

International Travel Insurance

Insurance Product Information Document

Company:

registered in Poland

Product: Safe Travels

This is a summary of our insurance policy. You can find full information provided prior to entry into an insurance contract and contractual information on the insurance product in the General Terms and Conditions of Safe Travels Insurance of 21 November 2024 and in other documents.

What type of insurance is this?

International Travel Insurance (Section II Group 1, 2, 9, 13).



What is insured?

Depending on the package and the sum insured specified in the policy, the following may be insured:

- ✓ Medical expenses and rescue and assistance costs, including unlimited transport to the country of residence, following:
 - sudden illness, also caused as a result of an aggravation of a chronic disease, or
 - personal accident.
- ✓ Medical expenses and assistance costs following sudden illness caused by Sars-Cov-1 or Sars-Cov-2 with their mutations,
- ✓ Personal accidents, including death and permanent damage to health,
- ✓ Legal assistance and defence: lawyer's fee, lawyer's fee in third-party liability cases, security deposit loan,
- ✓ Travel luggage, including sports equipment, photographic equipment, computer hardware, audio and video equipment and mobile phones,
- ✓ Private third-party liability while traveling.



What is not insured?

Without a proper cover extension, you are not covered among other things for damages related to the following:

- ✗ Winter or extreme sports,
- ✗ Physical work.



Are there any restrictions on the coverage?

You are not covered for events related to circumstances including, but not limited to, the following:

- ! Your deliberate action,
- ! Use of drugs or other intoxicants,
- ! Mental health illnesses,
- ! Self-treatment or treatment by a physician from your family.

Positive PCR test result and associated isolation and other consequences are not covered by the insurance, as long as they are not related to sudden illness caused by Sars-Cov-1 or Sars-Cov-2 with their mutations.

You are also not covered for costs arising where the commencement of treatment may be postponed until you return to your country of permanent residence and such personal accident consequences as: pain and physical and mental suffering.



Where am I covered?

Depending on the zone selected, you will be covered within Europe and the Mediterranean or anywhere in the world outside your country of permanent residence.



What are the obligations of the Insured?

- ✓ inform immediately of the occurrence of the insured event,
- ✓ transmit to the documents confirming the event.



When and how do I pay?

You premium is payable as a one-off payment in PLN on the day of entering into the insurance contract. Depending on the manner of entering into the contract, you can either pay in cash or make a cashless payment.



When does the coverage start and end?

- The coverage starts no sooner than at the time of issuing the insurance document and ends on expiry of the insurance period, and:
 - ✓ For medical expenses, legal assistance and defence and third-party liability insurance, the coverage starts as soon as you cross the Polish border at departure and ends as soon as you cross the border again when returning to Poland,
 - ✓ For insurance of personal accident, travel luggage and sports equipment, the coverage starts on the start of the trip, i.e., as soon as you leave your place of residence, and ends as soon as you come back to your place of residence,
 - ✓ If you start your trip from a country other than Poland, for all types of insurance the coverage starts as soon as you cross the border of the country of departure and ends as soon as you cross the border again when returning to that country.
- For MULTITRIP insurance the following provisions apply as well:
 - ✓ Name insurance is for the first 60 days of each trip, regardless of the number of trips,
 - ✓ For no-name insurance, the remains liable for a period between the dates specified in the trip form at .



How do I cancel the contract?

The Policyholder may withdraw from an insurance contract entered into for more than 6 months within 30 days (for an entrepreneur – within 7 days) from entering into such contract. If failed to inform the Policyholder of their right of withdrawal at the latest at the time the contract was concluded, the period of 30 days shall run from the day on which the Insurer became aware of this right.



GENERAL TERMS AND CONDITIONS OF SAFE TRAVELS INSURANCE

effective as of December 11, 2024

Index drawn up in accordance with Article 17 point 1 of the Act of September 11, 2015
on insurance and reinsurance activity

What information	Provision number from the standard contract
Indications for payment of damages and other benefits or surrender values of insurance	§ 5; § 15; § 17; § 19; § 21; § 23, including the definitions in § 2 Appendix 4 to the GT&C: Additional clauses
Limitations and exclusions of liability entitling the insurance company to refuse to pay damages or other benefits, or to reduce them	§ 6 points 2 and 3; § 8; § 9; § 11 point 2; § 14 points 4 and 5; § 16; § 18; § 20; § 22; § 24 including the definitions in § 2 Appendix 1 to the GT&C: Benefit limits table Appendix 2 to the GT&C: Percentage table of benefits for Damage to health Appendix 4 to the GT&C: Additional clauses

WHAT IS COVERED?

- medical expenses and assistance,
- personal accidents,
- legal assistance,
- luggage,
- third party liability in private life.

OPTIONS

- **TRAVEL** – insurance for a specified period of insurance,
- **MULTITRIP** – long-term insurance of multiple trips:

INDIVIDUAL – for 6 or 12 months, regardless of the number of trips (we cover only the first 60 days of each trip),

GROUP – for 12 months, specified number of man-days; each trip has to be reported at

During a foreign trip, we provide insurance coverage at no extra charge in the following cases:

- amateur sports,
- aggravation of a chronic disease,
- terrorist attack,
- damages caused under the influence of alcohol (excluding third party liability and road accidents),
- sudden illness caused by Sars-Cov-1 or Sars-Cov-2 with their mutations.

