurrence in the aggregate.
- The *burglary* must be as a result of wrongful entry, indicated by visible signs of force into *your* hotel room, motel room or cruise cabin.
- This insurance is classified as supplemental, in that it covers expenses in excess of expenses payable by any other insurance plan.
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

### DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking card, to whom a card has been issued, and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Burglary** means the loss of or damage to *your personal property* as a result of wrongful entry into *your* hotel room, motel room, or cruise cabin for which there are visible signs of force made by tools, explosives, electricity or chemicals.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant*, and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Covered person** means the *applicant*, the *applicant's spouse*, or the *applicant's dependent child* who travels with or joins the *applicant* or the *applicant's spouse* on the same trip. An *additional cardholder* is a *covered person* in his/her own right. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance.

**Dependent child** means an unmarried, natural, adopted, step, or foster child, or legal ward of the *applicant*, who is:

- under twenty-one (21) years of age, or
- under twenty-six (26) years of age if a full-time student, or
- mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Spouse** means the person who is legally married to *you* or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

## WHEN DOES COVERAGE BEGIN AND END?

Coverage begins at the actual time *you* check into *your* hotel room, motel room, or cruise cabin, provided that *your* hotel room, motel room, or cruise cabin is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards® points. If only a partial payment is made using RBC Rewards points, the entire balance of that hotel room, motel room, or cruise cabin must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.

Coverage ends, individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. The time *you* check out from *your* hotel room, motel room, or cruise cabin; or
2. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled; or
3. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due; or
4. The date the group insurance policy is cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to a *burglary* occurring prior to the cancellation date of the group insurance policy; or
5. The date Royal Bank receives written notice from *you* that *you* choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking card.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

Reimbursement to *you*, up to a maximum of \$3,000 per *burglary* occurrence, for the damage to or the loss of *your personal property* resulting from the *burglary* of *your* hotel room, motel room, or cruise cabin when *you* are a registered guest. If there is more than one (1) *covered person* making a claim, the maximum payable for all *covered persons* under this Certificate of Insurance is \$3,000 in the aggregate per any one (1) *burglary* occurrence. We will pay the lesser of the following amounts:

1. \$3,000 in the aggregate per *burglary* occurrence.
2. The actual replacement value of *your personal property* at the time of *burglary*.
3. The amount for which *your personal property* could be replaced with property of like kind and quality if an identical replacement cannot reasonably be obtained.
4. The amount for which *your personal property* could be repaired to its condition prior to the *burglary*.

## WHAT IS NOT COVERED?

### GENERAL EXCLUSIONS

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. The loss of cash or traveller's cheques.
2. *Your* failure to take reasonable precautions to safeguard *your personal property* or to secure *your* hotel room, motel room, or cruise cabin.
3. An act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder.
4. *Your* committing or attempting to commit a criminal offence.
5. *Burglary* of *your* rental property.

## WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?

If *you* call Assured Assistance at the time of the loss as shown under "How to Obtain Assistance" *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date of the *burglary*.

(Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada).

For *your* claim to be reviewed, *you* must submit the following original documentation:

- Charge slip for the hotel room, motel room or cruise cabin;
- *Your* RBC Visa statement and/or receipt showing that the hotel room, motel room or cruise cabin was paid in full using *your* card and/or RBC Rewards points;
- A police report that confirms the *burglary*;
- The hotel, motel or cruise company's *burglary* report; and
- Receipts for the repair or replacement of *your personal property*.

Submission of claims from all provinces must be made to the Claims Centre:

**RBC Insurance Company of Canada**  
**Claims Centre**  
**PO Box 97, Station A**  
**Mississauga, ON L5A 2Y9**  
**1-866-426-7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the *burglary*. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year of the date of the *burglary* or *your* claim will not be reviewed.

