

## Ask Travel - Schedule of Benefits (All values in US Dollar)

	Plan	Schengen	Excess	Worldwide	Excess	Silver	Excess	Gold	Excess	Platinum	Excess
<b>Section A</b>	<b>Personal Accident Benefits</b>										
A1	Personal Accident	10,000	Nil	10,000	Nil	15,000	Nil	20,000	Nil	30,000	Nil
A2	Accidental Death (Common Carrier)	Limit to 10% of Available limit	Nil	Limit to 10% of Available limit	Nil	Limit to 10% of Available limit	Nil	Limit to 10% of Available limit	Nil	Limit to 10% of Available limit	Nil
<b>Section B</b>	<b>Medical Benefits</b>										
B1	Emergency Medical Expenses and Emergency Medical Evacuation	50,000	150	50,000	150	75,000	150	100,000	150	150,000	150
B2	Emergency Dental Care	200	50	200	50	200	50	300	50	300	50
B3	Repatriation of Mortal Remains	Covered	NA	Covered	NA	Covered	NA	Covered	NA	Covered	NA
<b>Section C</b>	<b>Additional Assistance Services</b>										
C1	Escort of Dependent Child	Covered	NA	Covered	NA	Covered	NA	Covered	NA	Covered	NA
C2	Delivery of Medicines	Covered	NA	Covered	NA	Covered	NA	Covered	NA	Covered	NA
<b>Section D</b>	<b>Loss or delay of Checked Baggage</b>										
D1	Loss of checked baggage	NA	NA	NA	NA	NA	NA	1,000	50	2,000	50
D2	Delayed baggage	NA	NA	NA	NA	NA	NA	50 max 200	12 Hrs.	75 max 300	8 Hrs.
<b>Section E</b>	<b>Loss of Passport</b>	100	50	100	50	200	50	300	50	500	50
<b>Section F</b>	<b>Cancellation and Curtailment</b>	NA	NA	NA	NA	400	50	600	50	1,000	50

## Ask Travel - Plans (All values in Pak Rupees)

Duration of Cover	Schengen		Worldwide		Silver		Gold		Platinum	
	US\$ 50,000		US\$ 50,000		US\$ 75,000		US\$ 100,000		US\$ 150,000	
	Single	Family	Single	Family	Single	Family	Single	Family	Single	Family
<b>Upto 07 days</b>	1,700	2,700	1,700	2,700	2,500	4,000	3,200	5,000	3,800	6,000
<b>08-10 days</b>	2,200	3,600	2,200	3,600	3,200	5,100	3,700	5,900	5,700	9,100
<b>11-15 days</b>	2,900	4,600	2,900	4,600	4,000	6,400	4,500	6,900	6,630	10,600
<b>16-21 days</b>	3,000	4,800	3,000	4,800	4,900	7,800	5,500	8,400	9,200	14,700
<b>22-31 days</b>	3,500	5,600	3,500	5,600	6,500	10,000	6,500	10,400	12,000	19,000
<b>32-45 days</b>	5,500	8,400	5,500	8,400	8,200	13,000	9,100	14,500	16,500	26,000
<b>46-62 days</b>	5,900	9,400	5,900	9,400	9,700	15,500	11,000	17,500	21,500	34,000
<b>63-93 days</b>	6,400	10,200	6,400	10,200	11,500	18,000	12,500	20,000	27,500	44,000
<b>94-183 days</b>	9,300	14,800	9,300	14,800	16,900	27,000	18,200	29,000	56,500	90,000
<b>184-365 days ( Annual Multi Trip)</b>	14,200	22,600	14,200	22,600	21,500	34,000	25,000	40,000	72,000	115,000

\* Annual Coverage is on the basis of multiple trips each lasting for not more than 90 days. Stay abroad beyond 90 consecutive days is not covered.

- 1) Premium amounts are inclusive of duties applicable under the law
- 2) Family is inclusive of self, spouse aged upto 60 years and 04 children under 18 years of age
- 3) Quoted Premium is for people upto 60 years of age .  
for Age ranging from:  
61- Upto 65 years                    50% Increase in Premium  
66- Upto 70 years                    100% Increase in Premium
- 4) Medical fitness certificate issued by a Registered Government Medical practitioner will be required for people over 60 years of age.
- 5) Medical treatment related to any pre-existing condition, fall under exclusion and is not covered.
- 6) Travel insurance policy is only valid when the insured's departure is from Pakistan on or after the policy departure date.
- 7) For policy wording, please visit <https://www.agico.com.pk/>



Name of Insured \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

CNIC Number [ ]

Passport Number \_\_\_\_\_

Address \_\_\_\_\_

Tel No. \_\_\_\_\_

Spouse's Name \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

Passport Number \_\_\_\_\_

1. Child's Name \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

2. Child's Name \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

3. Child's Name \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

4. Child's Name \_\_\_\_\_

Date of Birth Day [ ][ ] Month [ ][ ] Year [ ][ ]

Name of Beneficiary \_\_\_\_\_

Relationship \_\_\_\_\_

Plan Selected

Schengen

Worldwide       Silver Worldwide       Gold Worldwide

Platinum Worldwide

Type

Individual                                       Single Trip

Family     Multi Trip

Destination \_\_\_\_\_

Effective Date \_\_\_\_\_

Expiry Date \_\_\_\_\_

Premium Payable (PKR) \_\_\_\_\_

Mode of Payment                                      CHEQUE                                       CASH

Date \_\_\_\_\_

Signature of the Insured Person \_\_\_\_\_

Notes