CHRONIC DISEASES – mostly, they include:

- arterial hypertension,
- coronary heart disease,
- diabetes,
- cholecystolithiasis,
- urolithiasis,
- hyperthyroidism and hypothyroidism,
- chronic gastric ulcer disease,
- degenerative joint disease and degenerative spine disease,
- neoplastic disease,
- permanent damage to organs, e.g., heart, liver, kidneys, etc.

SPORTS

If you are planning to practice sports during your trip, make sure you read the following definitions:

- amateur sports,
- winter sports,
- extreme sports.

The full list of sports covered by the insurance can be found in Appendix 3.

PHYSICAL WORK

If you perform the activities listed in the definition, extend your coverage with the physical work related risk.

PERSONAL ACCIDENT INSURANCE DAMAGE TO HEALTH

Remember you may only receive the personal accident benefit if your accident resulted in one of the types of damage to health listed in the table attached as Appendix 2 to these GT&C!

Details of the Safe Travels Insurance are included in the GT&C below.

In the event of a sudden illness or personal accident, please contact the Emergency Call Center available 24 hours a day, 7 days a week, 365 days a year.

tel.

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9. **Integral franchise** – an amount up to which the liability of for damages is excluded.
10. **Deductible franchise** – an amount by which the benefit paid by is reduced.
11. **Hospitalization** – at least a 24-hour stay in a treatment facility providing patients with 24-hour care of medical staff for the purposes of diagnosis and treatment.
12. **Burglary** – taking of property after removing security means using physical force, instruments, a forged key or the original key, which the perpetrator obtained as a result of breaking into another building or Robbery, reported to the police.
13. **Country of residence** – the country in which the Insured is currently covered by common social security insurance or the country where the Insured resides and intends to stay permanently.
14. **Dental treatment** – temporary tooth treatment excluding permanent filling, root canal therapy, crown restoration; Dental treatment does not include treatment of crooked teeth, abnormal teeth growth or hygiene or cosmetic procedures.
15. **Sudden illness** – a disease with sudden onset which requires immediate medical aid due to which the Insured had to undergo treatment before the end of a trip.
16. **Personal accident** – a sudden event caused by external circumstances as a consequence of which the Insured, irrespective of the Insured's will, suffered a permanent bodily injury or health disorder, or died.
17. **Next-of-kin** – a spouse, parents, siblings, children, a cohabitant, grandparents, grandchildren, parents in-laws, children-in-law, stepparents, stepchildren.
18. **Accompanying person** – the person travelling along with the Insured during their treatment abroad and/or transport (person specified by the Insured, the Insured's guardian or member of the Insured's family).
19. **Pandemic** – an epidemic of infectious disease covering a part of a continent, several continents or the whole world. The Pandemic is declared by the World Health Organization.
20. **Foreign trip** – the Insured's stay outside the Insured's Country of residence, which starts when the Insured crosses the border of the Insured's Country of residence and ends when the Insured returns to the Insured's Country of residence.
21. **Physical work** – activities performed for gainful or non-gainful purposes (including internship, training and voluntary service) mainly requiring physical strength and practical skills, in particular: activities involving dangerous tools, chemical substances, welding work, work on oil platforms, work with high-voltage devices, work at heights, renovation and construction work, work in transport (excluding bus driver; in MULTITRIP option, bus drivers involved in unloading do not have to extend their cover by Physical work), in agriculture, underground work, work in metalurgy, at shipyards, work involving cutting and processing wood, work in catering.
22. **Rescue** – rescue or search action in the mountains or on the sea, carried out by specialised rescue services with the aim of rescuing the Insured's life or health, including: search by specialised rescue services, emergency medical aid on the site of the accident, transportation from the site of the accident to a medical care unit (using specialised means of transport such as: sleigh, helicopter, toboggan, motorboat); Rescue costs shall not be covered if they result from a false emergency call.
23. **Robbery** – taking of property involving violence or a threat of imminent violence to the Insured or to the Insured's Next-of-kin or involving the perpetrator rendering the Insured's unconscious or vulnerable.
24. **Amateur sports** – specified in the list in Appendix 3
25. **Extreme sports** – sports specified in the list in Appendix 3, including Competitive practice of Amateur sports and Competitive practice of Winter sports, as well as participating in Expeditions to places characterized by extreme climatic or natural conditions (that is, to the poles, bush, jungle, glacial or snow areas requiring the use of safety suspension equipment, desert areas).
26. **Winter sports** – sports practised on marked routes, listed in Appendix 3.
27. **Rehabilitation equipment** – the following equipment, recommended by the attending doctor and necessary for treatment or rehabilitation: crutches, an orthopaedic collar, a back brace, a lightweight plaster cast, a sling, an orthosis.
28. **Sports equipment** – all kinds of sports equipment and related fittings, used by the Insured during practice of sport.
29. **Policyholder** – a natural or legal person or an organizational unit to which legal capacity has been granted by law, required to pay the premium:
 - 1) having his/her permanent place of residence or the seat of the organisational unit covered by the insurance contract in the territory of Poland, respectively, who concluded the insurance contract on the basis of the GT&C, or
 - 2) having the place of residence or registered office of an organisational unit outside the territory of Poland, who has concluded an insurance contract connected with the Trip for a period not exceeding 4 months on the basis of the GT&Cs.
30. **Insured** – a natural person covered by the insurance under these GT&C.
31. **Beneficiary** – the person authorized to receive the benefit in the case of the Insured's death, appointed by name by the Insured; if no Beneficiary is appointed, the Insured's statutory heirs shall have a right to it, in the order and in the amount specified by the rules of statutory succession.
32. **Damage to health** – injury to the Insured's body suffered as a result of a personal accident covered by insurance; Damage to health means only the injuries specified in the Percentage table of benefits for Damage to health attached as Appendix 2 to these GT&C.
33. **Competitive practice of sports** – a form of physical activity involving the practice of sport:
 - 1) in sports groups or clubs, including participation in competitions or trainings for competitions (including workout camps),
 - 2) by persons participating in professional, national or international games,
 - 3) by persons who are entitled to remuneration or scholarship due to practice of sport (does not apply to instructors and sports coaches, who provide training in Amateur sports or Winter sports),
 - 4) by persons participating in marathons and half-marathons.
34. **Aggravation of a chronic disease** – sudden intensification/aggravation of symptoms of a chronic disease, which requires immediate medical intervention and due to which the Insured had to undergo treatment before the end of a trip.
35. **Hazardous event** – fire, torrential rain (rainfall with efficiency rate of at least 4, specified by a competent Institute of Meteorology and Water Management), flood, lightning strike, hurricane, earthquake, volcanic