## **OTHER CLAIM INFORMATION**

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

## **WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?**

1. This insurance is classified as supplemental or excess, in that it covers expenses in excess of expenses payable by any other insurance plan.
2. If *you* are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to *you* by all insurers cannot exceed the actual expense that *you* have incurred. We will coordinate the payment of benefits with all insurers from whom *you* are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.
3. If *you* incur expenses covered under this insurance due to the fault and/or negligence of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party.
4. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.
5. The Insurer may, at its discretion, void this insurance contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
6. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
7. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.



# LOST OR STOLEN BAGGAGE INSURANCE CERTIFICATE OF INSURANCE

**IMPORTANT — PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance, keep it in a safe place and carry it with *you* when *you* travel.

## INTRODUCTION

Aviva General Insurance Company (the “insurer”) in Quebec and RBC Insurance Company of Canada (the “Insurer”) in the rest of Canada has issued group insurance policy F2006466A to Royal Bank of Canada (“Royal Bank”) to cover expenses incurred by *Covered Persons* relating to Lost or Stolen Baggage. *All covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of the group insurance policy.

## HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have any questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

## HELPFUL INFORMATION

- The maximum payable for any one *occurrence* is up to \$2500 for all *covered persons* combined.
- Of the \$2500, jewellery is limited to \$500 per *occurrence* and golf clubs, including golf bags, are limited to \$500 per *occurrence*
- We require the fully completed Claim & Authorization form, and where applicable, proof of loss/damage/theft (copies of reports made to the authorities), proof of ownership, and receipts for the items claimed.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

***Additional cardholder*** means a *co-applicant* or an *authorized user*.

***Air carrier*** means a commercial air service licensed by the airline authority of the country of registration.

***Applicant*** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking, to whom a card has been issued, and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

***Authorized user*** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking has been issued at the request of the *applicant* or the *co-applicant*. An *authorized User* must be a *permanent resident* of Canada.

***Covered person*** means the *applicant*, the *applicant’s spouse*, or the *applicant’s dependent child* who travels with or joins the *applicant* or the *applicant’s spouse* on the same trip. An *additional cardholder* is a *covered person* in his/her own right. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. The *spouse* and/or *dependent child* of an *additional cardholder* are not eligible for this insurance.

***Co-applicant*** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking as the *co-applicant* and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Dependent child** means an unmarried, natural, adopted, step or foster child, or legal ward of the *applicant* who is:

- under twenty-one (21) years of age, or
- under twenty-six (26) years of age if a full-time student, or
- mentally or physically handicapped and incapable of self-sustaining employment and totally reliant on *you* for support and maintenance.

**Occurrence** a loss or losses arising from a single event or incident which is neither expected nor intended by a *covered person*.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Spouse** means the person who is legally married to *you* or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

**Trip** mean travel outside *your* Canadian province or territory of residence.

**We, us** and **our** refer to RBC Insurance Company of Canada or Aviva General Insurance Company (the Insurer).

**You, yourself** and **your** refer to the *covered person*.

## WHEN DOES COVERAGE BEGIN AND END?

This insurance coverage is effective when the full cost of *your* airline ticket issued by an *air carrier* is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking and/or RBC Rewards points and *your* luggage is checked or carried on board with that *air carrier*. If only a partial payment is made using RBC Rewards points, the entire balance of that airline ticket must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking in order to be covered.

Coverage begins when the luggage *you* had checked or carried on board with the *air carrier* is lost, damaged or stolen.

Coverage ends individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. When such checked-in baggage has been unloaded and placed in the airport terminal's baggage pick-up area for retrieval by the *covered person* and for carry on baggage when the *covered person* leaves the aircraft;
2. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled;
3. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due;
4. The date the group insurance policies are cancelled by the Insurer or Royal Bank, however, such cancellation of coverage shall not apply to travel arrangements charged to *your* RBC Avion Visa Infinite Privilege for Private Banking prior to the cancellation date of the group insurance policies;
5. The date Royal Bank receives written notice from *you* that *you* choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking.
6. The date *you* return to *your* province, territory or country of residence.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

We will pay the *covered person* for loss or damage to owned baggage and personal effects used for the personal use of the *covered person* while in transit as checked-in baggage or carried on board the *air carrier* when the full cost of the airline ticket is paid with *your* RBC Avion Visa Infinite Privilege for Private Banking.

