

Travel Insurance

Distribution Guide for Manulife Global Air Fare Cancellation Policy

Be protected if something unexpected happens before or during your trip.

Insurer	Manulife Affinity Markets 250 Bloor Street East Toronto, ON M4W 1E5 Licence No.: 2000737614	Telephone: 1-866-298-2722 Fax: 1-800-510-3362 Email: manulifeglobal@manulife.com Website: http://manulife.ca
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Assistance Centre	Active Care Management (ACM) P.O. Box 1237 Station A Windsor, ON N9A 6P8	Telephone: 1-855-297-4371 Call collect: 1-519-251-1581 Fax: 1-800-510-3362 Email: travelclaims@active-care.ca Website: https://www.active-care.ca
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Travel Agency (Distributor)	Name Address (Email) Telephone Fax
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← Your travel agency is required to provide you with this information.

Note about the Autorité des marchés financiers	The Autorité des marchés financiers does not express an opinion on the quality of the product offered in this guide. The insurer alone is responsible for any discrepancies between the wording of the guide and the policy.
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RULES FOR REVIEWING THIS GUIDE CAREFULLY

“You” can refer to many people

When referring to “you,” we mean the person who purchased the insurance and any other insured individual, unless the context states otherwise.

“Trip” has a specific meaning

The word “trip” refers to the period beginning on the *departure date* and ending on the return date shown in your *Confirmation*.

Words in *italics* have a specific meaning

Words and expressions in *italics* are defined at the end of the guide (see [Section 12. Definitions](#)). Read these definitions if you have any questions.

This Guide is a summary

Review the sample policy for complete details. You can get a copy from your travel agency or on the website where you buy your insurance.

THINGS TO CHECK FOR PEACE OF MIND WHEN TRAVELLING

Before you buy this insurance

- ✓ Do you, and all the individuals you want to insure, meet **all** the eligibility requirements? If not, you might not be covered. To make sure, read [Section 1. Who can purchase this insurance \(eligibility requirements\)](#).

Before you travel

- ✓ Do all insured people still meet all eligibility requirements? Otherwise, exclusions may apply.
- ✓ Has the health of any of the insured people changed since you purchased this insurance? If so, exclusions may apply.

DON'T FORGET

Don't make false statements

If you make a false statement or if you fail to declare certain information before or during the coverage period, we may cancel your coverage.

10 days to change your mind

You have the right to cancel your insurance at no cost within 10 days of purchasing your insurance. To find out more, read [Section 8. Your right to terminate insurance](#).

Don't leave without paying

You're not covered until you pay your insurance premium.

TABLE OF CONTENTS

1. WHO CAN PURCHASE THIS INSURANCE (ELIGIBILITY REQUIREMENTS)	5
Requirements for purchasing this insurance	5
Situations where you are ineligible to purchase this insurance	5
Your insurance will be cancelled if you don't meet the eligibility requirements	5
2. WHO IS INSURED	5
You	5
3. THE DURATION OF YOUR INSURANCE DEPENDS ON YOUR TRAVEL DATES	6
Have your travel dates changed? Remember to adjust the duration of your insurance.	7
4. YOUR INSURANCE APPLIES WORLDWIDE	7
5. SUMMARY OF COVERAGES	8
CANCELLATION OF PLANE TICKETS	8
CANCELLATION OF YOUR PLANE TICKETS BEFORE OR AFTER YOUR DEPARTURE	8
Requirements to qualify for this coverage	8
Covered events	8
Covered expenses	8
DELAY IN YOUR TRIP	9
Requirements to qualify for this coverage	9
Covered events	9
Covered expenses	9
EXCLUSIONS FOR CANCELLATION OF PLANE TICKETS	10
6. COST OF INSURANCE	11
7. HOW TO MAKE A CLAIM	12
90 DAYS TO MAKE YOUR CLAIM	12
Supporting receipts and documents	12
We pay within 30 days if your claim is approved	12
YOUR LEGAL RIGHTS IF YOU DISAGREE WITH OUR DECISION	13
1. You can ask us to reconsider your claim	13
2. You can contact the OmbudService for Life & Health Insurance	13
3. You can contact the Autorité des marchés financiers	13
4. You can appeal our decision in court	13
8. YOUR RIGHT TO TERMINATE INSURANCE	14
Within 10 days after purchasing your insurance: full refund	14
No refund in other cases	14
9. SIMILAR INSURANCE PRODUCTS AVAILABLE ON THE MARKET	14
10. CONTACT US	15
11. CONTACT THE AUTORITÉ DES MARCHÉS FINANCIERS	15
12. DEFINITIONS	16
APPENDIX 1: NOTICE OF CANCELLATION OF AN INSURANCE CONTRACT (TO TERMINATE THE INSURANCE)	19
Sections of the Act respecting the distribution of financial products and services	20

