Insurance for employees stationed abroad

Insurance certificate and terms

Valid from 18. september 2026







Information concerning terms and conditions

The following terms and conditions of insurance are included:

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General conditions (Gen 2.9)

The text in all following terms and conditions is a translation of the original conditions written in Norwegian language. In case of discrepancy(ies) between this translation into English language and the original in Norwegian language, the latter shall prevail.

These conditions apply, unless they are waived in individual industry conditions or on the insurance certificate.

1 The insurance contract

The insurance contract is subject to the provisions of the Insurance Contracts Act (ICA) no. 69 of 16 June 1989.

1.1 Duration of the insurance contract and calculation of premium

The insurance is valid from 00.00 hours on the date on which the contract is adopted by the parties or a later agreed date. The insurance is valid until 24.00 on the final date of the contract period. The same applies for subsequent renewals.

If there is a requirement for payment of the insurance before If's liability attaches, this is stated on the insurance certificate for the coverage in question.

When an insurance is cancelled during the insurance period, we are entitled to keep a part of the premium as payment for that period the insurance actually was eligible, unless otherwise is stated in the terms and conditions. A supplementary charge may be added to premiums paid by instalment.

1.2 Renewal of the insurance

The insurance, which applies for a period of at least one year, shall renew for one year at a time unless the policyholder has terminated the contract before the expiry of the insurance period.

1.3 Cancellation during the insurance period

1.3.1 The insured may terminate

Life insurance

- At any time during the insurance year.

This section may not apply to collective insurance contracts, and in such cases this will be stated in the insurance certificate.

Other personal insurance

- At any time with one month's notice, cf. the Norwegian Act of 16 June 1989 No. 69 on Insurance Contracts (the Insurance Contracts Act – FAL), Section 12-3, paragraph 3; if the need for the insurance no longer exists or if other special circumstances arise, the insurance may be cancelled immediately.

This section may not apply to collective insurance contracts, and in such cases this will be stated in the insurance certificate.

Non-life insurance

- If the need for the insurance no longer exists or other special circumstances arise; cf. FAL, Section 3-6, paragraph 1.
- In order to move to another insurer, with one month's notice. Such notice must include information regarding the date of the move and the name of the other insurer; cf. FAL Section 3-6, paragraph 2, sentence 2.

In order for the cancellation to fall under the regulations regarding change of insurer, the new insurance must have the same or almost the same extent of coverage.

The right to change insurers may not apply to collective insurance contracts and insurance contracts for companies that are subject to FAL Section 1-3, points a to e. In such cases, this will be stated in the insurance certificate.

1.3.2 Termination in the insurance time

The period of notice for If is two months before the end of the period of insurance. The terms and conditions and price of the insurance may be changed and come into effect on the renewal date.

With one week's notice

If fraud is detected in relation to a claim settlement; cf. FAL Sections 8-1 or 18-1.

With 14 days' notice

If incorrect or incomplete information has been provided regarding the risk; cf. FAL Sections 4-3 or 13-3.

With two months' notice

Cf. FAL Sections 3-7 or 12-4, if reasonable and

- the policyholder/indemnified/insured has caused, or contributed to causing, intentional damage, or
- the indemnified has neglected its obligations in respect of safety regulations, or
- the course of events leading to the claim deviates significantly from the norm, or
- there have been at least three claims in total during the last 12 months under this and other contracts with If, or
- forsikringstaker/sikrede/forsikrede har medvirket til svik mot If ihht FAL §§ 4-3 eller 13-2 eller §§ 8-1/18-1, eller
- the policyholder/indemnified/insured has contributed to fraud against If under FAL Sections 4-3 or 13-2 or 8-1/18-1, or
- the policyholder has repeatedly failed to meet payment due dates, or

- the policyholder/indemnified/insured, or someone who can be identified with these, has made threats against If employees, or
- the policyholder/indemnified/insured has committed a criminal offence against If, or
- If is unable to perform continuous monitoring of the customer relationship in accordance with its obligations under the Norwegian Anti-Money Laundering Act.

With two months' deadline
Cf. FAL Sections 3-7 and 12-4, where the use of the insured item or the activities of the indemnified change during the insurance period in a way that:
- means If would not have provided the insurance if the new circumstances had prevailed when the insurance period began, or
- affects If's ability to reinsure.

1.4 In case of non-payment
Where the insurance is cancelled due to non-payment, If is entitled to a premium for the period it has held liability pursuant to the provisions of Chapter 5 and/or Chapter 14 of the Norwegian Insurance Contracts Act (FAL).

If is also due a supplement for the following costs:
Policy issuing cost of up to NOK 300 per agreement and mortgagee interest of up to NOK 300 per insurance object, however, NOK 600 per leisure boat.

2 In the event of a claim
2.1 Loss assessment
If there is reason to demand assessment under the insurance terms and conditions, the following provisions on the procedure shall apply:

The assessment can be demanded at any time while the claim is handled. An assessment is made by experts and impartial persons. Each party selects a loss assessor. If either of the parties wishes, they can choose a special loss assessor for specific items in the event of consequential loss, who can answer specific questions.

If one party has provided the other party with written notification of the chosen loss assessor, the other party is obliged to provide corresponding information about his own choice within one week of receiving such notification. Before the assessment, the two loss assessors select an arbitrator.

If either party demands it, this person must be resident outside the parties' home town and outside the municipality in which the insured event has occurred. If either party fails to select a loss assessor, one will be appointed on his behalf by the court in the judicial district in which the assessment is made. This is also the case if the assessors are unable to agree on an arbitrator.

The loss assessors are responsible for obtaining the information and making the investigations they consider to be necessary. They are also obliged to make their assessment on the basis of the insurance terms and conditions. The two loss assessors make their valuation – answering questions in the event of consequential loss – with no need to bring in the arbitrator. If they are unable to agree, the arbitrator is brought in and, according to the same rules, gives his judgement on the disputed points. If the arbitrator is used, the compensation is calculated on the basis of his judgement. However, the compensation shall remain within the framework of the two loss assessors' appointment.

The parties each pay their own loss assessor. Fees paid to the arbitrator and any other expenses associated with the assessment are borne equally by the parties. However, should If require an assessment in the event of material damage and the other party is a private policyholder, If will cover all costs of associated with the assessment if the policyholder is unwilling to cover his own share. The loss assessment valuations are binding on both parties.

2.2 Interest on the compensation amount
The indemnified party is entitled to interest under the provisions of section 8-4 or section 18-4 of the Insurance Contracts Act.

2.3 VAT
If does not cover VAT that the insured as a business has the right to deduct.

2.4 Inadequate/incorrectly performed repairs
If is not liable for inadequate/incorrectly performed repairs, or consequential damages for the repair, unless the new claims are covered by the insurance under the insurance terms.

3 In case of fraud
Anyone guilty of fraudulent behavior towards If, will lose any claim for compensation against If under this and any other insurance contracts covering the same event. Already paid compensation amounts can be demanded repaid. If can terminate any insurance agreement with the insured, cf. FAL §§ 4-2, 4-3 and 8-1 or § 13-2, 13-3 and 18-1, cf. also clauses 4.1 and 10.

If can also terminate any insurance agreement with the person who contributes to fraud, cf. also section 1.3.2 above.

4 General information
4.1 Identification
Provisions regarding the insured's right to compensation becoming wholly or partly void as a result of the insured's actions or omissions will be similarly applied with respect to actions or omissions by persons mentioned in FAL section 4-11 paragraph 2.

In addition, the following applies to business insurance. The acts or omissions that result in a waiver or reduction of the indemnified party's right to compensation result in an equivalent waiver or reduction if they are committed by persons who perform work of a leading nature or by others who have an independent position within the business enterprise. Persons who have an especially independent position are defined as persons who perform job assignments without supervision from others or who perform job assignments for which they themselves are responsible. The indemnified party is equally identified with acts or omissions committed by a third party performing work on behalf of the indemnified party.

4.2 Illegal Interests

The insurance covers only legal interests which can be valued in money.

4.3 Undeclared items

The insurance will not pay compensation for items that have been purchased, or received as a gift, outside of Norway and have not been declared on import in accordance with applicable regulations. See the Act of 11.03.22 on the import and export of goods (the Goods Act), the Act of 11.03.22 on customs duty (the Customs Act) and the Norwegian Act of 19 June 2009 No. 58 on Value-Added Tax (the VAT Act) with associated regulations.

4.4 Prohibition of profit

The insurance shall not result in profit, but only indemnify the actual loss suffered within the framework of the insurance contract. The amount insured does not constitute proof of the value of the property or interest.

4.5 Choice of law

The insurance contract is subject to Norwegian law unless this is in conflict with the Act on Choice of Law in Insurance of 27 November 1992, no. 111, or has been otherwise agreed.

4.6 Currency

Premium amounts, amounts insured, compensation etc. arising from the insurance contract are calculated in Norwegian kroner (NOK) unless otherwise stated in the terms and conditions or on the insurance certificate.

4.7 Guarantee scheme for non-life insurance

If is a member of the non-life insurance guarantee scheme; see the Norwegian Act of 10 April 2015 No. 17, Chapter 20A on Financial Institutions and Financial Corporations (the Financial Institutions Act). This scheme is intended to provide security for the indemnified in the event that If becomes insolvent and is unable to pay its liabilities under the non-life insurance contracts it has concluded.

The guarantee scheme covers up to 90% of an individual claim. However, claims under home insurance and compulsory liability insurance have 100% cover.

The guarantee scheme does not cover insurance claims in excess of NOK 20 million per claim, per insurance object and per insurance event. The guarantee scheme only covers claims regarding risks that exist here in the country, cf. the Financial Enterprises Regulations § 20A-1 second paragraph.

The guarantee scheme does not cover credit insurance, life insurance, energy, insurance, aviation insurance and marine insurance. However, the latter is covered if the insurance relates to ships that are exempt from the registration requirement under section 11, paragraph 2, of the Norwegian Maritime Code no. 39 of 24 June 1994 or fishing vessels up to and including 50 gross tons registered in the Ship Register, cf. section 11, paragraph,1, point 1, of the Maritime Code.

The guarantee scheme does not cover business insurance when the insurance relates to an entity which at the inception of the contract or its subsequent renewal fulfils at least two of the following conditions:

- has more than 250 employees
- as a turnover of at least NOK 100 million according to the most recent annual report
- has assets of at least NOK 50 million according to the most recent balance sheet

The guarantee scheme nevertheless covers liability insurance that is required by Norwegian law (compulsory liability insurance). For further details, please see the Financial Institutions Act chapter 20A.