The maximum payable for any one *occurrence* is up to \$2,500 for all *covered persons* combined.

Of the \$2,500 limit of coverage, jewellery is limited to no more than \$500 per *occurrence* and no more than \$500 per *occurrence* will apply to golf clubs, including golf bags.

## GENERAL EXCLUSIONS

This insurance does not cover any loss, claim or expense of any kind caused directly or indirectly from:

1. Animals, perishables, bicycles except while checked as baggage with a common carrier, household effects and furnishings, artificial teeth and limbs, hearing aids, eye glasses, sunglasses, contact lenses, money, tickets, securities and documents, *professional* or occupational items, antiques and collector items, breakage of or damage to brittle or fragile articles, property illegally acquired, kept, stored or transported.
2. Cash, securities, bullion, negotiable property, tickets and valuable papers and documents;
3. Any illegal activity, fraud, or criminal activity, committed by or attempted by a *covered person*;
4. Loss or damage as a result of any act of war, whether declared or undeclared, hostile or war like action, insurrection, rebellion, revolution, civil war, usurped power, or action taken by government or public authority in hindering, combating or defending against such action;
5. Loss or damage as a result of terrorism, meaning any ideologically motivated unlawful act or acts, including but not limited to the use of violence or force or threat of violence or force, committed by or on behalf of any group(s), organization(s) or government(s) for the purpose of influencing any government and/or instilling fear in the public or a section of the public;
6. Loss or damage as a result of nuclear reaction, nuclear radiation, or radioactive contamination, any weapon of war employing atomic fission or a radioactive force.

## WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?

If *you* call Assured Assistance at the time of the loss as shown under “How to Obtain Assistance”, *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date of the loss.

(Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) for the rest of Canada).

For *your* claim to be reviewed, *you* must submit the following original documentation:

- Airline tickets;
- *Your* RBC Visa statement and/or itemized receipt showing that the airline ticket was paid in full using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;
- A copy of the lost or damaged baggage report filed with the *air carrier* which includes the completed claim form itemizing the baggage’s contents
- Proof of settlement from the *covered person’s* personal insurance company;
- Proof of settlement from the *air carrier*.
- Estimate of repair (for damaged baggage/contents). If not repairable, a note from the repair facility stating same.
- Itemized original receipts for replacement items (if not repairable).

Submission of claims from all provinces must be made to the Claims Centre:

**RBC Insurance Company of Canada**

**Claims Centre**

**PO Box 97, Station A**

**Mississauga, ON L5A 2Y9**

**1-866 426 7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the loss. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year of the date of the loss or *your* claim will not be reviewed.

