

## **BENEFITS SUMMARY DOCUMENT**



### **Personal Accident and Personal Effects Protection**

Wherever the term you is used in this summary description, it means both the renter of the Participating Rent-A-Car Company vehicle and any Participating Rent-A-Car Company authorized additional driver of that vehicle.

Personal Accident/Personal Effects Protection consists of the following: ACCIDENTAL DEATH, ACCIDENTAL MEDICAL EXPENSE, PERSONAL EFFECTS COVERAGE, AND TRAVEL ASSISTANCE PACKAGE

The purchase of optional Personal Accident/Personal Effects Protection provides you with Accidental Death coverage while you are in, boarding, or alighting the Participating Rent-A-Car Company rental vehicle. In addition, you and your passengers receive a package consisting of Accidental Medical Expense and a Travel Assistance Package. All coverages are subject to the exclusions, terms, conditions, limitations, and coverages as expressly described in the underlying policy, which is available for inspection at the rental station. The Travel Assistance Package is provided by AIG Assist and the policy providing insurance coverage is issued by National Union Fire Insurance Company of Pittsburgh, PA. The purchase of Personal Accident/Personal Effects Protection is entirely optional; you are not required to purchase it in order to rent our car.

### **ACCIDENTAL DEATH**

Accidental Death provides 24 hour accident protection to you (the primary renter) and your immediate family traveling with you for death during the entire period of the Rental Agreement. Passengers are protected only while in, boarding or alighting from the Participating Rent-A-Car Company vehicle. If within one year from the date of accident such injuries result in death, you will receive:

\$100,000 for Loss of Life

Passengers will receive:

\$10,000 for Loss of Life

The maximum total benefits that shall be payable in the aggregate for all covered individuals for any covered occurrence is \$150,000 regardless of the number of persons.

### **EXPOSURE AND DISAPPEARANCE**

If you or another covered person suffers a loss that is otherwise covered under the Policy, due to unavoidable exposure to the elements following an accident, the loss will be covered under the terms of the Policy.

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

### **ACCIDENT MEDICAL EXPENSE**

The Accident Medical Expense provides you and your immediate family traveling with you \$1,000.00 of 24 hour accidental medical expense coverage. In addition, each passenger is covered while in, hoarding or alighting from the Participating Rent-A-Car Company vehicle for \$1,000 of emergency medical expenses and ambulance fees, as long as such medical expenses are incurred within one year of the accident,

### **PERSONAL EFFECTS COVERAGE.**

Personal Effects Coverage provides limited coverage for your personal belongings from loss or damage caused by theft, damage, or accident to your rental car. Personal Effects Coverage provides reimbursement for the actual cash value of most items subject to certain maximums, deductibles, limitations and exclusions. Person Effects Coverage protects YOUR personal belongings as the primary renter and those of your immediate family traveling with you.

The maximum Personal Effects Amount per person is \$525.00, subject to a per claim deductible of \$25.00.

### **EXCLUSIONS**

#### **Applicable to all coverages except Personal Effects Coverage:**

The policy does not cover any loss caused by or resulting from:

Suicide or any attempt at it while sane, intentionally self-inflicted injuries or any attempt at it, sickness, disease or bacterial infection of any kind, except pyogenic infections which occur as a result of an injury, or bacterial infection resulting from the accidental ingestion of a substance contaminated by bacteria, injury caused or contributed to by the covered person's commission of or attempt to commit a felony; participation or engaging in an act of violence, civil disobedience, civil disorder, riot or insurrection, injury sustained while the covered person is riding (including boarding or alighting) any aircraft as a passenger or as a pilot, crew member, flight instructor,, examiner or student pilot, hernia, unless resulting from a covered accident, participation in professional team sports or other professional athletic activities, being under the influence of any intoxicant or narcotic, unless administered on the advice of a Physician, dental treatment, except as the result of injury to sound natural teeth, replacement of eyeglasses or eye examination for the correction of vision or fitting of glasses unless injury causes impairment of sight, pregnancy or complications thereof or resulting childbirth.