4.8 Nuclear, biological, chemical and radioactive cause of loss or damage

This Insurance Agreement does not cover, directly or indirectly, loss or damage caused by or consisting of:

- ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion or nuclear fuel,
- the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof,
- any weapon or device employing atomic or nuclear fission and/or fusion or other like reaction or radioactive force or matter,
- the radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter. The exclusion in this sub-clause does not extend to radioactive isotopes, other than nuclear fuel, when such isotopes are being prepared, carried, stored, or used for commercial, agricultural, medical, scientific or other similar peaceful purposes or,
- any chemical, biological, bio-chemical, or electromagnetic weapon.

All regardless of any other cause or event contributing concurrently or in any sequence to the damage.

4.9 War, strikes, riots and civil unrest

This insurance agreement does not cover, directly or indirectly, loss or damage caused by or consisting of war, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not), civil war, mutiny, rebellion, strike, riot, civil commotion assuming the proportions of or amounting to a popular rising, military rising, revolution, insurrection or military or usurped power; all regardless of any other cause or event contributing concurrently or in any sequence to the damage.

4.10 Terror

For insurance of buildings, machinery, moveable property, goods and operating losses associated with business activity and public services and buildings/loss of rent relating to housing cooperatives/jointly-owned property, liability for damages is limited to EUR 50,000,000 per event if the compensation relates to damage caused by or associated with an act of terrorism. For insurance objects and interests that are outside the Nordic countries, Estonia, Latvia or Lithuania, damage caused by or associated with an act of terrorism is not covered.

An act of terrorism is defined as an unlawful, harmful event aimed at the general public, including acts of violence or the dangerous spread of biological or chemical substances – and which appears to have been carried out for the purpose of exerting influence on political, religious or other ideological bodies or inducing fear. An event covers all the damages affecting If and its parent company and other branches' policyholders in the Nordic countries, Estonia, Latvia and Lithuania within a time frame of 48 hours. If the defined limit per event is exceeded, the indemnified party must bear a proportionate reduction of the compensation amount.

Loss or damage caused by or related to terrorism through the use or threatened use of:

- nuclear weapons or, dangerous dispersal of biological or chemical substances is not covered under any circumstances.

This limitation applies to the extent that it is not expressly stated on the insurance certificate or in the personal insurance or travel insurance terms and conditions that it has been fully or partly waived.

4.11 Earthquakes and volcanic eruptions

If is not liable for loss or damage, or increased loss or damage, directly or indirectly caused by or associated with earthquakes and volcanic eruptions. This exemption from liability applies to the extent that it is not expressly stated in the industry conditions that it has been waived.

4.12 Violations of international law

If P&C Insurance shall not be deemed to provide cover or to be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose If P&C insurance to any sanction, prohibition or restriction under United Nations resolution. The same shall apply to trade or financial sanctions enshrined in laws or directives adopted by the EU, USA or Norway.

4.13 Jurisdiction

Disputes arising from the insurance contract shall be settled by a Norwegian court, unless this is contrary to mandatory rules contained in current legislation or unless otherwise agreed.

4.14 Personal information

If processes personal data in accordance with applicable legislation on insurance and data protection. You can read more about how we process personal data on our website: http://www.if.no/personopplysninger.

4.15 Traffic insurance fee to the state

If collects a traffic insurance fee on behalf of the government and this fee must be paid for all registered vehicles under 7,500 kg. Payment of this fee is a prerequisite for the insurance contract. If this fee is not paid for such insured vehicles, this will have the same effect on insurance policies that form part of the same insurance contract as non-payment of insurance premiums.

4.16 EU complaint portal

The EU complaint portal can be used in matters relating to the purchase of services and goods online. (The complaint portal has primarily been created for cross-border cases where the parties are in different countries, but this does not exclude the possibility that national cases can be filed). Link to the portal can be found on www.if.no under the heading "klagemuligheter". In the complaint portal when asked to fill in If's email, use: kundeombudet@if.no.

4.17 General deviations from FAL for major risks (§ 1 of the Norwegian Insurance Contract Regulations) and non-consumers (FAL § 1-2a)

4.17.1 Communication – FAL Section 1-6

The following deviations are agreed for "major risks" and non-consumers: An electronic message from the company shall be deemed to have been received and have come to the recipient's knowledge at the time when the message is sent to the recipient's agreed communication platform. There is a deviation here from Section 1-6, second and third paragraphs.

The following deviations are also agreed for "major risks": All communications between the parties are permitted to take place via electronic communication. The customer cannot opt out of this form of communication. Communication takes place through agreed communication platforms. There is a deviation here from Section 1-6, first paragraph.

Where the Norwegian Insurance Contracts Act stipulates that a party must be notified, the requirements of the Act are met by such notice being sent to the agreed communication platform. There is a deviation here from Section 1-6, fourth paragraph. Written document means paper or any electronic communication sent to the recipient's agreed communication platform. There is a deviation here from Section 1-6, fifth paragraph.

4.17.2 Pre-contractual obligations – second part of FAL
The following deviations are agreed for "major risks" and non-consumers: There is a deviation from Section 1C-3 in that the company is not obliged to provide a standardised information document to the customer.

The following deviations are also agreed for "major risks": The second part of the Act does not apply to insurance distribution related to agreements on major risks. There is a deviation here from Section 1A-1, first and second paragraphs.

There is a deviation from Section 1B-1 in that the customer identifies their needs and requirements before entering into the insurance agreement and ensures that these are met through the agreement. This also applies in relation to all other pre-contractual obligations in Section 1B-1, including in relation to alternative forms of cover and relevant extended cover, and applies to both non-life and personal insurance. There is no requirement for the use of a written document, either in connection with recommendations or when submitting tenders. The insurance distributor can require remuneration for the fulfilment of information or notification obligations pursuant to the Norwegian Insurance Contracts Act.

Chapter 1C is deviated from in its entirety. The customer's information needs are considered to have been identified and met continuously and to the extent necessary in the ongoing negotiations and in the communication between the insurance distributor and the customer prior to entering into the agreement. The customer has ultimate responsibility for requesting the information that the customer believes is relevant before entering into the agreement.

4.17.3 Burden of proof (Section 21-1)/compensation for breach of duty (Section 21-2)/appeal rules (Section 22-1)
The following deviations are agreed for "major risks" and non-consumers: There are general rules concerning the burden of proof that apply to the question of whether the insurance company has fulfilled its obligations under law and regulations. There is a deviation here from Section 21-1.

The insurance company's liability for compensation is limited to the positive contractual interest, i.e. the insurance payment to which the customer would have been entitled if the insurance company had fulfilled its obligations pursuant to Section 1-5, first paragraph. There is a deviation here from Section 21-2.

The insurance company responds to appeals and claims relating to breaches of Section 1-5, first paragraph, within the framework of the company's standard processing time. There are no formal requirements or specific deadlines for the response. There is a deviation here from Section 22-1, third paragraph.

4.18 Exclusions concerning specific Russia related risks

The insurance does not cover:

- transports of goods within, to, from or through the Russian Federation, Belarus, or any non-government controlled areas in Ukraine and the Russian Federation's territorial waters.
- any damage or claim for compensation regarding transport of goods within, to, from or through the Russian Federation, Belarus, or any non-government controlled areas in Ukraine and the Russian Federation's territorial waters.
- property, or damage to property, be it of whatever nature, which has been directly or indirectly purchased or imported after 31. December 2022 from the Russian Federation.

Unless specifically agreed, transports or any damage or claim for compensation regarding transport of goods to, from and within Kazakhstan, Turkmenistan, Kyrgyzstan, Uzbekistan, Tajikistan, and Azerbaijan territory are excluded.



Terms document Expatriates

1 To whom does the insurance apply
Unless otherwise agreed, the insurance cover shall apply to the person(s) specified in the certificate of insurance.

The following shall apply if it is agreed that the insurance cover will apply to a family that will live together with the Insured at the deployment location:
- The co-insured spouse/cohabitant must have the same residential address as the Insured. A spouse/cohabitant/ child who remains in the country of domicile or children who go to school/study outside of the deployment location shall not be covered by the insurance.
- Pursuant to Norwegian law, cohabitants are entitled to payment of compensation in the event of death only if they are listed as a beneficiary.
- The co-insured spouse shall not be covered by the insurance from the date on which a court rules in favour of or grants a separation or divorce, even if the final separation/divorce is not yet final or legally binding.
- The Insured's children shall be co-insured until they turn 21 years of age. The child must have the same registered address as one of the parents.

Children refer to:
- The Insured's children, including children from a former marriage or relationship.
- The co-insured spouse/cohabitant's children from a former marriage or relationship.
- Adoptive children. The child shall be co-insured from the date on which the Insured took over the actual care of the child.
- Foster children. The child must have the same registered residential address as the Insured.
- Children born through surrogacy - The child is co-insured from the time they have received a Norwegian passport and social security number, at the earliest after they have been discharged from hospital. Illness and damage that is congenital or proven before this is not covered by the travel insurance.
- The insured's grandchildren and great-grandchildren are also included until they are 21 years old when traveling with the insured.

2 When does the insrance apply
The insurance applies:
- during the Insured's stay in the geographical area of the deployment location and for the period stated in the certificate of insurance.
- during holiday and leisure trips worldwide.
- during business trips worldwide.

Cancellation
Cancellation insurance shall apply for the period from the time at which the Insured pays for the trip until the Insured leaves their residential address on the departure date.

3 Where does the insurance apply
The geographical coverage of the insurance is stated in the certificate of insurance.

3.1 What the insurance does not cover
The insurance does not apply to private holiday and leisure trips to areas that the Ministry of Foreign Affairs in the insured's country of stationing officially advises against traveling to or staying in.

The insurance will be invalid for the entire trip, even if the travel advice is canceled after departure. Without additional insurance, see section 11, the insurance does not apply during stationed stays in, or on trips to Russia, Belarus and Ukraine.

4 Restrictions and exceptions
The insurance does not cover:
- loss/damage/expenses that are directly or indirectly linked to strikes, lockouts or other forms of labour disputes.
- additional expenses/financial losses incurred due to bankruptcy.
- loss of income from employment - whatever the cause.
- participation in expeditions and similar trips without additional insurance having been taken out, see Item 11.

What the insurance covers and the sums insured that apply are stated in the certificate of insurance.

5 What is covered
- Medical insurance
- Recall/return journey/summoning
- Evacuation
- Cancellation
- Delays
- Property
- Home contents
- Liability cover
- Legal aid insurance
- Refund of deductible for rental transportation vehicle
- Refund of excess in the event of damage to personal passenger car
- Identity theft
- Accident insurance - optional

5.1 Medical Insurance
The insurance covers documented expenses incurred during the insurance period for necessary and customary medical treatment resulting from:
- the insured person's acute illness, accidental injury, or death.
- an unexpected acute exacerbation of an existing medical condition.
- at the duty station, coverage additionally includes the renewal of necessary prescription medications and consultations with a physician for the monitoring and treatment of an existing or chronic medical condition.