## OTHER CLAIM INFORMATION

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

### WHAT OTHER TERMS SHOULD *YOU* KNOW ABOUT?

1. This coverage is excess insurance and *we* are the last payors. All other sources of recovery, indemnity payments or insurance coverage must be exhausted before any payments will be made under this coverage.
2. If *you* are eligible, from any other insurer, for benefits similar to the benefits provided under this insurance, the total benefits paid to *you* by all insurers cannot exceed the actual expense that *you* have incurred. *We* will coordinate the payment of benefits with all insurers from whom *you* are eligible for benefits similar to those provided under this insurance, to a maximum of the largest amount specified by each insurer.
3. If *you* incur expenses covered under this insurance due to the fault of a third party, *we* may take action against the party at fault. *You* agree to cooperate fully with *us* and to allow *us*, at *our* own expense, to bring a law suit in *your* name against the third party. If *you* recover against a third party, *you* agree to hold in trust sufficient funds to reimburse *us* for the amounts paid under the insurance.
4. Any information that has been misrepresented, or misstated to *us* by *you* or is incomplete may result in this Certificate of Insurance and *your* coverage being null and void, in which case no benefits will be paid.
5. Any claim for loss or damage covered under this Certificate of Insurance will be adjusted and paid when satisfactory proof of the loss or damage is provided to *us*. *You* must give proof of loss and values of the items lost or damaged to *us*. All benefits will be paid to the covered person.
6. *We* will not pay more than the lesser of the following amounts:
  - a. The actual replacement cost of the property at the time of loss or damage;
  - b. The amount for which the property could be replaced with property of like kind and quality if an identical replacement cannot reasonably be obtained;
  - c. The actual cash value of the item at the time of loss should it not be replaced;
  - d. The amount for which the property could be repaired to its condition prior to the damage;
  - e. The maximum benefit applicable under this Certificate of Insurance.
7. All payments shall be payable in the lawful currency of Canada. All benefit limits indicated are in Canadian currency. This insurance will not pay for any interest or any fluctuations in the exchange rate.
8. No legal action for a claim can be brought against *us* more than one (1) year after the time for giving proof of loss, or such longer period as may be prescribed by law.
9. **This policy contains a provision removing or restricting the right of the group person insured to designate persons to whom or for whose benefit insurance money is to be payable.**
10. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
11. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

# PURCHASE SECURITY & EXTENDED WARRANTY CERTIFICATE OF INSURANCE

**IMPORTANT – PLEASE READ:** This Certificate of Insurance is a valuable source of information and contains provisions that may limit or exclude coverage. Please read this Certificate of Insurance and keep it in a safe place.

## INTRODUCTION

Aviva General Insurance Company (the “Insurer”) in Quebec and RBC Insurance Company of Canada (the “Insurer”) in the rest of Canada have issued group insurance policy U 1014457-A to Royal Bank of Canada (“Royal Bank”) to cover expenses incurred by *covered persons* relating to Purchase Security & Extended Warranty. All *covered persons* are clients of the Insurer. This Certificate of Insurance summarizes the provisions of this group insurance policy.

## HOW TO OBTAIN ASSISTANCE

If *you* require assistance or have questions about *your* coverage, *you* can contact Assured Assistance Inc. (“Assured Assistance”) by calling:

**1-866-774-2878 toll-free from the US & Canada or  
905-816-2584 collect from anywhere in the world.**

## HELPFUL INFORMATION ABOUT PURCHASE SECURITY & EXTENDED WARRANTY INSURANCE

- Purchase Security Insurance provides coverage for direct accidental physical loss or damage to *personal property* or *gifts* purchased on *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or with RBC Rewards® points for one hundred and twenty (120) days from the date of purchase. The maximum amount of coverage is \$50,000, or the equivalent number of RBC Rewards points, per RBC Avion Visa Infinite Privilege for Private Banking card per year.
- Extended Warranty Insurance automatically triples the original manufacturer’s warranty up to a maximum of two (2) years.
- Remember to obtain a police, fire, homeowner insurance claim, or damage/loss report in the event of a claim as it is required to determine eligibility for benefits.
- This insurance is classified as supplemental, in that it covers expenses in excess of expenses payable by any other insurance plan. For example, if *you* are covered under homeowners insurance, this insurance will cover the deductible only.
- It is important that *you* read and understand *your* Certificate of Insurance as *your* coverage is subject to certain limitations or exclusions.

## DEFINITIONS

Throughout this document, all italicized terms have the specific meaning explained below.

**Additional cardholder** means a *co-applicant* or an *authorized user*.

**Applicant** means a person who has signed and/or submitted an application as the primary cardholder for an RBC Avion Visa Infinite Privilege for Private Banking card, to whom a card has been issued and in whose name the card account is established. An *applicant* does not include an *additional cardholder*. An *applicant* must be a *permanent resident* of Canada.

**Authorized user** means a person, other than the *applicant* and the *co-applicant*, to whom an RBC Avion Visa Infinite Privilege for Private Banking card has been issued at the request of the *applicant* or the *co-applicant*. An *authorized user* must be a *permanent resident* of Canada.