1. WHO CAN PURCHASE THIS INSURANCE (ELIGIBILITY REQUIREMENTS)

Requirements for purchasing this insurance

You can purchase this insurance if you, and any person you want to insure, meet all the following requirements:

- ✓ You reside in Canada
- ✓ You purchased this travel insurance when booking your travel arrangements, for the entire duration of the trip

DOES YOUR TRIP HAVE A VALUE GREATER THAN \$30,000?

You must answer a medical questionnaire honestly and accurately to find out whether or not you can take out insurance.

Situations where you are ineligible to purchase this insurance



You should not purchase this insurance if any of the following situations apply to you or to any person you want to insure.

- ✗ You were advised by a *physician* not to travel
- ✗ You were diagnosed with a terminal *illness* with less than 6 months to live
- ✗ You require kidney dialysis
- ✗ You have used oxygen at home during the past 12 months

Your insurance will be cancelled if you don't meet the eligibility requirements

You must meet all these requirements, and each of the people you want to insure must also meet them. Otherwise, the insurance will be cancelled.

If you don't meet all eligibility requirements for this plan, there might be other travel insurance products with different eligibility requirements.

2. WHO IS INSURED

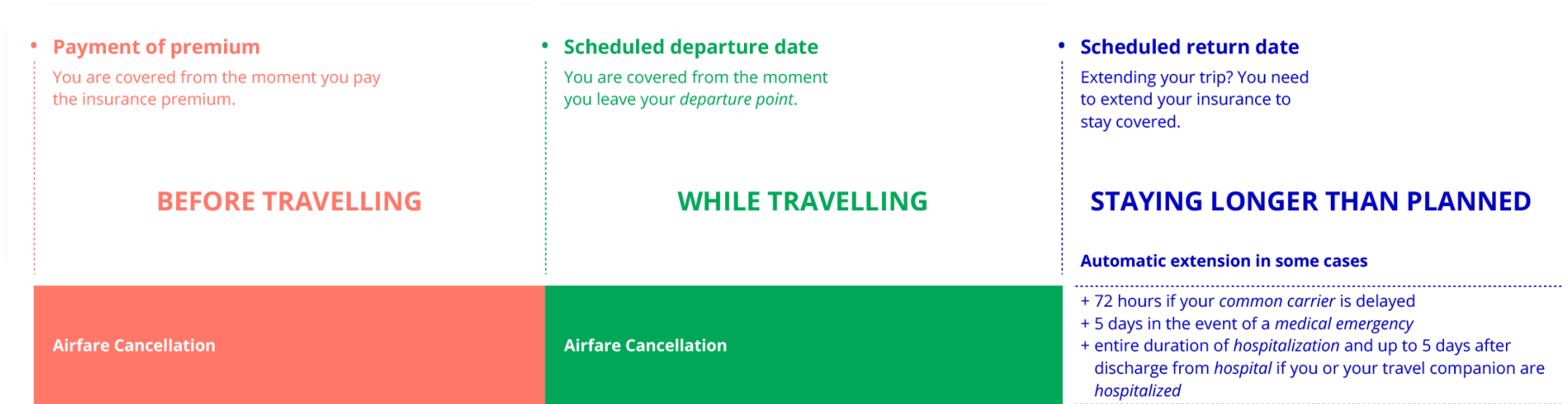
You



You are insured if:

- You meet all the eligibility requirements.
- You have paid the insurance premium.
- Your *Confirmation* shows that you are an insured person.