In addition, the insurance covers expenses incurred during the insurance period for emergency repatriation/medical evacuation of the insured person, delayed return travel/ changed travel itinerary, home nursing care, return travel/ replacement personnel, expenses related to pregnancy and childbirth, and dental treatment.

We cover:
- fees for consultations with a general practitioner (GP) or medical specialist
- medical fees for examinations, anesthesia, and surgery
- laboratory tests, diagnostic tests, and X-rays
- prescription medications
- childhood vaccinations
- surgery
- hospital stays in a semi-private room including nursing care, medication, dressings, and casts
- physicians' fees for examinations, anesthesia, and surgery
- surgical procedures and treatment/stays in an intensive care unit (ICU)
- pathology services, laboratory tests, X-rays, MRI, CT, and PET scans
- examinations and treatment for cancer
- prosthetic body parts (excluding teeth) that are surgically implanted to replace one or more damaged or injured body parts
- the hospital stay of one parent when a child under the age of 18 is hospitalized, provided that the child is covered by the insurance
- up to 24 treatments with a physiotherapist, chiropractor, naprapath, or osteopath upon referral from a physician
- up to 24 consultations with a psychiatrist or psychologist upon referral from a physician

5.1.1 Pregnancy and Childbirth
We cover necessary expenses for:
- ordinary pregnancy check-ups (doctor's fees, ultrasound, etc.)
- hospital stays (semi-private) in connection with childbirth/ elective caesarean sections and check-up immediately after childbirth

The Company will cover expenses for necessary medical evacuation if it is not medically safe to give birth at the deployment location. Please see Item 5.1.7 concerning companion's expenses.

5.1.2 Home nursing
Expenses for authorised nursing care at home immediately after hospital admission will be covered up to NOK 1,200 per day for up to 30 days per insurance year. Help at home is covered only when necessary for medical reasons to the extent that the Insured would otherwise have had to stay in hospital for longer.

5.1.3 Transport by ambulance
Necessary expenses for ambulance transport to/from hospital in connection with hospital admission will be covered. Expences to private air transport not requested by a doctor or hospital is not covered.

5.1.4 Dental expenses
Expenses for dental treatment are covered up to NOK 10,000 per Insured per insurance year.

5.1.5 Transport home/medical examinationg
Following an insurance event as described in Item 5.1 and subject to Ifs prior approval, the Company will cover transport to the closest qualified treatment location or home if no adequate medical treatment can be provided in the area in which the Insured is located. The Company will be entitled to request that the Insured be transported to the deployment location or the country of domicile if treatment can be postponed until the Insured has returned home.

In the event of treatment outside of the country of domicile/ deployment country, the Company will cover additional expenses for travel directly to the Insured's home/place of residence when such return travel home is deemed medically safe.

In the event of death at the deployment location, the Company will cover additional expenses for the transport of the coffin/urn to the deceased's home. In place of transport home, the Company may cover funeral costs at the deployment location up to NOK 40,000 per claim.

5.1.6 Return journey/employee substitution
In the event that an insurance event as described in Item 5.1 results in the Insured's transport home, the Company will cover necessary additional expenses for one journey back to the deployment location within one (1) month of the Insured being declared fit again. The return journey must be pre-approved by the Company and must take place within the planned stay at the deployment location and during the insurance period.

In the event that the Insured, for medical reasons and by order of a doctor, is unable to return to the deployment location, the Company will cover a replacement within 14 days of the Insured returning home.

5.1.7 Medical escort
After an insurance event as described in Item 5.1 and subject to prior approval, the Company will cover necessary and documented expenses for travel and accommodation for one doctor-assigned companion if they will:
- remain together with the Insured at the destination until the journey home/further travel is possible in those cases where the journey home/further travel has been postponed/amended on the orders of a local doctor.
- accompany the Insured on their journey to a treatment centre or home/place of residence.

5.1.8 Delayed repatriation/changed itinerary
After an insurance event as described in Item 5.1, the Company will cover necessary and documented additional expenses for travel and accommodation if the Insured, for medical reasons and by order of a doctor, is unable to follow the scheduled itinerary. The postponement/change must be pre-approved by the Company. Additional expenses will not be covered when the Insured has returned to their deployment location

5.1.9 Personal expenses during hospitalisation
In the event of hospital stays due to causes described in this condition, the Company will cover up to NOK 1,000 per claim for documented personal expenses for toiletries, food, telephone usage, etc. during the stay.

5.1.10 Expences on preventive health
The Company will cover necessary and documented expenses up to NOK 10,000 per person per insurance year for:

- Vaccinations that are required by the local authorities during the deployment stay and that are recommended by the WHO.
- Medical tests that are required by the local authority during the deployment stay.
- Annual health checks without any specific symptoms of acute illness.

5.1.11 Crisis therapy
The insurance covers up to 10 hours of psychological first aid as a result of:

- Mental reactions resulting from a sudden and unforeseen event such as violence, robbery, serious traffic accident or death when the insured himself is affected by or is present at such events without being physically injured himself.
- The insurance also covers psychological first aid in connection with the insureds serious illness (serious illness linked to the list of diagnoses found in the Definition overview at the back of the terms and conditions).

Treatment must be initiated in direct connection with the incident and without undue delay. Psychological first aid does not include ordinary psychological treatment of disorders that have developed as a result of psychological strain over time, and which do not require immediate psychological assistance. The treatment must be provided within our network of psychologists.

If the Insured has several insurance policies with cover for psychological first aid with us, such assistance is only covered under one of these policies for one and the same event.

This coverage applies to everyone travelling with the insured person.

5.1.12 What the insurance does not cover
The insurance does not cover:

- diagnosis, imaging and treatment, for example surgery, radiotherapy, laser treatment, etc. related to illness/ disorders known prior to entering into the insurance agreemen.t
- expenses incurred in countries other than the country of domicile or the deployment country if the Insured has travelled there for medical treatment.
- for members of the Norwegian National Insurance Scheme, expenses for stays and treatment at private clinics in Norway/the Nordic countries are not covered for known illnesses or medical conditions where the need for treatment existed prior to arrival in Norway/the Nordic countries.
- treatment due to the use/misuse of alcohol, medicines or narcotic substances.
- withdrawal treatment and associated medication, such as methadone, subutex, etc.

The Company also does not cover expenses due to or in connection with:

- injury, illness or disorders caused by nuclear radiation or chemical contamination
- participation in war, public disorder or terrorism
- contribution to/participation in criminal acts
- stays outside of hospital in connection with recovery/ rehabilitation
- incorrect treatment or incorrect medication
- fertility treatment, including examinations and medical assessments related to such treatment
- sterilization, contraception, sexual dysfunction/problems, or gender incongruence.
- vision correction measures
- speech difficulties
- learning disabilities, supported learning and help with homework
- physical developmental problems (dwarfism, etc.)
- congenital injuries/disorders that do not require urgent treatment
- cosmetic surgery/cosmetic treatment such as breast reduction, hair transplantation, eyelid surgery, etc., even if such treatment is performed for medical reasons
- skincare and aids, e.g. creams, that are not related to acute and treatment-intensive skin disease
- teeth whitening, braces and associated surgery
- alternative medical treatment, such as natural medicine, homeopathy, Traditional Chinese Medicine or other “non-Western medical
- treatment
- foot therapy
- medical aids and assistive devices, including monitoring devices, wigs, orthopedic/custom shoes, shoe inserts/ orthotics, hearing aids, occlusal
- splints (night guards), eyeglasses, contact lenses, sleep apnea treatment equipment (CPAP, APAP, BiPAP/ASV) including masks and
- accessories, and the assessment, fitting, or adjustment of such devices

- obesity treatment such as surgery, exercise, slimming programmes, etc.
- dietary advice
- couples therapy/family therapy
- use of vitamins/dietary supplements
- health examinations that are part of the company's HSE programme known prior to deployment

5.2 Accident insurance

Please refer to the regulations regarding settlement of claims in Item 9.6.

If the agreement includes accident insurance, the insurance will apply if the Insured is affected by an accidental injury. Accidental injury is defined as a physical injury to the person caused by a sudden and unexpected external event, an accident, which occurs during the insurance period.

5.2.1 Treatment expenses

The insurance will cover expenses incurred for treatment and travel as a result of accidental injuries. Treatment expenses refer to reasonable and necessary treatment expenses, incurred in the Nordics during the first four years after the accidental injury, for:

- doctors and dentists.
- medicines and bandages prescribed by a doctor or dentist.
- chiropractor/physiotherapy treatment prescribed by a docto.r
- necessary travel expenses from home for necessary treatment. If will cover the least expensive method of transport, taking into consideration medical condition.

For damage to teeth for children under 18, If pays compensation for expenses required for the initial permanent dental treatment (bridge, crown etc.), on prior approval by the Company, even if the final treatment has to be postponed in excess of two years due to the age of the child. Settlement shall nevertheless be made at the latest ten years after the end of the year in which the injury occurred, based on a cost estimate from a dentist and/or dental technician.

Coverage is conditional upon the expenses not being recoverable from any other source.

5.2.2 Medical disability

The insurance cover shall include medical disability if the injury claim has resulted in medical disability. Medical disability means a physical, permanent reduction in function that, from experience, a specific injury causes.

The degree of disability will be determined on the basis of the disability tables issued on 21 April 1997 by the Ministry of Health and Social Affairs in Regulations no. 373, part 1. Section 2, parts 2 and 3. The degree of disability shall be established without regard to profession, impaired ability to perform paid work, leisure interests or similar. It is the sum Insured at the moment the injury claim occurs that is used as a basis for calculating disability benefits. The benefits constitute a proportional percentage of the sum insured equivalent to the degree of medical disability.

5.2.3 Death

The insurance covers compensation in the event of death if the Insured dies as the result of an injury that occurs during the insurance period. The entitlement to compensation shall take effect at the time at which the Insured dies. It is the sum Insured at the moment the injury claim occurs that is used as a basis for calculating compensation in the event of death.

5.2.4 What the insurance does not cover

5.2.4.1 Occupation/trade

The insurance shall cover persons who are not considered occupationally active or who practice an occupation with a low risk of accident, i.e. Occupations such as:

- supervisory work.
- first-time military service and refresher exercises.
- office work.
- manual work which entails limited physical activity and/or is performed without the use of production aids/machines. Examples: watchmaker, nurse, hairdresser, goldsmith.

Occupations with high risk of accident are defined as:

- occupations that involve working at heights (ladder, scaffolding, lift, etc.)
- occupations that are practised with the aid of machinery and production equipment.
- occupations that involve contact with chemical substances.
- occupations that involve agriculture, forestry, animal husbandry and reindeer husbandry.
- transport activities.
- warehouse and construction work.
- plumbers.
- electricians.
- painters.
- joiners.
- road and construction work.
- cleaners.
- military service.
- fire service.
- security/janitorial services.
- police and prison services.