**Co-applicant** means a person who has signed and/or submitted an application for an RBC Avion Visa Infinite Privilege for Private Banking card as the *co-applicant* and to whom a card has been issued. A *co-applicant* must be a *permanent resident* of Canada.

**Covered person** means the *applicant* or *additional cardholder*. A *covered person* may be referred to as “*you*” or “*your*” or “*yourself*”. The *family members* of an *applicant* or *additional cardholder* are not eligible for this insurance.

**Family member** means *your spouse*, parent, step-parent, grandparent, grandchild, in-law, natural or adopted child, step-child, brother, sister, step-brother step-sister, legal guardian, or legal ward.

**Gift** means tangible moveable property for the personal use of *your family member*.

**Mysterious disappearance** means the disappearance of *personal property* or a *gift* in an unexplained manner.

**Permanent resident** means a person who resides in Canada for at least six (6) months of the year. However, individuals otherwise eligible for coverage who are members of the Canadian Foreign Service need not satisfy this requirement.

**Personal property** means tangible, moveable property for *your* personal use.

**Spouse** means the person who is legally married to *you*, or has been living in a conjugal relationship with *you* and residing in the same household as *you* for a continuous period of at least one (1) year.

## WHEN DOES COVERAGE BEGIN AND END?

These coverages are effective when *you* use *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points to purchase and pay in full for *personal property* or *gift(s)*. If the *personal property* or *gift(s)* are delivered to *you* or a *family member*, they must be received by *you* or the *family member* in good condition. If only a partial payment is made using RBC Rewards points, the entire balance of the *personal property* or *gift* must be paid using *your* RBC Avion Visa Infinite Privilege for Private Banking card in order to be covered.

Coverage ends, individually for the *applicant* and each *additional cardholder*, on the earliest of:

1. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is cancelled; or
2. The date *your* RBC Avion Visa Infinite Privilege for Private Banking account is sixty (60) days past due; or
3. The date the group insurance policy is cancelled by the Insurer or Royal Bank. However, such cancellation of coverage shall not apply to *personal property* or *gifts* charged to *your* RBC Avion Visa Infinite Privilege for Private Banking card prior to the cancellation date of the group insurance policy; or
4. The date Royal Bank receives written notice from *you* that *you* choose to cancel *your* RBC Avion Visa Infinite Privilege for Private Banking card.

## WHAT IS COVERED AND WHAT ARE THE BENEFITS?

### PURCHASE SECURITY INSURANCE

*Personal property* and *gifts* purchased using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points are insured against all risks of direct accidental physical loss or damage for one hundred and twenty (120) days from the date of purchase.

*You* are insured for loss or damage in an amount not exceeding the amount shown on *your* RBC Avion Visa Infinite Privilege for Private Banking sales draft. If *you* have purchased and paid for *personal property* and/or *gifts* using RBC Rewards points, *you* are insured for the amount of RBC Rewards points *you* redeemed to pay for *your* purchase.

The maximum amount of coverage is \$50,000 (or the equivalent number of RBC Rewards points) per RBC Avion Visa Infinite Privilege for Private Banking account for each year, individually for the *applicant* and each *additional cardholder*.

### EXTENDED WARRANTY INSURANCE

Extended Warranty Insurance automatically triples the original manufacturer’s warranty, up to a **maximum extension of two (2) years**. *Your* Extended Warranty Insurance starts immediately following the expiry of the original manufacturer’s warranty, but in no event shall the combined Extended Warranty and original manufacturer’s warranty exceed five (5) years. If *you* have a claim under this Certificate of Insurance, it will be reviewed according to the original manufacturer’s

warranty, which will outline all terms and conditions relating to *your personal property or gift*. The terms, conditions and exclusions of this Certificate of Insurance will govern in case of a conflict.

Items covered by Extended Warranty Insurance must have been purchased using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points. *Personal property* and *gifts* are included. The purchases can be made anywhere in the world. The original warranty must be valid in Canada.