eruption, gas mains explosion, leakage from water and sewage installation, hailstorm, avalanche.

§ 3.

Entry into insurance contract

1. The insurance contract shall be entered into upon the request of the Policyholder made after an offer has been made to him/her by
2. The insurance contract shall be deemed to have been entered into when the Policyholder accepts the offer made to him/her by submitting to a duly completed application relating to the insurance offer made to him/her.
3. The Policyholder shall provide the Insured with the GT&C before the Insured is covered by the insurance, as well as inform the Insured about their duties arising from the insurance contract. The GT&C shall be delivered to the Insured in writing or on another durable medium, provided that the Insured agrees thereto.

THE
POLICYHOLDER
MUST PROVIDE ALL
INSURED WITH COPIES
OF THE GT&C BEFORE AN
INSURANCE CONTRACT
IS ENTERED INTO

§ 4.

Withdrawal from insurance contract

1. The insurance contract entered into for a period exceeding 6 months may be terminated by the Policyholder within 30 days and, in the case of the Policyholder being a legal entity, within 7 days from the date of entry into the contract. If, at the latest on the date of entry into the contract, did not inform the Policyholder on their withdrawal right, the 30-day period shall begin on the day when the Policyholder became aware of that right.
2. If the Policyholder who is a consumer has concluded the insurance agreement by means of distance communication, the Policyholder shall have the right to withdraw within 30 days from the day on which informed the Policyholder of the conclusion of the insurance agreement or, if later, from the day of confirmation of the information to be provided to the Policyholder on the basis of the provisions on conclusion of distance agreements.
3. Withdrawal shall be effected by a declaration of the Policyholder. The deadline for withdrawal from the insurance agreement shall be met if a written declaration of withdrawal from the insurance agreement is sent before its expiry.
4. The fact of rescinding the insurance contract shall not release the Policyholder from the obligation to pay the premium for the period during which provided insurance.
5. In the event of termination of the insurance relationship before the expiry of the period for which the contract was concluded, the Policyholder shall be entitled to a refund of the premium for the period of unused insurance cover. The Premium to be returned shall be determined as follows:
 - 1) as an amount calculated in proportion to the unused insurance period,
 - 2) in the MULTITRIP option in an amount calculated in proportion to the number of man-days not used during the insurance period.

§ 5.

Scope of insurance

WHAT IS COVERED?