3. THE DURATION OF YOUR INSURANCE DEPENDS ON YOUR TRAVEL DATES



Have your travel dates changed? Remember to adjust the duration of your insurance.

Your insurance must cover the entire duration of your trip. If you leave earlier or come back later than planned, contact your travel agency to adjust the duration of your coverage.

Important: In some cases, you need to get authorization from the Assistance Centre to change your insurance. For example, if a *medical condition* first appeared after you purchased the insurance or if you already have a claim in progress.

4. YOUR INSURANCE APPLIES WORLDWIDE

Your insurance applies worldwide. However, exclusions may apply if the Government of Canada issues an advisory against travel to a certain region or country.

5. SUMMARY OF COVERAGES

CANCELLATION OF PLANE TICKETS

We reimburse certain costs if you must cancel your plane tickets. This coverage contains the following sub-coverages:

- Cancellation of plane tickets before and after your departure
- Trip delay

CANCELLATION OF YOUR PLANE TICKETS BEFORE OR AFTER YOUR DEPARTURE

If you must cancel your plane tickets due to one of the covered events, we reimburse you for certain non-refundable expenses for your plane tickets.

Requirements to qualify for this coverage

- ✓ An unexpected event forces you to cancel your insured plane tickets.
- ✓ The event is included in the list of covered events
- ✓ You must immediately inform your travel agency about the event that is forcing you to cancel your tickets.

Covered events

Below is a summary of covered events. Some events may also apply to your *travel companion*. For a full list and more details, see the sample policy.

- ✓ Events related to your own health, or the health of a member of your *immediate family* or your *key person*. For example, you have a sudden *medical condition*, or you are quarantined.
- ✓ Death. For example, if you, a member of your *immediate family*, or the person whose guest you will be during your trip should die.
- ✓ If you must take part in a trial. For example, if you are called to jury duty or if you are charged in a civil case.
- ✓ You are unable to occupy your principal residence or operate your commercial establishment due to a disaster.
- ✓ *You, your spouse, your travel companion* or your travel companion's *spouse* are hijacked.

Covered expenses

Below is an overview of covered expenses and applicable limits. We pay up to the benefit amount selected for the coverage. For a full list, see the sample policy.

BEFORE YOU LEAVE

Non-refundable part of your insured and paid plane tickets	100%
Airline fee to change your ticket	100%

AFTER YOUR DEPARTURE

Additional cost of economy-class airfare to return to your <i>departure point</i>	100%
Accommodations and other expenses (meals, taxis, phone calls, Internet, vehicle rental)	\$100

FUNERAL ARRANGEMENT EXPENSES IN CASE OF DEATH WHILE TRAVELLING

Preparation and repatriation of your remains, burial or cremation in the place where the death occurs	\$5,000
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DELAY IN YOUR TRIP

We reimburse certain costs if an event delays your trip, at the time of departure or afterward.

Requirements to qualify for this coverage

- ✓ An unexpected event prevents you from using your plane tickets.
- ✓ The event is included in the list of covered events
- ✓ For a missed connection, you gave yourself enough time to check in according to your *travel supplier*.

Covered events

Below is a summary of covered events. Some events may also apply to your *travel companion*. For a full list and more details, see the sample policy.

- ✓ Events related to your own health, or the health of a member of your *immediate family* or your *key person*. For example, you have a sudden *medical condition*, or you are quarantined.
- ✓ Death. For example, if you, a member of your *immediate family*, or the person whose guest you will be during your trip should die.
- ✓ The person whose guest you will be during your trip is admitted to a *hospital* in an emergency, dies or is quarantined.
- ✓ You miss a connection or must interrupt your trip due to the delay of your connecting private *vehicle* or *common carrier*.

Covered expenses

Below is an overview of covered expenses and applicable limits. We pay up to the benefit amount selected for the coverage. For a full list, see the sample policy.

BEFORE YOU LEAVE

Additional cost of economy-class airfare to travel to the next destination on your trip	100%
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AFTER YOUR DEPARTURE

Additional cost of economy-class airfare to return to your	100%
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departure point or travel to the next destination on your trip

Accommodations and other expenses (meals, taxis, phone calls, Internet, vehicle <i>rental</i>)	\$150/day up to a maximum of \$300
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EXCLUSIONS FOR CANCELLATION OF PLANE TICKETS

Below is an overview of the main exclusions that may apply. For a full list, see the sample policy.