In the event *your* original manufacturer's warranty is no longer available due to the bankruptcy of the manufacturer, this insurance will provide coverage in place of the original manufacturer's warranty. Any warranty coverage provided by RBC shall be for a maximum period of two (2) years.

## WHAT IS NOT COVERED?

### **PERSONAL PROPERTY AND GIFT EXCLUSIONS**

The Insurer will not pay for any expenses incurred directly or indirectly relating to:

1. Living plants, animals, fish, or birds.
2. Money, travellers cheques, bullion, stamps, tickets, tokens, evidence of title or any other negotiable item (including but not limited to gift cards and gift certificates).
3. Jewellery, gems, watches and furs or garments trimmed with fur, if contained in baggage, unless such baggage is hand carried at all times by *you, your travelling companion, or family member*.
4. Automobiles, watercraft, amphibious or air cushion vehicles, aircraft, spacecraft, trailers or outboard motors and other accessories attached to or mounted on such property or any motorized vehicles except motorized lawnmowers, other gardening equipment, snow-blowers or motorized wheelchairs for handicapped persons.
5. Property illegally acquired, kept, stored or transported, or property seized or confiscated for breach of any law or by order of any public authority.
6. Any and all business property and equipment intended for commercial use.

### **GENERAL EXCLUSIONS**

The Insurer will not pay for any expenses incurred directly or indirectly as a result of:

1. *Mysterious disappearance of personal property or gifts*, or fraudulent acts by *you or your family members*.
2. After an item is received in good condition, any wear and tear, gradual deterioration, latent defect or inherent vice, marring or scratching of any fragile or brittle article.
3. Weather conditions and any natural disaster, including flood or earthquake.
4. An act of foreign enemies or rebellion, voluntarily and knowingly exposing *yourself* to risk from an act of war (declared or not) or voluntarily participating in a riot or civil disorder.
5. Loss or damage resulting from intentional or criminal acts committed or attempted to be committed by *you or your family members*.
6. Loss or damage caused by birds, vermin, rodents or insects.
7. Loss or damage to sports equipment and goods where the loss or damage is due to the use thereof.
8. Setting, expansion, contraction, bulging, buckling or cracking, dampness or dryness of atmosphere, changes of temperature, freezing, heating, evaporation, loss of weight, leakage of contents, exposure to light, contamination, change in color or texture or finish, rust or corrosion.
9. Delay, loss of use, or consequential damages.
10. Loss or damage to electrical appliances or devices of any kind (including wiring) when loss or damage is due to electrical currents artificially generated, including arcing, unless fire or explosion ensues and then only for such loss and damage.
11. Loss or damage while undergoing any installation process or while being worked on, where damage results from such installation process or work.

## WHAT SHOULD YOU DO IF YOU HAVE A CLAIM?

If *you* call Assured Assistance at the time of the loss as shown under “How to Obtain Assistance,” *you* will receive the necessary claims assistance.

If *you* do not call Assured Assistance, *you* must notify the Claims Centre of *your* claim within thirty (30) days of the date of the loss.

Note: A legal guardian must complete the claim process on behalf of a *covered person* under the age of eighteen (18) in Quebec or under the age of sixteen (16) in the rest of Canada.

For *your* claim to be reviewed, *you* must submit the following original documentation:

- The Insurer’s claim form containing the time, place, cause and amount of the loss or damage;
- A copy of the original merchant’s sales receipt;
- *Your* RBC Visa statement and/or receipt showing that the *personal property* or *gift* was paid in full using *your* RBC Avion Visa Infinite Privilege for Private Banking card and/or RBC Rewards points;
- The original manufacturer’s warranty (for Extended Warranty Insurance claims only).

Depending on the nature of the claim, the Insurer will require *you* to obtain, at the time of the loss or damage, a police, fire, homeowner insurance claim or damage/loss report or any other report of the damage/loss sufficient to determine eligibility for benefits under this insurance.

When an insured item forms part of a pair or set, the Insurer will reimburse the full purchase price of the pair or set provided that the items are unusable individually and cannot be replaced individually.