In the case of people who practise such occupations, the insurance only covers their leisure time, unless additional coverage has been agreed with the Company. If such an agreement has not been entered into, the insurance shall not apply during the performance of the occupation or when at the place of work.

Work performed in conjunction with building and maintenance of own home/holiday home used only by the Insured for private purposes is covered by the insurance.

5.2.4.2 Psychological or behavioural disorders, learning disabilities and the like
The insurance does not provide the right to compensation for psychological disorders, behavioural disorders, learning difficulties etc. which are covered by the diagnosis codes from and including F00 to and including F99, in accordance with ICD-10* and the consequences of such disorders..

*) ICD-10 is the 10th revision, with subsequent amendments, of the international statistical classification of illnesses and related health problems, adopted by the World Health Organisation – WHO.

5.2.4.3 Illness, contagious disease and other particular conditions
The insurance does not cover accidental injury caused by illness, disease or predispositions to illness or disease, such as injury caused by an epileptic fit, loss of consciousness, stroke etc. The insurance also does not cover the following conditions, even if an accidental event is the triggering cause:
- strokes.
- heart attacks.
- cancer.
- Back pain resulting from back injuries, unless the pain occurred due to a spinal or dorsal vertebrae fracture that can be demonstrated, radiographically, and the fracture was due to an accident.
- infections, unless the infection was caused by a skin injury which resulted from an accident.

Insect stings and bites are not considered an accident event.

5.2.4.4 Poisoning
The insurance does not apply to an accidental injury which is caused by poisoning from food, drink or natural stimulants.

5.2.4.5 Medical treatment and medicine use
The insurance does not cover accidental injuries caused during medical examinations, treatments etc. or when taking medicines, unless the Insured is being treated for an accidental injury for which If is liable.

5.2.4.6 Scars and disfigurement
The cover does not provide a right to compensation in the event of scars and disfigurement that result in a degree of disability of less than 15%.

5.2.4.7 Dental Damage
Dental injuries do not provide a right to disability benefits.

5.2.4.8 Participation in professional sports and peacekeeping forces
The insurance does not cover accidental injury incurred in connection with:
- Sports or expeditions that give the insured gross income and/or sponsorship funding of more than 2 G per year (G = the Norwegian National Insurance basic amount).
- Participation in peacekeeping forces or in military/ paramilitary forces in other countries/organisations.

5.2.4.9 Fighting, criminal acts and acts of retribution
The insurance does not cover accidental injuries caused by taking part in a fight, taking part in or aiding and abetting criminal actions, suffering from acts of retribution in connection with own participation in punishable action, see Section 13-6 of the Norwegian Insurance Contracts Act.

5.2.4.10 Intent and negligence
If shall not be liable if the Insured has provoked the insurance event through negligence. If is nevertheless liable if owing to age or state of mind, the Insured was incapable of understanding the implications of their action. If is not liable however for suicide or attempts at suicide which are caused by mental disorders. If the claimant can show that the suicide was caused by acute mental deterioration due to external causes, not mental illness, If will be liable.

5.2.4.11 Costs of medical treatment
The insurance does not cover the following medical expenses:
- expenses related to dental damage resulting from chewing and biting.
- additional expenses for examination, treatment, surgery, training in private clinics, health institutions or with private practitioners / therapists without public reimbursement rights.
- expenses for aids.
- transport from the accident site.

5.3 Evacuation
The Company pays compensation for necessary and documented excess expenses for travel and overnight accommodation in the event of evacuation to the closest secure destination/the country of domicile/deployment location when the evacuation is due to:
- acts of war, terrorism, civil unrest or a similar severe disturbance of public order. “An act of terrorism” is defined as an illegal, tortious action directed toward the general public, including an act of violence or hazardous spreading of biological or chemical substances – and which appears to have been carried out for the purpose of impacting political, religious and other ideological entities or inducing terror.
- The evacuation must take place in accordance with the Ministry of Foreign Affairs’ official travel advice, which encourages Norwegian citizens to evacuate. Equal to this will be corresponding advice from local authorities or other officials global bodies such as United Nations. It is a prerequisite that the area was considered peaceful before

the Insured travelled there. Item 4.9 of the General Terms and Conditions shall be waived.
- natural disaster. Natural disasters are defined as earthquakes, erupting volcanoes and other catastrophes caused by sudden and violent forces of nature of an extraordinary violence, strength and dispersion. Evacuation must take place in accordance with recommendations issued by the local authorities or the Norwegian Ministry of Foreign Affairs or as agreed with us.
- outbreak of epidemic or pandemic during a trip outside the country of domicile/deployment country. An epidemic is defined as contagious, severe illness which spreads rapidly among humans.

Evacuation shall be conducted in accordance with the Ministry of deployment country's Ministry of Foreign Affairs' evacuation advice for the geographical area in question. Equal to this, will be corresponding advice from local authorities or other official global bodies, such as e.g. United Nations. We reserve the right to order you to evacuate to the nearest safe destination if we deem the risk of staying in the area to be too high.

We cover such additional expenses for up to 30 days after the event that triggered the right to cover for evacuation occurred.

5.4 Cancellation

See also the Regulations regarding settlement of claims in Item 9.1

The insurance covers loss of travel costs resulting from cancellation. It is a prerequisite that the Insured has cancelled the travel, accommodation, tenancy and tourist services prior to departure.

Travel costs refer to what the Insured has paid for travel, accommodation, tenancy and tourist services. Tourist services (such as tickets to sporting and cultural events, excursions, etc.) are covered if they are part of the cancelled trip.

If the travel costs apply to more people than the Insured and their co-insured, the insurance shall only cover the Insured and co-insured's proportion of the travel costs.

The insurance shall cover the travel costs the Insured has paid for before the event that justified cancellation occurred. If the Insured has purchased cancellation protection or cancellation guarantee from the trip organiser, the Company only pays compensation to cover the cancellation fee charged by the trip organiser.

Cancellation after the trip has commenced shall not be covered, cf. Item 2. Compensation shall be paid if the following conditions are met during the insurance period.

5.4.1 Illness and accident

The insurance shall cover lost travel costs resulting from illness or accident if one of the following persons unexpectedly and urgently requires treatment due to illness, is seriously injured in an accident or unexpectedly dies:
- she Insured or someone within the Insured's immediate family. Immediate family refers to the spouse/cohabitant/ registered partner, children, grandchildren, great-grand children, parents, grandparents, siblings, brother-in-law, sister-in-law, parents-in-law and daughter/sonin- law.
- the Insured's sole travel companion or someone within the travel companion's immediate family. Sole travel companion refers to a person who has been registered as the Insured's sole travel companion and who will accompany the Insured on the entire journey.
- One of the Insured's travel companions, in situations where up to six people have paid for the trip together, with the same destination and departure date.
- A person the insured must stay with and be with on the trip.
- A key person among the Insured's travel companions that the Insured is reliant upon to complete the trip (e.g. driver, captain or conductor). In connection with business trips, key persons also include people the Insured is scheduled to meet with but who are prevented from attending due to illness, injury or death, thereby resulting in the purpose of the business trip no longer applying.
- The Insured's close colleagues, employees or manager employed by the Policyholder.

Exacerbation of illness or disorder known before the trip was paid for shall not be considered unexpected and acute illness.

5.4.2 Changed operation date

In the event that the Insured, the Insured's spouse or cohabitant, child or sole travel companion receives a change notification for a scheduled date for surgery, medical treatment or examination prior to departure.

5.4.3 Pregnancy

In the event that the Insured, Insured's spouse/cohabitant or sole travel companion gives birth or develops serious pregnancy complications before week 36. For multiple pregnancies, this cover only applies before week 28.

5.4.4 End of cohabitation

Breakdown of relationship between the Insured and the Insured's spouse/cohabitant when going on trip together.

5.4.5 Summoned for trial

In the event that the Insured, the Insured's spouse/ cohabitant, child or sole travel companion is summoned as a lay judge or witness in a court of law.

5.4.6 Damage to insureds residence, office or business
In the event that the Insured's home, holiday home or business is subject to sudden and serious damage that requires the Insured to be present.

5.4.7 War, terror or epedemic
If shall compensate the Insured for cancellation costs in the event that the Norwegian Ministry of Foreign Affairs issues official travel advice discouraging travel to the Insured's destination outside of the deployment country and the travel advisory remains in force 72 hours before the scheduled departure.

It is a prerequisite that the travel advisory remains in effect at the time of cancellation of the trip.

5.4.8 Natural disaster
In the event that a natural disaster occurs at the destination that means that the destination is inaccessible or if such a disaster would entail a risk to life or health if staying at the destination.

Compensation shall be paid if the aforementioned conditions are met during the insurance period.

5.4.9 Cancelled tourist service
If the insured have pre-paid for a public tourist service at the destination, and the organizer cancels or moves it to a time outside the insureds fixed travel period, If will reimburse up to NOK 5,000 per person, up to NOK 25,000 per family.

5.4.10 What the insurance does not cover
The insurance shall not cover cancellations due to:
- admission to hospital, examination, diagnosis, treatment or recovery that takes longer than planned,
- being called in for treatment, examination or surgery for which the Insured was already on the waiting list before the trip was paid for,
- fear of illness and infection,
- imposed quarantine and other preventive infection control measures and
- the original purpose of the trip no longer applying

The insurance shall also not cover the following costs:
- Travel to areas that are subject to an official travel advisory from the deployment country's Ministry of Foreign Affairs at the time of payment. This shall apply even if the travel advisory is changed or repealed after the time of payment.
- The Insured's share of a timeshare, including annual costs and loss of rental income.
- Any costs that the Insured may claim a refund for from the trip organiser, carrier, landlord, organiser or tourist service provider.
- Travel costs paid using bonus points, CashPoints and other member benefits.
- Taxes and public fees.
- Agency fees and charges associated with refunds on taxes and fees.
- Travel costs the Insured has paid on behalf of people other than the Insured and co-insured under this insurance agreement.
- Travel arrangements that have been transferred to others.
- Travel, accommodation, tourist services, events or rentals that have been cancelled.
- Voucher or receivable that has not been used.
- Group trips cancelled by the Policyholder.
- Business trips paid for by an employer other than the Policyholder.

5.5 Delays

5.5.1 Delayed travel
The insurance covers additional expenses for travel and accommodation if a delay occurs after the Insured's trip has commenced.

If will cover reasonable and necessary additional expenses for accommodation and itinerary changes if:
- the Insured's prepaid means of public transport does not run at the agreed time. Transport costs are limited to NOK 3,000 per person.
- the insured arrives late for departure or latest check-in option with prepaid public transport.

If assume that the delay and the reason have been confirmed in writing by the tour operator, traffic company or salvage company. Additional expenses for obtaining a fixed itinerary are reimbursed if the carrier is unable to obtain the itinerary within 24 hours.