1. Under these GT&C, shall conclude insurance contracts within the scope of:
 - 1) medical expenses and assistance (including Rescue) (KL code),
 - 2) Personal accidents (NNW code),
 - 3) legal assistance (PP code),
 - 4) Luggage (BP code),
 - 5) third party liability (OC code).
2. The scope of the insurance contract may be extended to include risks related to:
 - 1) practice of Winter sports (SZ code),
 - 2) practice of Extreme sports (SM code)
 - 3) Physical work abroad (WA code).
3. Coverage without the need to extend the insurance contract covers Amateur sports and Aggravation of a chronic disease.
4. Insurance may be entered into in one of the following options: TRAVEL or MULTITRIP. In the TRAVEL option, assistance may be of the STANDARD or SUPER scope. MULTITRIP contracts shall always be of the SUPER scope. The STANDARD and SUPER scopes are defined in § 15, and liability limits for these scopes are specified in the Benefit Limits Table attached as Appendix 1 to these GT&C.
5. Territorial scope of insurance, that is the territory where insurance coverage is provided, shall depend on the zone the Insured chooses (excluding the Insured's Country of residence):
 - 1) zone I: countries located in Europe and within the Mediterranean Basin (Albania, Algeria, Andorra, Belgium, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Montenegro, Czech Republic, Denmark, Egypt, Estonia, Finland, France, Gibraltar, Greece, Spain, Netherlands, Ireland, Iceland, Israel, Jan Mayen, Jordan, Kosovo, Lebanon, Libya, Liechtenstein, Lithuania, Luxembourg, Latvia, Macedonia, Malta, Morocco, Moldavia, Monaco, Germany, Norway, Poland, Portugal, Russia, Romania, San Marino, Serbia, Slovakia, Slovenia, Svalbard, Syria, Switzerland, Sweden, Tunisia, Turkey, Ukraine, Vatican, Hungary, Great Britain, Italy, the Canary Islands, the Isle of Man, the Channel Islands, the Faroe Islands and all islands of the Mediterranean Sea, the North Sea, and the Baltic Sea).
 - 2) zone II: all countries in the world.
6. The scope and option of the insurance are specified in the Insurance Document.

INSURANCE
EXTENSIONS

§ 6.

Insurance Period

1. The insurance period shall be specified in the Insurance document, and it shall be the period during which provides its insurance coverage.
2. The insurance coverage provided by and the liability of shall commence no earlier than at the time of issuing the Insurance document and expire upon the lapse of the insurance period, and:
 - 1) in the case of the medical expenses cover, legal assistance cover, and third party liability insurance, the insurance coverage shall commence upon crossing a Polish border at departure and end upon crossing a

Polish border when returning to Poland, with the exception of the situation described in §15 point 2, in which the cover in respect of medical costs shall end at the moment of transport to a medical facility in Poland or the Insured's return to his/her place of residence in Poland and completion of necessary treatment,

- 2) in the case of the Personal accident cover, the Luggage cover, and the Sports equipment cover, the insurance coverage shall start upon the commencement of a trip, that is upon the departure if the Insured from his place of residence; the insurance coverage shall expire upon the end of the trip – the Insured's arrival back in the Insured's place of residence (insurance coverage in the territory of Poland shall only apply to the first 24 hours of the trip and after crossing the border shall continue until the end of the trip without interruption),
- 3) in the case of persons travelling from other country than Poland, all types of coverage shall start upon crossing the border of the country of departure and expire upon the crossing of the same border when returning to the above country, except as provided under § 15 point 2, in which case the cover in respect of medical expenses shall end at the time of transport to the medical facility in the country of residence or the Insured's return to the place of residence in the country of residence and completion of the necessary treatment.

IF YOU ARE
ABROAD, YOUR
PROTECTION STARTS
AFTER 3 DAYS

3. If an insurance contract is entered into for the account of an Insured staying outside the Country of residence, the liability of shall commence upon the lapse of 3 days (waiting period), as of the next day after the insurance contract is entered into, with the premium being collected only for the period of the insurance coverage.
4. The above waiting period shall not apply to an extended insurance contract, provided that it is extended before the lapse of the insurance period specified in the previous insurance contract.
5. In order for the insurance contract to be extended, new Insurance document shall be issued.
6. In the case of the MULTITRIP insurance, the following provisions shall also apply:
 - 1) for name insurance: an insurance contract shall be entered into for 6 or 12 months and the insurance coverage shall apply to the first 60 days of each trip of the Insured during the contract period, regardless of the number of trips,
 - 2) for no-name insurance:
 - a) an insurance contract is entered into for 12 months, and the insurance coverage shall only last for the number of man-days for which the premium was paid,
 - b) shall remain liable for the period specified in the trip form submitted on
7. The insurance coverage of all Insureds shall expire at the date of the Policyholder's withdrawal from the insurance contract.

§ 7.

Premium

1. The insurance premium shall be calculated based on the scope and period of insurance, sum insured and guarantee sum, territorial scope, number of insured persons, tariff applicable on the day of entry into the contract, and the EUR exchange rate.

2. The premium rate shall be calculated based on the average currency exchange rate announced by the National Bank of Poland before the entry into the insurance contract.
3. The premium shall be payable on a single basis in PLN on the day of the entry into the insurance contract, unless otherwise agreed by the parties.
4. The insurance premium shall be paid in cash or in a non-cash form. It has to be fully paid to be considered the paid up premium.

§ 8.

Sum insured/ guarantee sum

1. The sum insured and the guarantee sum shall constitute the upper limit of liability.
2. If necessary, the sum insured and the guarantee sum shall be converted to PLN based on the average currency exchange rate last announced by the National Bank of Poland before the entry into the insurance contract.
3. The sums insured and the guarantee sums are provided for each and every insured event occurrence and in the aggregate, during the insurance period.
4. Sums insured, guarantee sums and liability limits are specified in the Benefits limits table attached as Appendix 1 to these GT&C.

CONSULT THE
BENEFIT LIMITS
TABLE

§ 9.

