



### **HOW THE INSURED SHOULD APPLY FOR ASSISTANCE?**

Since the appearance of an event that could be included in any of the guarantees described previously, the beneficiary or any person acting in his place will necessarily contact, in the shortest possible time, in every case, the alarm center mentioned below, which will be available to help any person 24 hours.

IRAN-ASSISTANCE (SOS) Alarm center(24 hours)

[www.iranassistance.com](http://www.iranassistance.com)

Tel:+9821-88648620-4

Spoken languages: Persian & English

Email:[travel@iranassistance.com](mailto:travel@iranassistance.com)

Fax:+9821-88648502

By dialing our Emergency number, he/she will be prompt to provide:

Passport or identify card number . Policy number . Full name of the injured and the principal insured. The cause of the call.

The place he/she are located (Hotel / City / Address / Phone number )



### **ARTICLE 1. General Provisions**

#### **A) Definitions:**

1- **Insurer** : ASMARI insurance company, registration number 9655

2- **Insured** : Any foreign citizen who legally arrives in Iran and is subject to perils and services covered by this policy which he has entered this insurance contract in which his specifications inserted and undertakes to pay the premium.

3- **The Assistance company means** :

IRAN-ASSISTANCE (KOMAK RESAN IRAN) registration number 91891

4- **Premium** : The amount which the insured pays as a consideration for insurers obligations to him/her and performance of this obligations depends on the payment of premium agreed in the policy .

5- **Subject matter of insurance** : To compensate medical and nonmedical expenses and to render other services to the insured during his/her residence in Iran according to the policy conditions.

6- **Accident** : Any sudden event occurred by an external cause without the will and intention of the insured and causing him/her injury during



insurance term .

7- **Bodily injury** : Bodily injury means occurrence of any sudden, forcible factor beyond the control of the insured within the term of insurance.

8- **Injury or acute disease** : Means such injury or disease that happens during the term of insurance and make the treating physician decide to prevent the insured from continuing his/her journey or any injury or acute disease that endangers the insured to death.

9- **Illness**: Sudden or unforeseeable illness which its symptoms or its cause begins after of arrival date of the insured to Iran and makes the insured or his representative to call for medical assistance.

10- **compulsory medical quarantine**: Isolation operation and limiting the sick person intending to prevent contagion of the disease.

11- **Relatives** : Includes father, mother, sons and daughters, brother, sisters or any other person who has designated by the insured.

12- **Franchise** : insured contribution to non bedridden medical expenses which is limited to 10% of medical expenses.

**B-This contract is valid only under regulations of Islamic Republic of Iran.**

**C- Term of insurance:**

validity duration of this policy is the term inserted in the policy and is limited to 92 continuous days which starts from the insured's arrival date to the Islamic Republic of Iran. This policy becomes non valid after duration of the journey for which this policy has been obtained or at the date of exit of the insured from legal boundaries of Iran should any case happens earlier. If the insured obtains the policy after arrival to Iran the insurance cover commences the date fixed in the policy.

#### **ARTICLE 2. Insurer's Commitments**

If during validity of this policy, the insured suffers from illness or bodily injury or is subject to compulsory quarantine, the insurer must arrange for the following services and pay all related expenses.

##### **A) Transference**

- 1- To hospitalize and to transfer the insured to the closest hospital or more equipped cure center as soon as possible.
- 2- If necessary to transfer the insured to the more equipped cure centers on the basis of treating physician's recommendations as soon as possible.
- 3- If the physical condition of the insured after treatment at domicile in Iran is not suitable for returning to home as an ordinary

passenger, to return him/her to the home country on the basis of recommendation and affirmation of the treating or trusted physician of the insurer.

- 4- In case of death of the insured , to take necessary action for transferring the corpse to the nearest airport to the insured domicile in home country.
- 5- To take necessary actions for returning back the insured companions who are below 15 years old and one of the insured's relatives to the home country , if the insured is not able to continue his/her journey with a private vehicle or the vehicle which is used in the beginning of journey.
- 6- In the case the insured goes bed ridden, to take necessary actions for transferring one of the relatives of the insured from home country to Iran under treating physician's recommendation.

##### **B) Paying Expenses**

- 1- With reference to treating physician's advice concerning prompt necessity for treatment during policy term, to pay medical and hospital expenses of the bedridden insured ( after deducting franchise of non bedridden expenses) up to 10,000 Euro or Rials equivalent

according to the exchange rate as below:

- 1-1- Medical expenses include physicians preliminary visit fee, radiology, laboratory, physiotherapy and medicines expenses, outpatient surgery expenses, and transferring the injured and patients as well to related medical centers.
- 1-2- Bedridden and surgery expenses in hospitals and day-care surgery centers (at least 6 hours the insured should be confined to bed)
- 2- Non medical expenses as follow:
  - 2-1- Ordinary expenses of preparing coffin and transfer of the insured's corpse to nearest international airport to his domicile in destination country or his/her resident (funeral and burial ceremonies expenses is not a duty of insurer).
  - 2-2- If because of any incidents or infections covered by this policy the insured is confined to bed and according to treating physician's judgment and affirmation of the trusting physician of the insurer he needs a companion, ordinary expenses of coming and going of the relatives of the insured from home country to hospital and vice versa and also resident expenses up to 20 days.
  - 2-3- Unexpected return expense of returning the insured to home as a result of injuries or acute infection, if he does not succeed to enjoy his return ticket .