EXPENSES RELATED TO FORESEEN EVENTS

We do not reimburse you if you knew that an event might force you to cancel your plane tickets or delay your trip when you purchased your insurance or booked your trip.

EXPENSES RELATING TO YOUR HEALTH BEFORE YOUR TRIP

You might not be covered if you had a *medical condition* before your trip, and if the *medical condition* was not *stable* in the 3 months before the insurance started. For example, your *medical condition* is not *stable* if you experience any new symptoms, or if there was any *change in medication* or *treatment* during this period.

This exclusion may apply to you, for example, if you have:

- × a *heart condition*,
- × a lung condition, or
- × if you took any medications or received *treatment* for these conditions.

To **check if this exclusion applies to you**, see the sample policy.

You are not covered for expenses relating to your *medical condition* if:

- × you knew or should have known that you would need *treatment* during your trip
- × an assessment or *treatment* for your *medical condition* was planned for your return
- × you had symptoms in the 3 months prior to your departure that should have received *treatment*
- × you were advised by a *physician* not to travel

EXPENSES RELATED TO THE MEDICAL CONDITION OF THE PERSON YOU ARE VISITING

We do not pay expenses related to the *medical condition* or death of a sick person, when the purpose of your trip is to visit the sick person.

EXPENSES RELATED TO YOUR PREGNANCY

Travel in the final months of your pregnancy and in the months following childbirth can be hazardous to both your health and the health of your child.

We do not cover the following:

- ✗ Expenses related to the management of pregnancy (prenatal care)
- ✗ Expenses for your child born during the trip

We do not cover expenses that you incur in the 9 weeks before or after the expected date of delivery. For example:

- ✗ If you give birth before or during your trip
- ✗ If you have a *medical condition* related to your pregnancy or the after-effects of childbirth

EXPENSES RELATED TO CERTAIN BEHAVIOURS

- ✗ If the situation is related to your abuse of drugs, alcohol, medications or other substances
- ✗ If you commit or attempt to commit a crime or an illegal act
- ✗ If your injuries are self-inflicted (unless a *physician* certifies that the injuries are related to a mental disorder)

EXPENSES RELATED TO MINOR MENTAL OR EMOTIONAL DISORDERS (ANXIETY)

We cover expenses related to *stable* mental or emotional disorders. However, we do not cover expenses related to a condition where your *treatment* includes only mild tranquilizers or mild anti-anxiety (anxiolytic) medication, or no prescription medication at all.

EXPENSES RESULTING FROM OF AN ACT OF WAR OR AN ACT OF TERRORISM

We do not cover expenses incurred from an *act of war*. We cover expenses incurred from an *act of terrorism* in limited circumstances. For more information, see the sample policy.

EXPENSES IF THERE IS A RISK OF HARM TO YOU DURING YOUR TRIP

You are not covered if the Government of Canada issued a warning advising Canadians not to travel to the region before your insurance began, and you must cancel or interrupt your trip because of

- ✗ a *medical condition* specific or related to this warning, or
- ✗ an *act of war* or an *act of terrorism*.

6. COST OF INSURANCE

The cost of insurance is in your *Confirmation*.

7. HOW TO MAKE A CLAIM

Your claim is processed by our partner, Active Care Management (ACM).

You can use the TravelAid™ mobile app to make a claim. You can also write to us at the following address:

Manulife Travel Insurance c/o Active Care Management
P.O. Box 1237, Station A
Windsor, ON N9A 6P8

90 DAYS TO MAKE YOUR CLAIM

You must send us your claim within 90 days of an event.

We can accept claims up to 12 months after the event if you aren't able to submit your claim sooner. For example, if you are in a coma and no one can make the claim for you.

Supporting receipts and documents



CLAIM FORM

To obtain a form, contact the Assistance Centre, download the TravelAid™ mobile app, or go online to Active Care Management (ACM) assistance services.