Exclusions of liability shared by all risks

THIS IS NOT
COVERED

1. The insurance coverage shall not apply to events related to:
 - 1) the Insured's wilful action or to events resulting from the Insured's gross negligence; in the case of gross negligence, damages shall be paid if this is in line with the principles of fairness in individual circumstances,
 - 2) taking drugs or any other intoxicants,
 - 3) the Insured driving a vehicle without the required licence or the Insured having more than 0,5‰ BAC or the Insured's BAC exceeding 0,25 mg of alcohol per 1 dm³ of air exhaled,
 - 4) Mental illnesses,
 - 5) self-mutilation, the Insured's attempt to commit or commission of suicide, a petty offence or an offence and participation in any bets,
 - 6) martial law or war (insurance coverage shall only apply to situations where the Insured faces unexpected war during a trip),
 - 7) the Insured's active participation in riots, commotion, strikes, protest actions, roadblocks, brawls, Terrorist attacks and war,
 - 8) the use of nuclear, biological, and chemical weapons.
2. Additional information on exclusions and limitations of liability for individual risks may be found:
 - 1) for medical expenses and assistance: § 16,
 - 2) for Personal accidents: § 18,
 - 3) for legal assistance: § 20,
 - 4) for Luggage: § 22,
 - 5) for third party liability: § 24.

§ 10.

Procedure in the event of damage

HOW TO CLAIM DAMAGES

1. The Insured shall use all the measures available to mitigate the damage and prevent it from escalating. The Insured shall also enable to perform the necessary actions to determine the damage circumstances, verify the validity of the claim and determine its amount.
2. If the Insured learns that preliminary proceedings have been instituted or action has been brought against the Insured, the Insured shall inform of this fact without delay, even if it was he himself/she herself that reported a damage event.
3. The Insured shall notify whether the Insured possesses any Insurance document other than the one issued by , covering the same risk.
4. The Insured shall collect and secure all evidence related to the claim reported.
5. The Insured shall file a claim with including a properly filled in claim form and documents confirming the validity of the claims reported immediately after returning to the Country of residence.

Sudden illness or Personal accident

6. In the case of a Sudden illness or a Personal accident, the Insured shall also:
 - 1) immediately notify the Emergency Call Center and cooperate with it if medical aid is necessary, which results in the Insured incurring the related expenses, excluding Dental treatment and a single Outpatient clinic appointment in accordance with § 16 Section 2, respectively,
 - 2) make efforts to mitigate the consequences of the event by immediately obtaining medical aid and undergoing the recommended treatment,
 - 3) obtain the medical documentation along with the medical diagnosis justifying the need for particular type of treatment, and the description of treatment including test results, accident protocol, if there is one, as well as other materials related to the event,
 - 4) undergo an examination by a doctor appointed by at the request of in order to determine the Insured's health condition or to determine Damage to health.

Damage to Luggage

7. In the case of a damage to Luggage, the Insured shall also:
 - 1) report a Burglary or Robbery to the police and obtain a written confirmation thereof with a list of the lost items (type, quantity) together with their value and identification characteristics (brand, model, serial number, colour, distinguishing marks),
 - 2) obtain a written confirmation from the relevant services concerning the occurrence of a Hazardous event or rescue operation and prepare a statement from the Insured regarding the loss of Luggage as a result of a Hazardous event or rescue operation, specifying in detail the items lost (type, quantity) and specifying their value and identifying characteristics (make, model, serial number, colour, special marks),
 - 3) report any damage which occurred in means of public transport to a relevant carrier or report any damage in a place of accommodation to the management at a hotel, guest house, camping, etc. and obtain a written confirmation of making the report with a list of the lost items (type, number) and their value and identifying characteristics (brand, model, serial number, colour, distinguishing marks).

Third party liability damage

8. In the event of a third party liability damage, the Insured shall also:
 - 1) notify the Emergency Call Center immediately, but not later than within 7 days of the event which might result in placing liability on the Insured and provide the damage circumstances, surnames and addresses of the injured in the event and witnesses of the event,
 - 2) refrain from accepting claims or reaching any settlement or entering into any agreement or satisfying the claims of the injured without written consent,
 - 3) send the ruling entered in civil law case, criminal case or criminal and administrative case related to the event resulting in the Insured's liability within a reasonable period for to take its position with regard to bringing an appellate measure.

§ 11.