Under Extended Warranty Insurance, prior to proceeding with any repair services, *you* must notify the Insurer and obtain approval of the repair services and the repair facility from the Insurer.

For both Purchase Security and Extended Warranty Insurance, at the sole discretion of the Insurer, *you* may be required to send, at *your* expense, the damaged item on which a claim is based, to an address designated by the Insurers.

Submission of claims from all provinces must be made to the Claims Centre:

**RBC Insurance Company of Canada**

**Claims Centre**

**PO Box 97, Station A**

**Mississauga, ON L5A 2Y9**

**1-866-426-7494**

*You* must submit the information required for *your* claim within ninety (90) days of the date of the loss or damage. If it is not reasonably possible to provide such information within ninety (90) days, *you* must do so within one (1) year of the date of the loss or damage or *your* claim will not be reviewed.

### OTHER CLAIM INFORMATION

*You* may only commence a legal action in the province or territory where the Certificate of Insurance was issued. *You* or *your* heirs assign consent to the transfer of any legal action to the province or territory where the Certificate of Insurance was issued.

## WHAT OTHER TERMS SHOULD YOU KNOW ABOUT?

1. This insurance is classified as supplemental or excess, in that it covers expenses in excess of expenses payable by any other insurance plan.
2. If *you* incur expenses covered under this insurance due to the fault and/or negligence of a third party, the Insurer may take action against the third party. *You* agree to cooperate fully with the Insurer or its agents and to allow the Insurer or its agents, at its/their own expense, to bring a lawsuit in *your* name against a third party.
3. All amounts are shown in Canadian dollars. If *you* have paid a covered expense, *you* will be reimbursed in Canadian currency at the prevailing rate of exchange quoted by Royal Bank on the date the last service was rendered to *you*. This insurance will not pay for any interest or any fluctuations in the exchange rate.



4. The Insurer may, at its discretion, void this insurance contract in the case of fraud or attempted fraud by *you*, or if *you* conceal or misrepresent any material fact or circumstance concerning this insurance contract.
5. The Insurer maintains the right to salvage any items being replaced including all attachments and accessories.
6. *You* must repay the Insurer any amount paid or authorized by the Insurer on *your* behalf if and when the Insurer determines that the amount is not payable under the terms of this insurance.
7. The Insurer will not be liable for more than the purchase price of the insured item(s) as recorded on the RBC Avion Visa Infinite Privilege for Private Banking sales draft. If *you* have purchased and paid for *personal property* and/or *gifts* using RBC Rewards points, the Insurer will not be liable for more than the amount of RBC Rewards points *you* redeemed to pay for *your* purchase. The Insurer has the sole option to replace or repair the insured item or reimburse *you*.
8. A limit of \$10,000 per item applies to jewellery, gems, watches and furs or garments trimmed with fur, if these items are considered payable under the terms and conditions of this Certificate of Insurance.
9. This protection shall only benefit *you*. No other person or entity shall have any right, remedy or claim, legal or equitable, to the benefits. *You* shall not assign these benefits without prior written approval of the Insurer. The Insurer will permit *you* to transfer benefits on *gifts* as provided in this plan description and the Certificate of Insurance.
10. On reasonable notice *you* or a claimant under the contract will be provided with a copy of the group contract.
11. Every action or proceeding against an insurer for the recovery of insurance money payable under the contract is absolutely barred unless commenced within the time set out in the Insurance Act (for actions or proceedings governed by the laws of Alberta and British Columbia), The Insurance Act (for actions or proceedings governed by the laws of Manitoba), the *Limitations Act, 2002* (for actions or proceedings governed by the laws of Ontario), or in other applicable legislation in your province of residence. For those actions or proceedings governed by the laws of Quebec, the prescriptive period is set out in the Quebec Civil Code.