In the event of a stay on an offshore installation, ship or similar, necessary and documented additional expenses to obtain the fixed itinerary are also reimbursed, if the insured does not make it to the planned departure on a new private trip after the planned return home, when the delay is at least 72 hours (3 days) upon arrival at the Heliport.

The delay must be due to sudden and unforeseen:
- extreme weather, traffic accidents or other events that lead to extraordinary traffic conditions.
- technical fault or traffic accident which delays the public means of transport insured journeys with, or are to travel with or
- technical fault or traffic accident that requires the recovery of the private vehicle insured travels with.

5.5.2 Luggage delayed or lost
The insurance covers expenses for purchases in the event that the Insured's checked baggage is delayed or lost.

If shall reimburse reasonable and necessary expenses to purchase clothing and toiletries or to hire necessary travel items such as strollers, skis, golf equipment or similar for the period during which the Insured's baggage is missing.
If the Insured is travelling on a business trip, up to NOK 10,000 per person will be reimbursed. Up to NOK 5,000 per person or a maximum of NOK 25,000 per family will be reimbursed for the co-insured and on personal trips.

If also cover expenses for the purchase or rental of a bicycle, pram, ski or other sports equipment when this is delayed to the destination, up to NOK 5,000 per person, up to NOK 25,000 per family. If the luggage is still missing five days after arrival, we will reimburse a further up to NOK 5,000 per person, up to NOK 25,000 per family.

In the event that checked baggage is not available due to flight delays that result in an involuntary layover with an overnight stay, the necessary purchase of clothing and toiletries will be reimbursed. Up to NOK 2,000 will be reimbursed per insured person during business trips. For the coinsured and persons on holiday and leisure trips, up to NOK 2,000 per person and up to NOK 10,000 per family will be covered.

Purchases made during the return journey or after arriving home are not covered.

5.5.3 Hotel and events - loss due to delay
During holiday and leisure trips, the insurance shall cover expenses paid for up to one overnight stay at a hotel, as well as tickets to an event that the Insured is unable to attend due to a delay in departure. The delay must be at least 8 hours upon arrival at the destination and must be a direct result of circumstances mentioned in Item 5.5.1. The delay shall be calculated based on the carrier's ordinary schedule, including any changes published prior to the trip commencing. We will reimburse up to NOK 5,000 per person.

We will also cover loss of rental agreements for cars or motorcycles. You must arrive at least 1.5 hours after the agreed collection time. The delay must be a direct cause of the events mentioned in section 5.5.1. The delay is calculated on the basis of the carrier's ordinary route plan with any changes that were made. We will cover the Insured's cancelled and prepaid rental agreement up to NOK 10,000 per claim.

Nevertheless, the insurance shall not cover
- business trips,
- expenses that can be reimbursed by the organiser,
- tickets that have been transferred to others,
- rented mopeds, scooters, ATVs, snowmobiles and other vehicles that are not cars or motorcycles,
- rented vehicles that will be used by people other than those covered under this insurance, or
- vehicles that the Insured has rented from a private individual.

5.6 Belongings
Please also refer to Item 8.1 of the Safety Regulations and the regulations regarding settlement of claims in Item 9.2.
The insurance shall cover damage to or loss of the Insured's property that the Insured brought for their own personal use during the travel and stay. The insurance shall also cover any property belonging to the employer that the Insured has brought with them on the trip. Damage to or loss of property shall be covered only when the cause of the damage or loss is:
- Theft or robbery (Sections 321 and 327 of the Norwegian Penal Code). Theft or robbery refers to the definitions of theft and robbery set down in Sections 321 and 327 of the Norwegian Penal Code. Property that has been lost or misplaced and later kept by a finder shall not be considered theft. Embezzlement and fraud shall not be considered theft.
- Vandalism (Section 351 of the Norwegian Penal Code). Vandalism refers to intentionally damaging or destroying an insured object. Vandalism caused by a spouse, cohabitant, parents, siblings or children shall not be covered.
- Natural disasters. A natural disaster is defined as damage directly caused by a natural disaster such as an avalanche, storm, storm surge, flooding, earthquake or erupting volcano.
- Traffic damage. Traffic damage is defined as collisions, driving off the road or overturning in a motor vehicle, trailer or caravan. Traffic damage also includes collisions, capsizing or running aground in a boat, canoe or kayak.
- Fire. Fire is defined as fire, soot damage, direct lightning strikes and explosion. Scorch and spark damage is not considered fire.
- Water damage in buildings. Water damage is defined as the flooding from the building's pipelines or water which suddenly seeps into the building from the ground.

5.6.1 Damaged or lost checked luggage
Loss of or damage to checked baggage shall be covered only when confirmation can be presented from the carrier by way of a PIR report. Damage to suitcases or packaging shall not be covered.

5.6.2 Damaged or lost passport
In the event of damage to or loss of passports, the insurance shall cover reasonable and necessary expenses to acquire a new passport and catch up with the scheduled itinerary if the cause of the loss or damage is covered.

5.6.3 Accidental damage
The insurance shall cover other forms of physical damage to personal property than those mentioned above caused by sudden and unforeseen external causes.
The cause of the damage must be known and possible to link to a specific time. It is a prerequisite that the damaged item can be presented to the Company upon request.

Exceptions, limitations and safety regulations for property shall also apply to accidental damage. The excess shall be NOK 2,000 per item, but a maximum of NOK 4,000 per claim. The insurance does not cover accidental damage to the policyholder's assets.

5.6.4 Sum insured personal belongings
- cash up to NOK 5,000 per person, up to a maximum of 10,000 per family per claim.
- watches, jewellery, pearls, precious stones and precious metals up to NOK 30,000 per claim.
- all individual items other than watches, jewellery, pearls, precious stones and precious metals with accessories of up to NOK 40,000 per item.

In addition to the sum insured for private property, the employer's property shall also be covered up to NOK 15,000 per claim.

5.6.5 What the insurance does not cover
Items that are not covered:
- Motor vehicles, caravans and boats including accessories.
- Removal goods and furniture.
- Samples and items intended for resale.
- Securities, documents, data files and software.
- Collections – items of interest to collectors or with collectible value.
- Animals.
- Items that have been purchased or received as a gift outside of Norway, as well as cash taken out of Norway that has not been declared during import/export in accordance with applicable regulations.
- Items that belong to employers other than the Policyholder and items that have been acquired through professional business activities or other income-generating work.

Damage and loss not covered by If:
- Damage caused by the normal use of the item.
- Cosmetic damage such as scratches, tears, scrapes, stains, etc.
- Financial loss resulting from lost or damaged property.
- Damage to air sports equipment or drones in use.
- Damage and loss caused by pets.
- Damage to items during transport due to leakage of liquid, broken items or damage caused by the item due to the item's condition or shape.

5.7 Home Contents and Chattels

Please also refer to Item 8.2 of the Safety Regulations and the Regulations regarding settlement of claims in Item 9.3.3

The insurance covers home contents at the Insured's permanent residence at the deployment location that belong to the Insured themselves, their employer or that the Insured has assumed liability for under a written agreement/tenancy agreement. Home contents is also covered to the extent otherwise described in the Terms and Conditions.

5.7.1 What loss/damage the insurance covers
We cover damage/loss caused by:
- fire, that is uncontrolled flames, sudden soot damage and explosion.
- direct lightning strikes, i.e. the item is struck directly by lightning and is clearly affected by the impact.
- electrical phenomena, i.e. short circuit, arc, spark-over and overvoltage – including as a consequence of thunder and lightning.
- sudden outflow of gas, water or other liquids in the event of breakage, flooding or leakage from pipes and associated equipment, aquariums or fire extinguishers. Loss of gas, water and other fluids shall be covered up to NOK 40,000 per claim.
- water that suddenly penetrates a building.
- theft of home contents from building and vandalism in connection with the burglary. Building damage in the event of break-ins shall be covered up to NOK 40,000 per claim.
- theft from shed with access from shared cellar, loft and garage. The Company pays compensation of up to NOK 40,000 per claim.
- theft from private outdoor areas at the insured property, excluding common areas. The Company pays compensation of up to NOK 40,000 per claim.
- theft from buildings that are the Insured's place of work, but not from construction or civil engineering sites. The Company pays compensation of up to NOK 40,000 per claim.
- theft of bicycles, electric bicycles, bike trailers and strollers from the Insured's residence, workplace or educational institution. The Company pays compensation of up to NOK 40,000 per bicycle/bike trailer.
- food in a freezer which is ruined due to unintended rise in temperature. The Company pays compensation of up to NOK 40,000 per claim.
- broken window panes and sanitary porcelain in rented or co-owned houses.
- natural disasters which are directly caused by avalanches, storms, floods, storm floods, earthquakes or erupting volcanoes. The provisions in Item 4.11 of the General Terms and Conditions shall not apply.
- accidents or other damage to home contents that causes physical damage to an item and has a sudden and unforeseen external cause. An excess of NOK 2,000 per item shall be deducted, up to a maximum of NOK 4,000 per claim.

5.7.2 Limitations
Within the limits of the agreed insurance sum, the Company pays compensation for:
- Cash and securities, up to NOK 10,000 per claim,
- jewellery, watches and gold, up to NOK 40,000 per claim,
- paintings, prints and photographic art, up to NOK 40,000 per claim,
- wine and spirits, up to NOK 40,000 per claim,
- individual items and collections, up to NOK 40,000 per claim. Collections refer to coin collections, stamp collections and other collectibles, but not items that are used for their original purpose,

- boats up to 15 feet long, canoes, kayaks, surfboards, hang gliders, paragliders, parachutes and kites, up to NOK 10,000 per item,
- necessary excess expenses for accommodation outside of home, at the deployment location, when the Insured is not able to stay at home due to damage, and necessary moving and storage costs of up to NOK 100,000 per insurance event. Stays exceeding one week must be approved by the Company in advance.
- Expenses for the necessary reconstruction of manuscripts, working drawings/calculations, archives, photographs, film, video, data and data programs, of up to NOK 40,000 per claim. Compensation is not paid for expenses for travel and accommodation required for the reconstruction.

5.7.3 What the insurance does not cover

The following are not considered to be home contents:

- motor vehicles, parts, fitted accessories, tyres, wheel rims and other motor vehicle accessories.
- boats with a length exceeding 15 feet. Canoes, kayaks and surfboards are not considered boats.
- outboard engines with more than 10 HP.
- wharfs.
- lawnmowers, snow ploughs and rotary cultivators.
- goods intended for resale.
- aircraft, parts and accessories for aircraft. Hang gliders/ paragliders are not considered aircraft.
- Items that belong to employer's other than the Policyholder and items that have been acquired through professional, business activities or other income-generating work.