#### **Applicable to Personal Effects Coverage only:**

Due to their nature, certain items are excluded from coverage. The items not covered are:

securities, currency, deeds, artificial teeth bridges, documents, tickets, eyeglasses, contact lenses, prosthetic limbs, automobiles, automobile equipment, animals, motorcycles, motorized boats, motors, other conveyances, perishables, bullion, house hold furniture.

Losses or damage occurring through wear and tear or gradual deterioration, insects or vermin, inherent vice or damage, and mysterious disappearance" are not covered.

#### **Applicable to all coverages:**

The policy does not pay for loss or damage in whole or in part from;

Declared or undeclared war or any act of war or use of the rental vehicle in a manner prohibited by the Rental Agreement.

**Notice concerning other insurance coverages you may have:**

The purchase of any of the protection or coverages described herein may duplicate, void or cause your own policies to become excess coverage. Participating Rent-A-Car Company personnel cannot interpret them or advise you on what they may or may not cover. If you purchase Personal Accident/Personal Effects Protection various credit card insurance death benefits could become excess insurance coverage," meaning that any benefits due are available only if the amount sought in a claim exceeds the policy limits of any other applicable insurance purchased by cardholders, or those benefits could become void. You may duplicate coverage already provided by your personal automobile insurance policy, homeowners insurance policy, personal liability insurance policy or other sources of coverage. Policies and coverages vary, and Participating Rent-A-Car Company personnel cannot advise you concerning other coverages that may or may not be applicable.

Other Important Information

**AVAILABILITY OF PROTECTION/COVERAGES DESCRIBED**

Federal, state or local law may limit or vary the terms and conditions of the protection/coverages described, or may prohibit them entirely. Thus some of these options may not be available in the particular state in which you are renting. Any offer as described herein is void if prohibited by law.

**HOW TO MAKE A CLAIM**

All claims under optional Personal Accident/Personal Effects Protection must be made on Participating Rent-A-Car Company claim form within ninety (90) days of the incident or accident giving rise to the claim. Forms are available at all Participating Rent-A-Car Company rental locations. If the claim is for personal injuries, you must also obtain and submit itemized medical expense statements. If the claim is for personal effects, you must also obtain and submit a police report.

All claims must be mailed to: American International Companies, Accident & Health Claims Division, P.O. Box 15701, Wilmington. DE 19850-5701

In addition, you must call your Participating Rent-A-Car Company to report the incident or accident as soon as possible. You may call either the Participating Rent-A-Car Company location at which you rented the car or the location nearest to you.

Your Participating Rent-A-Car Company may from time to time change insurance carriers. Please call them to confirm the name of the Insurance carrier or policy number, if needed.

**PROOF OF COVERAGE**

Your proof of coverage under any product is your Rental Agreement. The coverage will appear on the face of the agreement in computer-generated print along with the daily charge and a line for you to sign your initials, You should save your copy of the Rental Agreement. However, in case you lose it the Participating Rent-A-Car Company will provide a copy on request.

**STATE LAWS**

Remember, state laws may prohibit or modify the optional products offered. My offer or description of benefits is void where prohibited by law.

**Broker**

GMI  
P.O. Box 701  
Valley Forge, Pa 19482  
610-933-4679



Coverage underwritten by National Union Fire Insurance Company of Pittsburgh, Pa.

A member of AIG



**PAI  
PERSONAL ACCIDENT INSURANCE**

**PEI  
PERSONAL EFFECTS INSURANCE**

**IN THE EVENT OF AN ACCIDENT**

1. Contact the police immediately
2. Contact your rental agents and advise them of the accident
3. Complete the claim form and mail it along with your rental agreement and a copy of the police report to:

**American International Companies  
Accident & Health Claims Division  
P. O. Box 15071  
Wilmington, DE 19850-5701**

GMI  
P.O. Box 701  
Valley Forge, PA 19482  
800-722-3229  
Fax 610-933-4993  
www.gmi-insurance.com