PROOF OF EVENT

For example, your medical records or a medical certificate, or a police report



ORIGINAL BILLS AND RECEIPTS

For example, your transportation tickets or accommodation receipts, or receipts for medical expenses

We pay within 30 days if your claim is approved

We notify you of our decision within 30 days after receiving your claim and all supporting documents. If we decline your claim, we explain our reasons to you in writing.

YOUR LEGAL RIGHTS IF YOU DISAGREE WITH OUR DECISION

1. You can ask us to reconsider your claim

We will reconsider your claim if you provide us with additional arguments, information, or documentation. You can contact Customer Service, then Customer Service management and, if you are still not satisfied, the Manulife Ombuds Office. For more information:

www.manulife.ca/for-you/contact-us/feedback-or-complaint.html

2. You can contact the OmbudService for Life & Health Insurance

The OmbudService for Life & Health Insurance is an independent organization that helps people who want to file a complaint about their insurance coverage. For more information: www.olhi.ca

3. You can contact the Autorité des marchés financiers

The Autorité des marchés financiers reviews your file and can help us find a solution together, such as offering dispute resolution services. For more information: autorite.qc.ca/en/general-public/assistance-complaints-and-compensation/

4. You can appeal our decision in court

If you decide to appeal our decision in court, you need to appeal within the 3-year time frame prescribed by the Civil Code (prescription period). We recommend that you seek legal advice for information on your rights and the appeal process.

8. YOUR RIGHT TO TERMINATE INSURANCE

Within 10 days after purchasing your insurance: full refund

We refund you the insurance premium in full if you meet the following conditions:

- ✓ You cancel your insurance no later than 10 days after signing the Application for insurance.
- ✓ You cancel your insurance before the departure date shown in your *Confirmation*.
- ✓ You do not have any claims in progress

YOU MUST CANCEL YOUR INSURANCE IN WRITING WITH YOUR TRAVEL AGENCY

You can use the *Notice of cancellation of an insurance contract* at the end of this guide (Appendix I). Your travel booking and any other contract you enter with your travel agency remains in effect. You may lose certain discounts or benefits that you were entitled to because you purchased this insurance.

YOU MUST APPLY TO YOUR TRAVEL AGENCY IN WRITING FOR YOUR REFUND

You can use the *Notice of cancellation of an insurance contract* included at the end of this guide (Appendix I).

No refund in other cases

You can terminate your policy at any time, but you will not be entitled to a refund in other cases.

9. SIMILAR INSURANCE PRODUCTS AVAILABLE ON THE MARKET

Manulife offers a comprehensive range of travel insurance coverages. Keep in mind, though, that other travel insurance products are available on the market.

Other products may contain travel insurance coverage like that offered by Manulife. Remember to check if you already have some of these coverages.

10. CONTACT US

Manulife
Affinity Markets
250 Bloor Street East
Toronto, ON M4W 1E5

Telephone: 1-866-298-2722
Fax: 1-800-510-3362
Email: manulifeglobal@manulife.com
Website: <http://manulife.ca>

11. CONTACT THE AUTORITÉ DES MARCHÉS FINANCIERS

The Autorité des marchés financiers can provide you with information about your insurer's or your insurance distributor's obligations. To contact the Autorité des marchés financiers:

Autorité des marchés financiers
Place de la Cité, Cominar Tower
2640 boulevard Laurier, Suite 400
Quebec City, QC G1V 5C1

Quebec City: 418-525-0337
Montreal: 514-395-0337
Elsewhere in Quebec: 1-877-525-0337
Fax: 418-525-9512
Website: <https://lautorite.qc.ca>

12. DEFINITIONS

Act of war

Hostile or warlike action, whether declared or not, in a time of peace or war, whether initiated by a local government, foreign government or foreign group, civil unrest, insurrection, rebellion or civil war.

Act(s) of terrorism

Any activity that involves a threat to use or the actual use of violence or any dangerous or threatening act, or the use of force. Such act is directed against the general public, governments, organizations, properties or infrastructures, or electronic systems.

The intention of such activity is to:

- instill fear in the general public;
- disrupt the economy;
- intimidate, coerce or overthrow a sitting government or occupying power;
- promote political, social, religious or economic objectives.