We also do not cover:

- scorch and spark damage not caused by fire.
- damage caused by water seeping into buildings from the outside, unless the damage is covered under the item above.
- damage caused by fungus, dry rot or bacteria.
- stains and similar cosmetic damage.
- theft from common areas, communal garages and rooms with general access.
- theft and damage in rooms on construction/civil engineering sites other than accommodation rooms.
- theft and damage in buildings that are open to anyone or in rooms for which no special access permission is required.
- damage to window panes and sanitary porcelain such as scratches, peeling etc. – irrespective of cause.
- damage caused by a leak in the frame for insulation glass.
- damage to glass or sanitary porcelain which has been specially fitted for or is connected to occupations or trades.
- damage to glass in greenhouses.
- damage caused by a member of the household, tenant or a person in the household member's or tenant's household.
- damage to items that have been rented or rented out.
- damage to air sports equipment or drones in use.
- cosmetic damage such as tears, scratches, stains and similar
- damage caused by heavy snow/snow pressure or wind of less than storm strength.
- embezzlement when household members or others acquire assets belonging to the Insured that they have in their possession.

5.8 Summons home - Repatriation - Being Summoned Out

See regulations regarding settlement of claims in Item 9.4.

5.8.1 Summons home

By prior approval from the If, we will cover necessary, documented and extraordinary travel expenses (equivalent to economy class on flights).

When the insured is required to travel home or to the address of an immediate family member due to:

- unexpected and serious illness, serious accidental injury and/or to attend a funeral due to an unexpected death in the Insured's closest family.
- sudden and serious damage to the insured person's home, office, or business premises, requiring the insured's personal presence.

The insurance covers only one return trip per covered event, limited to the price of a trip to the insureds home contry.

5.8.2 Repatriation

After the Insured has been called home, see Item 5.8.1 and, subject to the Company's prior approval, the Company will cover necessary and documented additional expenses for a return journey to the deployment location. The return journey must take place within 14 days of arriving home and within the scheduled stay at the deployment location, as well as within the insurance period.

5.8.3 Summons out

Subject to prior approval, the Company will cover reasonable and necessary travel and accommodation expenses for up to three close family members due to the Insured's unexpected, acute and very serious or life-threatening illness, injury or unexpected death.

Summoning of close relatives shall not be covered if it has already been decided that the Insured will soon be transported home or if the Insured has already been admitted to a hospital or institution at their place of residence.

The Company shall not cover summoning of close relatives if the Insured falls ill, is injured or dies as a result of causes that are exempt from themedical insurance and/or accident insurance coverage.

5.9 Liability Insurance

Please refer to Item 8.3 of the Safety Regulations and the regulations regarding settlement of claims in Item 9.7

The insurance covers the claim that the Insured as a private individual is held liable for under applicable law in the country concerned. Damage shall be understood to mean personal injury or damage to property. A personal injury is deemed to have occurred when a person is injured, is caused illness or dies. Damage to an object is deemed to have occurred when property or real estate is damaged or lost or when electronically stored information is corrupted or lost in other ways. Economic loss resulting from a damage to be covered is included as part of the damage.

The damage must be ascertained by the Insured or by the claimant during the insurance period. The damage is assessed according to the insurance applicable at the time the damage was first detected. All damage caused by the same event is considered as one damage event and is established with the same date on which the first damage was detected.

5.9.1 What the insurance does not cover

The insurance does not cover liability the Insured incurs:

- when the liability is based solely on guarantees, contracts, promises, pledges or other agreements entered into before or after the damage was detected.
- for damage to items that the Insured rents, borrows, uses or stores.
- for libel, legal remedy or fines, cf. Norwegian Act of 13 June 1969, no. 26 relating to damage compensation, Sections 3-5 and 3-6.
- in relation to the Insured's spouse/cohabitant, parents/step-parents/foster parents/parents-in-law, siblings, children/stepchildren/foster children and their spouses/cohabitants. It is the family relationship at the time the damage occurs that counts.
- in relation to companies which are operated or utilised by the Insured or in which the Insured or the Insured's family have significant shareholdings.
- as owner, driver or user of motor vehicles, working machines with own propulsion machinery. However, the insurance covers liabilities as owner, driver or user of working machinery with own propulsion machinery which cannot be driven faster than 10 km/hour with total weight up to 750 kg and which can be used on/in connection with the Insured's own property. Motorised wheelchairs and other similar motorised mobility aids for the disabled are not considered motor vehicles if they cannot travel faster than 10 km/h. Motorised devices intended for children are not considered motor vehicles when restricted to maximum speeds of up to 6 km/h and the weight does not exceed 50 kg.
- in their capacity as the owner, driver or user of a sailboat or other motorised vessel. Surfboards, canoes and kayaks shall not be considered boats in this context.
- in their capacity as an owner, a pilot or a user of aircraft. Non-motorised hangliders/paragliders shall not be considered aircraft in this context.
- in their capacity as owner, rider or user of a registered harness racing horse or racehorse.
- for damage to objects caused by digging, pigging, blasting, sounding and demolition work. The term explosion also includes the use of expansion mass.
- for the Insured's objective liability for damage caused by the Insured's children, cf. Norwegian Act of 13 June 1969, no. 26 relating to damage compensation, Section 1-2.
- when practising an occupation/trade as the owner of real estate.
- for damage caused by negligence or the omission and the consequences of such damage.
- for pollution of air, water or ground, or damage caused by such pollution, unless the cause is sudden and unexpected. Pollution includes dust, noise, odour, light and irradiation.
- for contamination of contagious diseases between people, irrespective of how the contamination occurred.
- for damage to items/property due to dry rot and decay or by the slow penetration of moisture.

5.10 Legal Expenses Insurance

See the regulations regarding settlement of claims in Item 9.8.

The Company will cover expenses for legal aid/legal assistance up to NOK 100,000 per dispute if the Insured, as a private individual, becomes party to a legal dispute that requires legal assistance during their stay at the deployment location or before a business trip/holiday has ended. Criminal charges will not be covered.

5.10.1 What the insurance does not cover

The insurance does not cover:

- awarded legal costs
- expenses incurred by legal entities such as companies, estates of deceased persons – including private administration of estates – housing cooperatives, cooperative societies, foundations and similar entities. This also includes disputes in which the aforementioned legal entities represent you.

The insurance does not cover expenses associated with legal disputes that:

- are related to the Insured's occupation or trade, including settlement under occupational injury insurance and Chapter 1-7 of the Norwegian Occupational Insurance Regulations.
- relate to the Insured's real estate or the purchase/sale of property and rental rights (timeshare).
- separation, divorce, child custody, visitation rights, paternity, inheritance, demand for return of gifts, child support, estate distributions, dissolution of the economic relationship between cohabitants and dissolution of the household community, as well as probate matters.
- cases falling solely under the authority of local courts, except for those involving a residential rental agreement.
- disputes concerning bills of exchange, debt recovery cases in which the claim is undisputed, cases concerning debt settlement proceedings, and cases concerning bankruptcy and composition proceedings if the insured is the insolvency or arrangement debtor.



- as the owner, driver or user of:
    - motor vehicles, working machinery with own propulsion machinery. However, the insurance covers liabilities as owner, driver or user of working machinery with own propulsion machinery which cannot be driven faster than 10 km/hour with total weight up to 750 kg and which can be used on/in connection with the Insured's own property.
    - applies to sailboats and other motorised vessels. Surfboards, canoes and kayaks shall not be considered boats in this context.
    - applies to aircraft. Non-motorised hangliders and paragliders shall not be considered aircraft in this context.
    - registered harness racing or racing horse, or when the Insured is a partial owner, rider or user.
- concern or originate from a criminal act, criminal case, defamation, libel, slander cases and claims for damages in such cases, as well as cases involving liability according to the laws of the particular country.
- obviously cannot be won.
- expropriation cases or other cases in which the Insured seeks to obtain the right to another's property.
- public administrative decisions. Nevertheless, expenses are covered connected with civil actions when administrative right to appeal is fully exhausted. In connection with civil actions, any expenses incurred during the administrative process are exempted from this coverage.
- lawyers' fees or expenses for expert witnesses.
- applies to expenses for personal injury suits pursuant to motor vehicle liability before the traffic insurance company for the motor vehicle has rejected in writing coverage of the Insured's expenses for legal assistance prior to legal proceedings.
- expenses incurred before a dispute has occurred.
- compensation settlement under this or other insurance agreements under which the Insured is covered in Europeiske or If Skadeforsikring.

5.11 Refund of ded. rental car

The insurance replaces the deductible that the insured, as the lessee, are held responsible for according to the rental contract if the rented means of transport or associated keys are stolen or externally damaged.

The following means of transport are covered by the insurance:
- Passenger car and motorhome (up to 7,500 kg).
- Motorcycle (over 50 cm3).
- Bicycle and electric bicycle.

It is a prerequisite for the insurance that the vehicle is insured with comprehensive motor cover (CDW - Collision Damage Waiver and TP - Theft Protection) and the excess for which the Insured will be liable is stated in the lease agreement.

The incident must take place during a holiday trip from the deployment location that includes at least one overnight stay during the lease period, or at a registerable business trip from the deployment location.

5.11.1 What the insurance does not cover

The insurance does not cover deductibles for:
- rented electric scooter, moped, scooter (up to 50 cm3), ATV, snowmobile and other vehicles not specifically mentioned in the point about refund of deductible for rental transportation vehicle.
- rented vehicles that will be used by others than those covered under this insurance.
- vehicles that the Insured has rented from a private individual, or that the Insured rents/borrows in connection with a vehicle being serviced or repaired.
- damage resulting from participation in motorsports.
- damage incurred during business trips on behalf of employers other than the Policyholder or on business trips for the Insured's own business activities.

5.12 Refund of deductible for own car

If will cover the excess the Insured is charged in connection with the settlement from their insurance company in the event of damage to the Insured's own passenger car that the Insured uses for business trips.

5.12.1 What the insurance does not cover

If does not pay compensation for:
- Excesses in the event of damage incurred during business trips on behalf of employers other than the Policyholder, or on service assignments for own business.
- Damage incurred as a result of participation in motorsports.
- Excesses in the event of damage to commercial vehicles.
- Excesses in the event of damage covered under the vehicle's liability insurance.
- Excesses in the event of damage that results in interruptions.
- Loss of bonus.

5.13 Identity theft

The insurance covers reasonable and necessary legal assistance for:
- prevention and actions to prevent further abuse, and
- removal of unjustified payment notices as a direct result of identity theft.

The total compensation obligations is limited to NOK 1,000,000 in each case of damage. All actions that occur as a result of identity theft are considered an identity theft incident.

5.13.1 What the insurance does not cover

The insurance does not cover:
- identity theft related to the insured profession or business.
- expenses incurred in connection with actions carried out by the insureds spouse/partner, child or parents.

- identity theft arising in connection with the insureds immediate family's criminal or grossly negligent actions.
- financial loss, other than costs associated with legal assistance.