Determination and payment of compensation

1. Within 7 days of receiving a claim, shall inform the person reporting the claim what other documents are required to determine the validity and amount of the reported claim, if necessary for the continuance of the proceedings.
2. If the Policyholder due to wilful misconduct or gross negligence fails to fulfil any of the duties referred to under § 10 point 4, point 5 (1) hereof, shall be entitled to reduce the benefit to the extent the violation caused the increase in damage or made it impossible to determine the circumstances and consequences of an insured event.
3. The validity of the benefit shall be verified and its amount shall be determined based on the evidence submitted by the person filing the claim, but shall be entitled to verify the evidence and consult specialists.
4. shall verify the validity of the benefit and determine its amount depending on the type of damage, based on:
 - 1) medical records confirming the need for immediate medical treatment (including the diagnosis, the description of treatment with test results, and the accident protocol), and, upon the request of , the documentation on the Insured's medical history for the maximum of 1 year preceding the day when the insurance contract was entered into,
 - 2) accounts and evidence of the incurred costs related to the events covered by the insurance (e.g., for medical aid, medicines purchased, transport of the Insured's corpse, rent for the Sports equipment, costs of meals),
 - 3) the police report confirming the event (e.g., Burglary, Robbery),
 - 4) in the case of Damage to health – medical documentation from the date of the event or from the beginning of treatment (e.g., patient's medical record) including a description of injuries sustained or consequences thereof,
 - 5) in the case of the Insured's death – the certificate of death, death report, autopsy report (if an autopsy was carried out) or other documents confirming the reason for the death and documents proving the Insured's identity and if no person was specified by name – documents stating the right to obtain the benefit,
 - 6) the testimony of witnesses of the event,
 - 7) the driving licence,
 - 8) document issued by the carrier confirming a flight delay or cancellation or baggage delay,

- 9) a reply or letter from the carrier indicating the amount of the accepted claim,
- 10) a document confirming the ownership of a dog or a cat,
- 11) other documents necessary to determine the liability of
; a list of the necessary documents may be found at
website and in the claim form.
5. shall cover any valid and evidenced medical expenses by direct payment to the account of a medical care unit via the Emergency Call Center.
6. In the case of Personal accident, the following provisions shall apply:
 - 1) types and amounts of the benefits to be paid are determined upon finding the causality between the Personal accident and the Insured's death or Damage to health,
 - 2) the sum insured determined in the insurance contract shall be paid out in the case of 100% Damage to health or death if the Insured dies as a consequence of a Personal accident within 24 months of the date of accident. In the case of partial Damage to health, a percentage of the sum insured granted shall correspond to the percentage of permanent damage the Insured has suffered, but not more than 100% of the sum insured,
 - 3) degree of Damage to health shall be determined based on the Percentage table of benefits for Damage to health attached as Appendix 2 to these GT&C,
 - 4) in the case of loss or damage of an organ or system whose functioning had already been handicapped prior to the accident because of a disease or permanent disability, the degree of Damage to health shall be determined based on the difference between the degree of Damage to health reflected in the condition of a particular organ or system after the accident and that existing prior to the accident,
 - 5) when determining the degree of Damage to health, such factors as the kind of work or other activities performed by the Insured shall not be taken into consideration,
 - 6) if the Insured receives a benefit due to Damage to health and then dies as a result of the same accident, then the death benefit shall be paid, and the amount previously paid shall be deducted.
7. Damages for Luggage shall be determined based on the repair costs or actual value of the item, taking into consideration its actual wear and tear. The value of the item shall be determined by based on the account of goods purchased or a new item of identical or similar functional properties on the date of the event.
8. If the Insured retrieves the stolen or lost items of Luggage, the Insured shall notify this to . In that case, damages paid for lost items shall be returned. Upon the consent of , the damages returned may be deducted by the value of damage or defects found in the items retrieved.
9. Damages/benefit arising from the insurance contract shall be paid in PLN. In the case of the person entitled to damages/a benefit having the Insured's Country of residence outside Poland, the payment may be made by a bank transfer in EUR or USD.
10. Expenses incurred in foreign currencies shall be converted into PLN according to the average exchange rate announced by the National Bank of Poland and valid on the day preceding the benefit determination date.

§ 12. Benefit due date

1. shall pay the benefit within 30 days of the date the claim is reported.
2. If it is impossible to explain the circumstances necessary to verify the validity or determine its amount within the said period of time, the benefit shall be paid within 14 days of the date on which the explanation of such circumstances is possible upon the exercise of due diligence. However, shall pay the indisputable part of the benefit, understood as the evidenced part of the benefit being beyond doubt, within the period specified under Section 1.
3. shall inform the person reporting the claim in writing about the amount of the benefit granted.
4. If the benefit is not payable or the amount payable is other than that requested in the claim form, shall inform the Insured about it in writing, indicating the circumstances and the legal basis justifying the refusal of partial or full payment of the benefit.

§ 13. Complaints and litigations

1. The Client may file appeals, complaints and consumer complaints specifying their objections concerning services provided by (hereinafter jointly referred to as the "complaints").
2. Complaints may be made in the following places and manner:
 - 1) **in writing** – personally or by sending the complaint to the address of the customer service unit, i.e. , or to the address of a Regional Insurance Service Center (contact details of Regional Insurance Service Centers are provided on the website at:) or to the electronic delivery address recorded in the electronic address database, as indicated on the website
 - 2) **orally** – in person for the record at the customer service unit, i.e. at head office in Warsaw () or at a Regional Insurance Service Center (contact details of Regional Insurance Service Centers are provided on the website at:) or by calling
 - 3) **electronically** – using electronic means of communication by sending a message to: ,
3. shall consider the complaint and respond without delay, not later than within 30 days after its receipt. In significantly complicated circumstances, which make it impossible to handle the complaint and provide a response within the indicated time limit, shall then inform the Client about the reasons for the delay and about the facts to be established for the complaint to be considered as well as the estimated deadline for the consideration of the complaint and provision of an answer, which may not exceed 60 days from the date of the receipt of the complaint.
4. The complaint shall be answered in paper form. On request of the Client, the answer to the complaint may also be provided by e-mail.