Common carrier

A conveyance (such as a bus, taxi, train, boat, airplane) which is licensed, intended and used to transport paying passengers.

Confirmation

Your *Confirmation* refers to several documents:

- the application for insurance,
- any other documents confirming your insurance coverage once you have paid the required premium,
- where applicable, the medical questionnaire, and
- your travel arrangements, including tickets and receipts issued by a *travel supplier* or for accommodation.

Departure point

The place where you depart from on your trip and where you plan to return.

Heart condition

Any disorder relating to your heart. Heart conditions include but are not limited to the following:

- An abnormal cardiac test result
- Atrial fibrillation
- Chest pain or discomfort due to the heart, or angina
- Heart failure, or heart attack, or myocardial infarction, or cardiac arrest
- Heart murmur (Does not include a murmur that existed as a child if there is no murmur as an adult, according to a *physician*.)
- Narrowing or blockage of a coronary artery, or coronary artery disease
- Prior heart surgery of any kind, including but not limited to angioplasty, bypass surgery, valvuloplasty, valve replacement, heart ablation surgery, heart transplantation or surgery for any congenital heart disorder
- Any heart valve disorder, or any rapid, or slow, or irregular heartbeats or heart rates for which a *physician* has prescribed medication, or for which there has been surgery or cardioversion
- *Treatment* with a pacemaker or a cardiac defibrillator device
- Water on the lungs or swelling of the ankles due to a heart disorder

Hospitalization (Hospital)

Admission to a licensed facility where inpatients receive medical care and diagnostic and surgical services under the supervision of a staff of *physicians* with 24-hour care by registered nurses.

WARNING: *Hospital* does not include a clinic, a long-term or palliative care facility, a rehabilitation centre, an addiction centre, a convalescent, rest, nursing home or long-term care facility, a seniors' residence, or a health spa.

Immediate family

Spouse, parent, legal guardian, step-parent, grandparent, step-grandparent, *grandchild*, in-law, natural or adopted *child*, step-child, sibling, half-sibling, aunt, uncle, niece or nephew.

Injury

Sudden bodily harm that is caused by external and purely accidental means, and independent of any *sickness* or disease.

Key person

- Someone to whom a dependent's full-time care is entrusted and who cannot reasonably be replaced, or
- a business partner, or
- an employee who is critical to the ongoing affairs of your business, during the trip.

Medical condition

- *Injury*
- *Illness*, disease or symptom
- Complication of pregnancy within the first 31 weeks of pregnancy.

Spouse

Someone to whom one is legally married, or with whom one has been residing and who is publicly represented as a *spouse*.

Sickness

Illness, disease, disorder, or any related symptom.

Stable

A *medical condition* is *stable* when all the following criteria are met:

- there has not been any new symptom(s);
- existing symptom(s) have not become more frequent or severe;
- a *physician* has not determined that the *medical condition* has worsened;
- no test findings have shown that the *medical condition* may be getting worse;
- a *physician* has not provided, prescribed, or recommended any new medication, or any *change in medication*;
- a *physician* has not provided, prescribed or recommended any new *treatment* or any change in *treatment*;
- no admission to a *hospital* or specialty clinic has been required;
- a *physician* has not advised a visit to a specialist or further testing, and there has been no testing for which the results have not yet been received.

Travel companion

A person who shares trip arrangements with you on any one trip.

WARNING: A maximum of 5 people, including you, may be considered *travel companions* on any one trip.

Travel services

Transportation, sleeping accommodation, or other service provided or arranged by a *travel supplier* for your use.

WARNING: *Travel services* do not include taxes or insurance.

Travel supplier

A tour operator, travel wholesaler, airline, cruise line, ground transport provider, travel accommodation provider, or provider of other services to you that is:

- contracted to provide *travel services* to you, AND
- licensed, registered or otherwise legally authorized in location of the travel supplier to operate and provide the *travel services* as shown on your Confirmation.

Treatment, Treat, Treated

Hospitalization, prescribed medication (including medication prescribed “as needed”), medical, therapeutic, diagnostic or surgical procedures prescribed, performed or recommended by a licensed medical practitioner.