6 Sums insured
The sums insured are listed in the certificate of insurance.

7 Insurance Deductibles
Any excesses are listed in the certificate of insurance.

8 Safety Regulations
Safety regulations are regulations regarding due diligence established to prevent and limit damage/loss. If the Insured is guilty of a breach of safety regulations, the Company's liability may be reduced or cease to exist, see Section 4-8 of the Norwegian Insurance Contracts Act and Item 10.2 of the Terms and Conditions.

8.1 Safety Regulations for Luggage Insurance
The following safety regulations shall apply to property:
- The Insured must always supervise the Insured's property and ensure that no items are left behind.
- Property that the Insured does not carry with them must be securely stored. The storage place must always be closed and locked before leaving. Keys/codes shall be kept inaccessible to unauthorised persons. windows and other openings must be fully closed and locked.
- Cash, passports, watches, jewellery, pearls, precious stones, electronic or optical equipment and precious metals must not be left in vehicles, caravans, boats, tents or rooms that people other than the Insured or the Insured's close travel companions have access to.
- Bicycles must be locked when not in use. When leaving a bicycle, any fitted equipment that can easily be removed, such as GPS, bicycle computers, watt meters, etc., must not be left on the bicycle.
- The Insured must not send electronic or optical equipment, precious items, perishable foods, medicines, cash, passports, watches, jewellery, pearls, precious stones or precious metals as checked baggage.

8.2 Safety Regulations for Household Goods and Chattels
- The insured shall ensure compliance with local fire regulations and any orders issued by public authorities.
- The Insured shall ensure sufficient heating of the house in order to prevent frost damage, or ensure that the pipes are emptied and that the stop cock has been screwed tight.
- The Insured shall ensure that doors are locked and keys kept safe from unauthorised persons. Windows and other openings shall be closed and properly secured with a catch or similar. A window opened slightly ventilation is not considered proper security against theft. In buildings other than residential properties, cash, jewellery, cameras, furs and other objects of value shall be stored under lock or be properly secured.
- The Insured shall ensure that bicycles are locked and keys kept safe from unauthorised persons.

8.3 Safety Regulations for liability
The Insured shall ensure full compliance with the requirements/regulations of the authorities regarding inspection, storage and control of tanks, including containers, of inflammable liquids and other chemicals.

8.4 Safety regulations delays
The insured must calculate sufficient time from the time the insured plan to arrive at the place of departure to the next scheduled departure. When assessing sufficient time, the assured must take into account the type of means of transport, the transport company's and the airport's recommendations for time of arrival, place of departure and other traffic conditions (see section 5.5.1.)

9 Regulations for the Settlement of Claims
9.1 Regulations for the Settlement of Cancellation Insurance Claims
When an insurance event occurs, the Insured shall without undue delay inform the Company and the travel/rental agent from whom the trip/rental was purchased. The Insured is obliged to provide all information and send all available documents which are required by the Company in order to calculate and pay compensation.

The following must be sent when claiming compensation:
- original travel documents/tickets/rental contracts, with receipts for the paid travel/rental arrangement.
- credit note or other confirmation showing the date of cancellation and the cancellation costs.
- doctor's certificate confirming that the Insured visited the doctor before the trip commenced and that cancellation is due to acute illness/accidental injury which requires treatment and occurred during the insurance period.
- confirmation from doctor/hospital or others confirming that illness, accidental injury or death have affected someone in the Insured's close family, their sole travel companion or someone in their close family. The same applies in the event of illness/accidental injury/death among travel companions or a key person.
- confirmation from a doctor/hospital or other party confirming that illness, accidental injury or death have affected a close colleague, employee or manager.
- accident report/appraisal/police report confirming that the cancellation is due to fire, burglary, damage due to natural disaster or water leakage damage.
- If the travel advisory was not in force at the time of booking, If may request documentation of this Documentation must be issued by the institution that issued the travel advisory for the destination.

The Insured cannot claim compensation for cancellation fees which exceed the actual financial loss in connection with the cancelled trip.Travel, accommodation, tenancy and tourist services that the Insured has paid on behalf of people other than themselves and the co-insured spouse/cohabitant/children shall not be considered the Insured's financial losses. If multiple parties cover the cancellation fees, the Company assumes the Insured's right to compensation from other parties for the amount paid by the Company under the insurance.

9.2 Regulations for Luggage Insurance Settlement Claims

The provisions below apply instead of Section 6-1 of the Insurance Contracts Act.

9.2.1 Notice requirements

Theft/robbery/burglary and other loss/damage shall be notified immediately to the local police force, hotel or travel guide on site. Loss/damage during transport must be reported to the carrier immediately and must be confirmed through a PIR report.

If lost items are found after compensation has been paid, the Insured shall be obliged to notify the Company immediately. The Insured has the right to keep the items, but must refund the compensation within 14 days of finding the items.
If the Insured chooses not to repay the compensation amount, the objects become the property of the Company, cf. Section 8-1 of the Norwegian Insurance Contracts Ac.t

The Company shall be entitled to ask airlines, the police, etc. to hand over any covered items that are found. In such a case, the Insured will receive an offer to have the items returned subject to returning the compensation paid.

9.2.2 Documentation requirement

Information shall be provided to the Company as soon as possible regarding documents (receipts, guarantee certificates, etc.) which are required to calculate the Company's liability and make compensation payment. The Insured must retain damaged objects and send these to the Company upon request, cf. Section 8-1 of the Norwegian Insurance Contracts Act.

9.2.3 Compensation

The basis for compensation is set at what it would cost to:

- repair the damaged item to the same or essentially the same condition as at the time of damage occurring, calculated by the price on the day of damage.
- replace with an equivalent or essentially equivalent item, calculated by the price on the day of damage.

The compensation basis cannot be higher than the value prior to the damage, less the remaining value after the damage. For replacements, a deduction will be made for value increases as the used item is replaced with a new item.

Deductions are made for age, use and reduced usability in relation to the estimated useful life of the item.

Items that were received used, as an inheritance, gifts or purchased second hand will be replaced by the replacement cost of an equivalent used item or by resale value.

Bicycles are never covered by more than the purchase price (price on the purchase date).

Antiques, artefacts, antique rugs and antique weapons are replaced at sales value.

The Company has the right to decide whether the damage/loss is to be compensated by cash settlement/repair/replacement or by procuring a similar or significantly similar object.

In the event of cash settlement, the cover cannot exceed what the Company would have had to pay for repair or replacement In the event of repair or replacement, the Company shall be entitled to decide which repair technician/supplier to use.

Claims for lost/damaged luggage or associated expenses can never be submitted for amounts exceeding the real financial losses incurred by the Insured.

f the damage/loss is covered by others, the Company shall assume the Insured's right to compensation from others for the amount we have paid out under the insurance.

The Company has the right to check the information provided by the Insured when making requests to shops or others, and is not obliged to pay compensation before the necessary investigations have been completed.

9.3 Settlement of Claims Regulations for Household Goods and Chattels

The regulations below apply instead of Section 6-1 of the Norwegian Insurance Contracts Act.

9.3.1 Notice requirements

Damage/loss caused by fire, theft, vandalism, assault and robbery shall always be notified to the local police force.
If the object is found after compensation has been paid, the Insured is obliged to notify the Company of such immediately. The Insured has the right to keep the items, but must refund the compensation within 14 days of finding the items. If the Insured chooses not to repay the compensation amount, the objects become the property of the Company, Cf. Section 8-1 of the Norwegian Insurance Contracts Act.

9.3.2 Documentation requirement

The Insured shall, without undue delay, provide the Company with the information and the documentation (receipts, guarantee certificates etc.) which are available and which the Company requires to calculate liability and to pay compensation. The damaged object shall be retained and sent to the Company upon request, Cf. Section 8-1 of the Norwegian Insurance Contracts Act.

9.3.3 Compensation

An excess of NOK 4,000 per insurance event is deducted from compensation payments.

Compensation up to the insurance sum is calculated on the basis of the costs of repair to the same or significantly the same condition as the object was in immediately before the damage, calculated according to the prevailing prices on the day the damage occurred, or the replacement of a similar or significantly similar object, calculated according to the replacement cost on the day the damage occurred. The compensation basis cannot be higher than the value prior to the damage, minus the remaining value after the damage. Compensation is paid for scrapped home contents according to the second-hand sales value.

For replacement, the value increase is deducted as second-hand objects are being replaced with new. The value is calculated on the basis of the object's age, wear and tear, probable useful life and reduction in usefulness.

Compensation for objects which have been purchased second-hand, at auctions or received as an inheritance or gift is paid according to the replacement cost for a similar second-hand object. The same applies if compensation is to be paid to the estate of a deceased person or heir.

Bicycles are not replaced at a value higher than the purchase price (the price on the purchase date)

The Company determines whether to pay compensation for damage/loss as a cash settlement, by repair or reconstruction/replacement. Compensation cannot be claimed for a damaged object which exceeds the actual economic loss suffered by the Insured.

If several parties have liability for the damage/loss, the Company assumes the Insured's rights to compensation for the amount paid under the insurance.

9.4 Regulations for Settlement of Claims for Summons Home - Return Trips - Being Summoned Out

9.4.1 Documentation obligation
The Insured must document their claim for compensation by providing a written confirmation in the event of interrupted travel/stays and must be able to document that the expenses incurred are due to the causes mentioned in this condition and that they occurred during the insurance period. Europeiske will have the right to collect/exchange information from and with doctors, hospitals, etc. as necessary to process the claim in question.

9.4.2 Prior approval
Recall, return journeys and summoning must be pre-approved by the Company.

9.4.3 Compensation
Expenses associated with recall, return journeys and summoning can never be covered by more than the Insured's actual financial losses. The Company will cover only one trip home and, if applicable, one return journey per claim.

9.5 Regulations for the Settlement of Medical Insurance Claims

9.5.1 Documentation obligation
The Insured must consult a doctor as soon as possible and must follow their recommendations for treatment. Furthermore, the Insured must obtain written confirmation from the attending doctor at the location and must be able to document that the expenses incurred are due to the causes mentioned in Item 5.7 and that they occurred during the insurance period.

The Company must be notified immediately in the event that the total costs are expected to exceed NOK 10,000.

9.5.2 Prior approval
Medical evacuation/transport home, postponed travel home/changed itineraries, accompanied travel and replacement must be pre-approved by the Company.

9.5.3 Compensation
To ensure the appropriate quality of medical treatment, we reserve the right to refer the insured person to the treatment provider or medical facility that we deem most appropriate.

9.6 Regulations for the Settlement of Accident Insurance Claims

9.6.1Doctor and specialist attestations
Both the Insured and If have the right to requisition declarations from doctors and specialists which are of significance for the establishment of the basis for calculation of compensation. If deemed necessary by the Company to requisition a doctor's declaration from a second expert, the reason for this shall be provided in writing. Should the Insured be outside Norway, If may require that the Insured visits a doctor in Norway for an assessment of whether or not the conditions for benefits are met. In this connection, the Company will pay the doctor's fee but not travel expenses.