5. As a natural person, the policyholder insured, beneficiary or beneficiary under an insurance contract, heir with a legal interest in the determination of liability or fulfilment of benefits under an insurance contract who is dissatisfied with _____ position has the right to apply to the Financial Ombudsman to review the case or to conduct out-of-court dispute resolution proceedings between the customer and the financial market entity. The entity authorized to conduct out-of-court consumer dispute resolution proceedings is the Financial Ombudsman - for more information about the Financial Ombudsman please visit: <http://rf.gov.pl/>. Clients can also make use of the regional/municipal and district Consumer Ombudsmen.
6. The Client may also file appeals and complaints against _____ with the Polish Financial Supervision Authority, the Financial Ombudsmen, or regional/municipal Consumer Ombudsmen as well as other authorities responsible for protection of the clients of financial market entities.
7. An action for a claim arising from an insurance contract may be brought against _____ according to the rules of general jurisdiction or before the court having jurisdiction over the place of residence or the seat of the policyholder, the insured or the beneficiary of the insurance contract, as well as before the court having jurisdiction over the place of residence of the heir of the insured or the beneficiary of the insurance contract.
8. Pursuant to Regulation No. 524/2013 of the European Parliament and of the Council (EU) of 21 May 2013 on online dispute resolution for consumer disputes and amending Regulation (EC) No. 2006/2004 and Directive 2009/22/EC (regulation on ODR for consumer disputes), it is possible to resolve out-of-court disputes concerning contractual obligations arising from online sales or service contracts concluded between consumers resident in the European Union and traders established in the European Union. The resolution of the aforementioned disputes takes place via the ODR platform available at the following address: <http://ec.europa.eu/consumers/odr/main/>. _____ e-mail address for contact:
9. _____ is subject to the supervision of the Polish Financial Supervision Authority.

§ 14.

Recourse claims

1. On the day of benefit payment, by virtue of law, _____ shall take over any claims of the Insured against a third party responsible for the damage up to the amount of the benefit paid.
2. If _____ has covered only a part of the damage, the Insured shall be entitled to have the Insured's claims satisfied prior to the claims of _____ in respect of the remaining part of such damage.
3. _____ shall not take over any claims against the persons with whom the Insured belongs to a shared household unless the damage was inflicted intentionally.

II. MEDICAL EXPENSES AND ASSISTANCE INSURANCE

§ 15.

Subject matter of insurance

WHAT IS COVERED BY
THE MEDICAL EXPENSES
INSURANCE?

1. The subject matter of insurance shall be medical expenses and assistance of the Insured who had to undergo immediate treatment while staying abroad as a result of a Sudden illness or Personal accident to the extent necessary for the Insured to regain the state of health enabling the Insured to continue their trip or be transported to the Insured's Country of residence, except for the situation described in point 2 in which medical costs are also covered in the Insured's Country of residence.
2. The insurance also covers the costs of medical treatment in the Insured's Country of residence, in particular operations and transport to a medical facility and/or between facilities, if they meet all of the following conditions:
 - 1) are related to a Personal accident or Sudden illness that occurred during the Foreign trip,
 - 2) the Insured's state of health allows him/her to be transported to the Country of residence and to receive necessary treatment in the Country of residence,
 - 3) The Insured has accepted the proposal of the Emergency Call Center for treatment in the Country of residence.

Medical expenses:

- 1) **Treatment at an Outpatient clinic or Hospital treatment** (medical procedures, doctors' fees, medicines, tests, analyses, surgeries),
- 2) **Rescue costs**,
- 3) **appointments with a doctor**, including the doctor's transportation to the Insured's current location,
- 4) **purchase of necessary medicines and dressings prescribed by a doctor**,
- 5) **treatment of pregnancy complications**, unless these complications existed before the commencement of the trip,
- 6) **early delivery**, which occurred not later than in the 32nd week of pregnancy; the benefit shall be paid for the mother and the baby collectively up to the sum insured,
- 7) **Dental treatment** of sudden teeth inflammation or in the cases where treatment was necessary due to an injury suffered as a result of a Personal accident,
- 8) **decompression chamber** in medically justified cases,
- 9) **transport to a medical facility** justified by the current health condition of the Insured and approved by the Emergency Call Center,
- 10) **transport between medical care units** upon the request of the attending doctor of the Insured during the Insured's trip abroad,
- 11) **transport back to the place of accommodation** after providing medical aid,
- 12) **glasses repair or purchase and dental prosthesis repair** if their damage was related to the Personal accident which caused the Damage to health of the Insured.
3. If all costs of Hospitalisation abroad were covered with the Insured's European Health Insurance Card and the Hospitalisation period is no less than 3 days, _____ shall pay the Insured a **daily hospital allowance**.