- 2-4- Ordinary expenses of returning under 15 years old companions and of relatives to their home country or domicile if they are unable to continue the journey by private car or the vehicle with which they have started their journey.
- 2-5- Dental emergency expenses up to 200 Euros. The expenses are only payable on treating toothache, tooth decay and extraction of tooth.
- 2-6- The expenses of preparing losses of main journey documents such as passport, driving License or consulate documents up to 200 Euro.
- 2-7- Legal aid expenses of claims against the insured during his domicile in Iran up to 250 Euros.

#### C) Medical Instruction

It is the duty of insurer to supply the insured necessary information such as hospital addresses, minor surgery centers, pharmacies and other specialized medical centers of ills and injuries and render to him/her necessary information and instructions in Persian and English.

#### D) Settling Claims

It is the duty of insurer to pay claim of the insured to his/her beneficiary within 5 days after receiving required documents.



#### E) Giving Instructions to the insured in case of documents loss.

It is the duty of insurer to give the insured necessary instructions if they lose their main journey documents such as passport and visa paper.

#### ARTICLE 3. Exclusions

The insurer shall not be liable for expenses and claims arising out of the following :

- 1- Precedent illness, re infection by a chronic or persistent disease or illnesses from which the insured had precedent knowledge and before beginning of insurance cover had been or is under treatment. Convalescence period is considered a part of illness period.
- 2- War, military aggression, actions of foreign enemy, terrorist and hostile operations (declared or not declared)
- 3- To commit suicide and to make international self injury, and collaborating, participating or assisting in confidential actions.
- 4- Participating in horse riding or bicycling or any other courses or competitions or shows with motor vehicles and participating in the professional sport exercises and games like mountain climbing ( professional climbing), aviation or any kind of flying, potholing, skin diving, exercising winter sports aiming to participate in formal exercises or displaying or exercising any kind of sports or



amusements which reasonably and logically construing as dangerous.

5- Contamination caused by nuclear radiation.

6- Child birthing within 3 months before its due course and voluntary abortion.

7- Partial or total effect of using narcotic psychedelic drugs unless the drugs prescribed by qualified physician and also to drink any kind of liquors.

8- Insureds vocational risks legally construed as the vocational incidents.

9- Congenital disorders and diseases caused by it.

10- To preventing or vaccinating.

11- Disorders caused by physiotherapy.

12- Using energy therapy and sunlight therapy and sunlight therapy to gain beautiful benefits.

13- Any symptom which arises from mental illness and insanity.

#### ARTICLE 4. Duties of the Insured

If the insured requisites the covered services he is obliged :

- 1- To contact with the nearest answering or round the clock care center in Iran in the first possible instance and render the below information:
  - 1-1- Insured's full name, number and validity date of the policy and also passport number.
  - 1-2- Domicile address in Iran and contact number.
  - 1-3- Brief description of the incident and any kind of required services.
- 2- If the insured becomes bedridden he should let the insured be informed within 5 days of bedridden date and before discharging from hospital.
- 3- The insured should not take any steps which obstructs the actions taken by the insurer against the guilty party.
- 4- In the case of requisition of the insurer the insured should submit all necessary documents for receiving indemnity from related sources

#### ARTICLE 5. Referring to Arbitrator

The parties to insurance contract should as much as possible settle their dispute by negotiation. In the case they agree on the method of arbitration they can choose an independent mutually agreed on arbitrator. If they could not find such an arbitrator each party introduces in written his/her own arbitrator to the next party. The appointed arbitrators choose the third arbitrator and after investigation they issue an arbitral award upon majority of vote. If the arbitrators cannot come to an agreement for the third one, each party can for choosing the third arbitrator refer to the competent court. Any party pays his/her appointed arbitrator fee and pay the third ones fee equally.

#### ARTICLE 6. CLAIM PRESCRIPTION PERIOD

Any claim arising from this policy can put forward within a deadline of two years from nullification, cancellation or expiration date of this policy and after the deadlines, claims are not admissible. Time limit for action can be nullified by a written and formal declaration submitted by each party only for one time. In the case of interruption, the period extends a more one year after reminded time.

#### ARTICLE 7. OTHER CONDITIONS

- 1- If the insured's visa is not issued, the insurer is obliged to nullify the policy by the request of the insured and pays back the premium after deducting 1 Euro.
- 2- If the visa is issued and the insured does not start his journey, the insurer shall nullify the policy on the requisition of the insured after expiration of visas validity and pays back the premium after deducting 1 Euro.
- 3- The period fixed for canceling application of the policy shall be within 6 months from the issuing date of policy

**The maximum time limit for the insured to submit the whole medical expenses documents to the insurer is 6 month ,from the initial date of informing the call center.**