9.6.2 Contributing factors
Compensation is proportionately reduced if other factors, together with the accidental injury, have contributed to the need for treatment, medical disability or death of the Insured.

9.6.3 Medical Invalidity
Medical disability is defined as the physical, lasting, functional impairment that experiences shows a specific injury causes

Compensation for disability is paid when an insurance event has occurred and when the Company has received a compensation claim with the necessary documentation and has had sufficient time to chart liability and calculate the amount of the Company's liability. Compensation is established on the basis of the degree of disability represented by the accidental injury and the insurance sum.

If an accident event results in a number of injuries, the degree of disability is established on the basis of a collective assessment, in the same way as for occupational injuries - "the reduction method". If the accidental injury results in an increase of a former functional reduction, a deduction is made in the medical disability corresponding to the former functional reduction.

When other factors contribute towards increasing the medical disability to a level in excess of what would have been caused by the injury alone, compensation is paid proportionately, see Item 9.6.2 above.

The degree of medical disability is established on the basis of the disability tables published by the Norwegian Ministry of Health and Social Affairs in regulations dated 21 April 1997, parts I and II. No consideration is taken to occupation, reduced ability to earn income (degree of disability), leisure interests etc.

9.6.4 Death
Compensation in the event of death will be paid if the Insured dies as a result of an accidental injury that occurs during the insurance period. The entitlement to compensation shall take effect at the time at which the Insured dies.

If the accidental injury results in death within 2 years of the date of the injury, death benefit is paid. Any disability benefits that may have been prepaid for the same injury will be deducted. If the Insured dies of another cause within 2 years from the date of the injury, neither death benefit nor disability compensation is paid. If the Insured dies later than 2 years after the date of the injury, death benefit is not paid but disability compensation is paid according to the degree of disability the injury would have caused.

In the event of death, the compensation shall fall to the Policyholder. If the Policyholder and the Insured are the same person, the death benefit is paid to the Insured's spouse/registered partner, cf. Chapter 15 of the Norwegian Insurance Contracts Act. If the Insured does not have a spouse or registered partner, or these are no longer alive at the time of the death of the Insured, the compensation is paid to the heirs of the Insured pursuant to legislation or the will in accordance with the provisions of the act relating to inheritance. A person is not considered a spouse when a petition has been signed at the time of the death for a separation or divorce, even if the final separation/divorce has not yet been made final or is legally binding.

9.6.5 Beneficiaries
If the Insured wishes payment on death to be paid to special persons, beneficiaries, this must be agreed upon with If. If a cohabitant has been appointed as beneficiary without this person being named, the cohabitant shall be defined as a person with whom the deceased lived in a marriage-like state and with whom the deceased has shared a national register home address over the past 2 years, or the person who has children and a home together with the Insured.

A person is not considered a cohabitant if there were situations at the time of the death which hindered a legal marriage, or where it is clear that the relationship had suffered a break-up at an earlier date.

9.7 Regulations for the Settlement of Liability Insurance Claims

9.7.1 The insured party's obligations
Damage which may result in a claim for compensation must be notified to If immediately. When a claim for compensation is filed against the Insured or If, the Insured is obliged to immediately provide If with all information of significance for the processing of the matter, and to carry out all investigations deemed necessary by If at the Insured's cost. The Insured is obliged to participate in negotiations or trials. If the Insured accepts a duty of compensation without the consent of the If, or negotiates a compensation claim, this will not be binding for If.

9.7.2 Compensation
When a compensation claim is covered by the insurance, the Company shall investigate whether there is a liability for compensation, negotiate with the claimant and, if necessary, take the case to court. The Company pays its own costs for determining the issue of compensation, even if these exceed the insurance sum. Other costs for external lawyers and other expert advisers, selected or approved by the Company, will be paid by the Company.

If the claim for compensation and/or basis for the claim is partly covered by the insurance and partly not covered by the insurance, the expenses are distributed according to the economic interests of the different parties to the case. If the Company is willing to settle the case or provide the insurance sum, any subsequent expenses are not covered. The Company has the right to pay any and all compensation directly to the injured party.

The Company's total liability is up to NOK 10,000,000 per claim. Legal fees are covered in addition.

9.8 Regulations for the Settlement of Legal Expenses Insurance Claims
If the Insured wishes to claim compensation under legal assistance insurance, If must be notified as soon as possible and at the latest one year after a lawyer has been engaged. Notification must be given in writing. The Insured shall choose their own lawyer, who, based on the nature of the case and the Insured's place of residence, is suitable for the case.

The Insured is obliged to limit expenses as far as possible and to meet any costs incurred without reasonable grounds. If may demand to be fully informed of the scope of the expenses for which cover is claimed under the insurance policy, and has the same right as the Insured to receive documentation on how the attorney has calculated their fee. Elapsed time spent must be specified.

10 Mutual Provisions

10.1 Duty of disclosure

In connection with the conclusion or renewal of an insurance contract, If may request information about conditions that may be of importance to our assessment of the risk. The policyholder and the insured must give correct and complete answers to the company's questions. The policyholder and the insured must also, on their own initiative, provide information about conditions that he/she must understand are of significant importance for If's assessment of the risk, see FAL 4-1, 4-3, 13-1 and 13-5. If the policyholder or the insured has fraudulently neglected the obligation to provide information and an insurance event has occurred, If is not liable. If the policyholder or the insured has otherwise neglected their obligation to provide information, If's liability may be reduced or waived, see FAL 4-2, 13-2 and 13-4.

If loss or damage has occurred, the insured/insured bear the burden of proof that the insured event has occurred. The insured/insured also have the burden of proof that the insured event has entailed expenses/additional expenses in accordance with the current conditions.

10.2 Due Diligence

The insurance includes safety regulations prepared to prevent or limit loss/damage, and these shall be followed. In the event of a breach of safety regulation, the Company's compensation liability may be reduced or cease to exist. This limitation does not apply if the Insured is not to blame or only marginally to blame, or if the insurance event is not caused by the violation of safety regulations. Although the Company has the right to invoke the above limitation due to a violation of a safety regulation, the Company may still be obliged to assume part liability. When making such a decision, emphasis shall be placed on the nature of the safety regulation violated, the degree of blame, the course of events if the Insured was in a state of self-induced intoxication and circumstances in general, cf. Sections 4-8 and 13-9 of the Norwegian Insurance Contracts Act.

If the Insured has provoked the insurance event through negligence, the Company is no longer liable. If the insured has brought about or increased the scope of the insurance event through gross negligence, the Company's liability may be reduced or lapse entirely. In deciding this, emphasis shall be given to the degree of blame, the course of events, whether the Insured was in a self-inflicted state of intoxication, the effect of reduction of liability or no liability for the person(s) who have claim to the insurance or for other persons financially dependent on the Insured and the circumstances in general.

The Company will not be able to invoke the rules of this Section when the Insured was for reasons of age or frame of mind unable to grasp the consequences of their action, cf. Sections 4-9, 13-8 and 13-9 of the Norwegian Insurance Contracts Act.

In the event of damage/loss/expense, the Insured shall do what can be reasonably expected of the Insured in order to avert/limit the damage and shall follow the instructions given by If so as to limit the scope of its liability, see Sections 4-10, 13-11 and 13-12 of the Norwegian Insurance Contracts Act.

If the damage/loss/expenses arise from the fact that the Insured intentionally or grossly negligently neglected their duties or failed to follow an instruction with which they was obliged to comply, the Company's liability may be reduced or may lapse entirely, see Sections 4-10 and 13-12 of the Norwegian Insurance Contracts Act.

In the event that the Insured's right to compensation wholly or partly ceases to exist as a result of the Insured's actions or omissions, the same consequence is invoked by similar actions or omissions carried out by the Insured's co-insured spouse/cohabitant/partner, cf. Section 4-11 of the Norwegian Insurance Contracts Act.





10.3 Definitions

10.3.1 Policyholder
The person who enters into the insurance agreement with If.

10.3.2 The insured
The person who, under the insurance contract, is entitled to compensation or the sum insured under non-life insurance. In liability insurance, the insured is the person whose liability for damages is covered.

10.3.3 The insured person
The person whose life and health are covered by the insurance.

10.3.4 Closest family
Spouse/cohabitant/registered partner, children, grandchildren, great-grand children, parents, grandparents, great-grand parents, siblings, brother-in-law, sister-in-law, parents-in-law and daughter/son-in-law.

10.3.5 Partner
A person who lives together with the Insured in a marriage-like relationship and has the same registered residential address in the Nordic region.

10.3.6 Sole travelling companion
A person registered as the Insured's sole travel companion and who will accompany the Insured on the entire journey.

10.3.7 Checked luggage
Luggage which has been assigned to the care of a carrier with a receipt, for shipment by air, sea, train or bus when the Insured is travelling by the same means of transport.

10.3.8 Traffic accidents
- Collisions/driving off the road in a motor vehicle, trailer or caravan in traffic.
- Collisions, capsizing or running aground in a boat, canoe, kayak or other vessel used on water.
- Collisions and driving off the road on a bicycle.

Collisions refer to impact between two moving objects that come into physical contact with one another, or impact between a vehicle and a fixed item/installation.

10.3.9 Excess costs
Expenses incurred only as a result of an insurance event occurring during the insurance period.

10.4 Double insurance/recourse
In the event that there are multiple parties liable for the Insured's loss/damage/expenses, If will assume the right to compensation for the amount it has paid out in compensation.

In the event that the same insurance event is covered by more than one insurance policy, the Insured may choose which company to use until the total loss has been covered. The compensation shall be divided between the companies according to each Company's liability for the loss/damage, cf. Section 6-3 of the Norwegian Insurance Contracts Act.

If If has paid compensation for an insurance event that is not covered by the insurance agreement, the Insured shall be obliged to repay the compensation to If, cf. Section 8-1 of the Norwegian Insurance Contracts Act.

11 Additional insurance

11.1 Occupation/trade
The additional insurance will cover the performance of occupations that are considered to have an elevated risk of injury, see Item 5.2.4.1.

11.2 Expeditions
The additional insurance also applies if the travel insurance is extended to cover expeditions, i.e. particularly risky and other trips to places where there is poor infrastructure, far from the nearest hospital, or it is difficult to get hold of health personnel or transport.

Examples of such trips/expeditions:
- ski trips in Greenland and cycling through the Sahara
- trips to the Arctic, Antarctica, Siberia, the Amazon, the Himalayas, the Andes and the wilderness of Northern Canada
- crossing oceans by sailboat
- trips to mountains at altitudes above 5,000 metres

11.3 War/terror/political unrest
The additional insurance will cover stationing stays in, or business trips to, Russia, Belarus and Ukraine. See section 3.1.

Extension of the insurance to also apply to business trips to Russia, Belarus and Ukraine, see section 3.1.

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