



## STANDARD COVERAGE

### 1. CONTRIBUTION FOR OUTBOUND TRIP

Period of Cover (Days)	ASIA			WORLDWIDE		
	Self (RM)	Self+ Spouse(RM)	Family (RM)	Self (RM)	Self+ Spouse(RM)	Family (RM)
<b>1</b>	10	15	15	-	-	-
<b>1-5</b>	20	50	60	50	80	100
<b>6-10</b>	60	90	100	90	130	150
<b>11-15</b>	80	120	130	120	180	190
<b>16-22</b>	110	170	190	150	250	270
<b>23-31</b>	150	230	250	220	350	380
<b>Each additional week or part</b>	50	80	100	80	100	120

### 2. CONTRIBUTION FOR INBOUND TRIP

Period of Cover (Days)	DOMESTIC / INBOUND		
	Self (RM)	Self+ Spouse(RM)	Family (RM)
<b>1</b>	5	8	10
<b>1-5</b>	15	25	50
<b>6-10</b>	50	70	80
<b>11-15</b>	60	80	100
<b>16-22</b>	70	120	130
<b>23-31</b>	90	150	180
<b>Each additional week or part</b>	30	50	70

**OPTIONAL LIMITS FOR EMERGENCY MEDICAL EVACUATION AND REPATRIATION**

**1. CONTRIBUTION FOR OUTBOUND TRIP**

Period of Cover (Days)	ASIA			WORLDWIDE		
	Self (RM)	Self+ Spouse(RM)	Family (RM)	Self (RM)	Self+ Spouse(RM)	Family (RM)
<b>1</b>	20	30	30	-	-	-
<b>1-5</b>	40	80	100	80	100	120
<b>6-10</b>	80	110	120	110	150	170
<b>11-15</b>	100	150	160	150	200	210
<b>16-22</b>	130	190	210	180	280	300
<b>23-31</b>	180	250	280	250	380	400
<b>Each additional week or part</b>	70	100	120	100	120	140

**2. CONTRIBUTION FOR INBOUND TRIP**

Period of Cover (Days)	DOMESTIC/INBOUND		
	Self (RM)	Self+ Spouse(RM)	Family (RM)
<b>1-5</b>	30	50	80
<b>6-10</b>	80	100	110
<b>11-15</b>	80	100	120
<b>16-22</b>	90	140	150
<b>23-31</b>	110	180	200
<b>Each additional week or part</b>	60	80	90

**BASIC BENEFITS FOR INBOUND AND OUTBOUND TRIP**

BENEFITS	OUTBOUND		INBOUND	
	SELF	FAMILY	SELF	FAMILY
<b>Accidental Death / Total Permanent Disablement</b>	100,000.00	100,000.00	150,000.00	150,000.00
	Payable per Individual/ Individual & Spouse	Payable per Family	Payable per Individual/ Individual & Spouse	Payable per Family
<b>Funeral Expenses</b>	5,000.00	12,500.00	4,000.00	8,000.00
<b>Medical Expense Reimbursement</b>	15,000.00	30,000.00	1,000.00	2,000.00
<b>Emergency Medical Evacuation</b>	10,000.00	10,000.00	10,000.00	10,000.00
<b>Follow-up Treatment</b>	5,000.00	10,000.00	1,000.00	2,000.00
<b>Hospital Income (150/day, maximum RM5,000)</b>	150.00	300.00	80.00	200.00
<b>Compassionate Care</b>	3,000.00	3,000.00	1,000.00	3,000.00
<b>Dispatch of Medicine</b>	1,000.00	3,000.00	1,000.00	1,000.00
<b>Loss of Travel Documents</b>	1,000	5,000	1,000	5,000
<b>Loss or Damage of Luggage or Personal Effects</b>	2,000	5,000	2,000	5,000
<b>Travel or Flight Delay</b>	Max 2,000.00	Max 2,000.00	Max 1,000.00	Max 2,000.00
	150 per 6 hours	200 per 6 hours	50 per 6 hours	100 per 6 hours
<b>Refund due to liquidation of Agency</b>	4,500.00	4,500.00	5,000.00	5,000.00
<b>Repatriation</b>	5,000.00	5,000.00	5,000.00	5,000.00

**ADDITIONAL BENEFITS FOR OUTBOUND TRIP**

Additional Benefits	Self	Family
	Payable per Individual/ Individual & Spouse	Payable per Family
Trip Cancellation	10,000.00	30,000.00
Trip Curtailment	10,000.00	20,000.00
Notebook	1,000.00	1,000.00
Luggage delay	300	1,000.00
Missed Departure	1,000.00	3,000.00
Missed Travel Connection	250	1,000.00
Travel Overbooked	250	1,000.00
Additional Costs of Rental Car Return	1,000.00	1,000.00
Personal Liability	1,000,000.00	1,000,000.00
Hijacking	3,000.00	6,000.00
Personal Money	500	1,000.00
Home Care Benefit	1,000.00	1,000.00

**OPTIONAL BENEFITS \* (SUBJECT TO ADDITIONAL TAKAFUL CONTRIBUTION)**

BENEFITS	OUTBOUND		INBOUND	
	SELF	FAMILY	SELF	FAMILY
Emergency Medical Evacuation	150,000.00	150,000.00	50,000.00	50,000.00
Repatriation	35,000.00	35,000.00	20,000.00	20,000.00

Note: Please refer to the table of benefits for death and disablement in the Takaful Certificate contract.

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