## COLLECTION AND USE OF PERSONAL INFORMATION

### COLLECTING YOUR PERSONAL INFORMATION

We (RBC Insurance Company of Canada) may collect information about you such as:

- information establishing your identity (for example, name, address, phone number, date of birth, etc.) and your personal background;
- information you provide through the application and claims process for any of our insurance products and services; and
- information for the provision of insurance products and services.

We may collect information from you, either directly or through our representatives. We may collect and confirm this information during the course of our relationship. We may also obtain this information from a variety of sources including hospitals, doctors and other health care providers, the government (including government health insurance plans) and governmental agencies, other insurance companies, travel suppliers, law enforcement authorities, private investigators, your family and friends, and any references you provide.

### USING YOUR PERSONAL INFORMATION

This information may be used for the following purposes:

- to verify your identity and investigate your personal background;
- to issue and maintain insurance products and services you may request;
- to evaluate insurance risk, manage and coordinate claims, re-price medical expenses and negotiate payment of claims expenses;

- to better understand your insurance situation;
- to determine your eligibility for insurance products and services we offer;
- to help us better understand the current and future needs of our clients;
- to communicate to you any benefit, feature and other information about products and services you have with us;
- to help us better manage our business and your relationship with us; and
- as required or permitted by law.

For these purposes, we may make this information available to our employees, our agents, service providers and other third parties, who are required to maintain the confidentiality of this information.

In the event our service provider is located outside of Canada, the service provider is bound by, and the information may be disclosed in accordance with, the laws of the jurisdiction in which the service provider is located. Third parties may include other insurance companies, other financial institutions, health organizations and the government (including government health insurance plans) and governmental agencies

Upon your request, we may give this information to other persons.

We may also use this information and share it with RBC companies (i) to manage our risks and operations and those of RBC companies, (ii) to comply with valid requests for information about you from regulators, government agencies, public bodies or other entities who have a right to issue such requests, and (iii) to let RBC companies know your choices under “Other uses of your personal information” for the sole purpose of honouring your choices.

#### **OTHER USES OF YOUR PERSONAL INFORMATION**

- We may use this information to promote our insurance products and services, and promote products and services of third parties we select, which may be of interest to you. We may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided.
- We may also, where not prohibited by law, share this information with RBC companies for the purpose of referring you to them or promoting to you products and services which may be of interest to you. We and RBC companies may communicate with you through various channels, including telephone, computer or mail, using the contact information you have provided. You acknowledge that as a result of such sharing they may advise us of those products or services provided.
- If you also deal with RBC companies, we may, where not prohibited by law, consolidate this information with information they have about you to allow us and any of them to manage your relationship with RBC companies and our business.

You understand that we and RBC companies are separate, affiliated corporations. RBC companies include our affiliates which are engaged in the business of providing any one or more of the following services to the public: deposits, loans and other personal financial services; credit, charge and payment card services; trust and custodial services; securities and brokerage services; and insurance services.

You may choose not to have this information shared or used for any of these “Other uses” by contacting us as set out below, and in this event, you will not be refused insurance products or services just for that reason. We will respect your choices and, as mentioned above, we may share your choices with RBC companies for the sole purpose of honouring your choices regarding “Other uses of your personal information”.

## **YOUR RIGHT TO ACCESS YOUR PERSONAL INFORMATION**

You may obtain access to the information we hold about you at any time and review its content and accuracy, and have it amended as appropriate; however, access may be restricted as permitted or required by law. To request access to such information, to ask questions about our privacy policies or to request that the information not be used for any or all of the purposes outlined in “Other uses of your personal information” you may do so now or at any time in the future by contacting us at:

**RBC Insurance Company of Canada**

**P.O. Box 97, Station A**

**Mississauga, Ontario L5A 2Y9**

**Phone: 1-866-863-6970**

**Fax: 905-813-4701**

## **OUR PRIVACY POLICIES**

You may obtain more information about our privacy policies by asking for a copy of our “Financial fraud prevention and privacy protection” brochure, by calling us at the toll free number shown above or by visiting our web site at [www.rbc.com/privacysecurity](http://www.rbc.com/privacysecurity).



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