WARNING: Any reference to testing, tests, test results, or investigations excludes genetic tests. “Genetic test” means a test that analyzes DNA, RNA or chromosomes for purposes such as the prediction of *sickness* or vertical transmission risks, or monitoring, diagnosis or prognosis.

Vehicle

Includes any private or rental passenger automobile, boat, mobile home, camper truck, or trailer home you use during your trip exclusively for the transportation of passengers (other than for hire).

APPENDIX 1: NOTICE OF CANCELLATION OF AN INSURANCE CONTRACT (TO TERMINATE THE INSURANCE)

THE ACT RESPECTING THE DISTRIBUTION OF FINANCIAL PRODUCTS AND SERVICES GIVES YOU IMPORTANT RIGHTS.

- The Act allows you to cancel an insurance contract you have just signed when signing another contract, without penalty, within 10 days of its signature. To do so, you must give the insurer notice by registered mail within that delay. You may use the attached model for this purpose.
- Despite the cancellation of the insurance contract, the first contract entered will remain in force.
Warning: It is possible that you may lose advantageous conditions because of this insurance contract; contact your distributor or consult your contract.
- After the expiry of the 10-day delay, you may cancel the insurance at any time; however, penalties may apply.

For more information, contact the Autorité des marchés financiers at: 418-525-0337 (Quebec City), 514-395-0337 (Montreal), or 1-877-525-0337 (toll-free).

NOTICE OF CANCELLATION OF AN INSURANCE CONTRACT ¹

You should send this notice by registered mail.

To Manulife
Affinity Markets
250 Bloor Street East
Toronto, ON M4W 1E5

Name and address of Insurer
or Insurers

DATE _____ Date notice sent

Pursuant to section 441 of the Act respecting the distribution of financial products and services, I hereby cancel:

INSURANCE CONTRACT NO. _____ Contract number, if indicated
ENTERED ON _____ Date of signature of contract
AT _____ Place of signature of contract
NAME OF CLIENT _____
SIGNATURE _____

¹ Notice given by distributor, s. 440 of the *Act respecting the distribution of financial products and services* Sections 439 to 443 of the Act appear in this notice and have been reproduced on the following page.

Sections of the Act respecting the distribution of financial products and services

439. A distributor may not subordinate the making of a contract to the making of an insurance contract with the insurer specified by the distributor.

The distributor may not exercise undue pressure on the client or use fraudulent tactics to induce the client to purchase a financial product or service.

440. A distributor that, at the time a contract is made, causes the client to make an insurance contract must give the client a notice, drafted in the manner prescribed by regulation of the Authority, stating that the client may rescind the insurance contract within 10 days of signing it.

441. A client may rescind an insurance contract made at the same time as another contract, within 10 days of signing it, by sending notice by registered or certified mail. Where such an insurance contract is rescinded, the first contract retains all its effect.

442. No contract may contain provisions allowing its amendment in the event of rescission or cancellation by the client of an insurance contract made at the same time. However, a contract may provide that the rescission or cancellation of the insurance contract will entail for the remainder of the term, the loss of the favourable conditions extended because more than one contract was made at the same time.

443. A distributor that offers financing for the purchase of goods or services and that requires the debtor to subscribe for insurance to guarantee the reimbursement of the loan must give the debtor a notice, drawn up in the manner prescribed by regulation of the Authority, stating that the debtor may subscribe for insurance with the insurer and representative of the debtor's choice provided that the insurance is considered satisfactory by the creditor, who may not refuse it without reasonable grounds. The distributor may not subordinate the making of the contract of credit to the making of an insurance contract with the insurer specified by the distributor.

No contract of credit may stipulate that it is made subject to the condition that the insurance contract subscribed with such an insurer remain in force until the expiry of the term, or subject to the condition that the expiry of such an insurance contract will entail forfeiture of term or the reduction of the debtor's rights.

The rights of the debtor under the contract of credit shall not be forfeited when the debtor rescinds, cancels or withdraws from the insurance contract, provided that the debtor has subscribed for insurance with another insurer that is considered satisfactory by the creditor, who may not refuse it without reasonable grounds.