

**苏黎世财产保险（中国）有限公司公众和产品责任保险（以索赔提出为基础）附加无过错医疗费用条款**

**赔偿限额：RMB20,000每次**

兹约定，

（1）保险人负责赔偿因意外事故造成第三方人身伤害的合理医疗费用，但此类人身伤害须是：

- (a) 发生在被保险人所有或租用的营业场所；或
- (b) 发生在去被保险人所有或租用的营业场所途中；
- (c) 因被保险人的业务活动而引致；且：
  - i. 事故必须发生在保险期间，发生在保单的地域范围内；
  - ii. 必须是事故发生起一年内发生并报给给保险公司的医疗费用；
  - iii. 受伤者必须接受保险人指定医师的检查，如果保险人的要求合理。

（2）无论被保险人对事故的发生是否存在过失，保险人都负责赔偿。本保险单在本条款项下的赔偿限额为每次事故CNY20,000元。保险人支付的合理医疗费用包括：

- a) 事故发生时的抢救费用；
- b) 必要的药物、外科、x光、齿科服务等，含康复器械；及
- c) 必要的救护车、住院、医护和丧葬服务。

本保险单所载其它条件不变。

**No-fault Medical (Limit: CNY20,000 Any One Accident)**

It is hereby agreed and understood that

(1) The Insurer will pay medical expenses as described below for Bodily Injury caused by an accident:

- a. On premises the Insured own or rent;
- b. On ways next to premises the Insured own or rent; or
- c. Because of the Insured's operations;

Provided that:

- i. The accident takes place in the Coverage Territory and during the policy period;
- ii. The expenses are incurred and reported to the Insurer within one year of the date of the accident; and
- iii. The injured person submits to examination, at the Insurer's expense by physicians of the Insurer's choice as often as the Insurer reasonably require.

(2) The Insurer will make these payments regardless of fault. The payment will not exceed the limit of insurance of CNY20,000 for any one accident. The Insurer will pay reasonable expenses for:

- a) First aid at the time of an accident;
- b) Necessary medical, surgical, x-ray and dental services, including prosthetic devices; and
- c) Necessary ambulance, hospital, professional nursing and funeral services.

Subject otherwise to the terms and conditions of this Policy.