Assistance

4. The subject matter of assistance shall be benefits related to assisting the Insured with an insurance event (that is, a Sudden illness or a Personal accident covered by the insurance) or other unexpected events which occurred in the insurance period during the Insured's Foreign trip, in accordance with the provisions below.
5. All insurance amounts for assistance benefits shall be sub-limits of the medical expenses insurance and may be found in the Benefit limits table attached as Appendix 1 to these GT&C.
6. Assistance within the **STANDARD** scope shall cover the following:

for the Insured:

- 1) **day-and-night service of Emergency Call Center** – shall reimburse the costs of the first phone call to the Emergency Call Center incurred by the Insured relating an insurance event, based on the phone bill,
- 2) **phone call** to the Emergency Call Center's doctor in Polish,
- 3) **phone interpreter** – in difficult situations (Sudden illness, Personal accident or contact with uniformed services), the Emergency Call Center shall provide the Insured with phone interpreting service in English and, if possible, in other languages,
- 4) **transport to the Country of residence** – if the Insured is not able to use a pre-planned means of transport as a result of the Insured's health condition, shall bear the costs of return transport by the cheapest means of transport available, approved by the attending doctor and/or the doctor at the Emergency Call Center. Transport of the Insured shall be provided up to the amount corresponding to the organization by the Emergency Call Center of such transport to the territory of the Republic of Poland, and its cost shall not reduce the sum insured for treatment expenses and assistance. If the transport is organized by the Insured's family members or third parties, shall reimburse the costs incurred up to the amount of costs that would be incurred by the Emergency Call Center to organize the transport of the Insured to the territory of the Republic of Poland,
- 5) **transport of the Insured so that the Insured can continue the trip** – after the completion of treatment, shall bear the costs of transport from the place of Hospitalisation abroad to the place from which the Insured will be able to continue their trip as previously planned,
- 6) **transport of the Insured's corpse** to the place of burial in the Country of residence or costs of burial in the country in which the event occurred. Costs of corpse transport also shall include the necessary sanitary costs (morgue, embalming) and administrative costs (consular costs, permits). The corpse transport shall be provided up to the amount corresponding to the organization of such transportation by the Emergency Call Center to the territory of the Republic of Poland, and its cost shall not reduce the insured sum for medical expenses and assistance,
- 7) **purchase of a coffin and cremation abroad** if required by the local regulations on the transport of a corpse. Cremation may only take place if there is no permission for the transfer of the corpse to the Insured's Country of residence,
- 8) **costs of meals and accommodation for the purpose of convalescence** – if the Insured may not be transported to the Insured's Country of residence directly after the Hospitalization has been completed and the Insured is recommended by doctor to stay in bed, shall cover the above costs (excluding alcoholic drinks),

- 9) **transmitting messages** – in the case of an unforeseeable event beyond the Insured's control which causes a delay or change in the Insured's travel plan, the Emergency Call Center shall transmit any necessary information to the Insured's family and/or employer at the Insured's request; shall not be liable for the wording or the consequences of the information provided,
- 10) **assistance in the case of loss of documents** – if the Insured lose their travel documents (e.g., passport, tickets, etc.), the Emergency Call Center shall provide the Insured with the information about the measures to be taken; however, shall not be liable for the results of such measures,
- 11) **cover for loss of cash** – if, as a result of a Robbery, the Insured lose their cash withdrawn from an ATM abroad, shall reimburse the Insured,
- 12) **renewal of insurance cover** – if a pre-planned return from a trip abroad was cancelled or delayed due to bad weather conditions, Hazardous event, Terrorist attack, strike, riots, insolvency of a travel agency confirmed by the competent Marshal's Office in Poland, bankruptcy of a regular airline (except charter flights) in accordance with the currently applicable Bankruptcy and Rehabilitation Law, or similar legal proceedings under the jurisdiction of a competent court in another country, which started during the Insured's stay abroad, shall provide additional medical expenses cover and assistance cover in the period from the expiry date of the insurance coverage specified in the Insurance document to the time when such a return is possible for the Insured, however, no longer than for 7 days,
- 13) **telephone legal assistance** – if the Insured violates the law during the Insured's trip abroad, shall provide the Insured with telephone legal assistance of a lawyer of the Emergency Call Center, who, if possible, shall furnish the Insured with information regarding the legal problem,
- 14) **substitute driver** – shall bear the costs of hiring a driver to bring the Insured back to Poland if, as a result of an insurance event, the Insured's health condition, as confirmed by an attending doctor, makes it impossible for the Insured to drive the vehicle in which the Insured is travelling and the persons accompanying the Insured do not have driving licences;
- 15) **flight delay** – if a professional foreign carrier's flight abroad for which the Insured has a valid ticket is cancelled or delayed by no less than 5 hours, shall reimburse the necessary expenses incurred by the Insured and not covered by the carrier (food products and non-alcoholic drinks, basic garments and bathroom supplies for the Insured's exclusive use) incurred starting from the sixth hour of the delay; charter flights shall not be covered by the insurance. The above provision shall apply to a situation in which the Insured is informed about the delay or cancellation of the flight on the day of departure,
- 16) **cash transfer** – if the Insured is left without funds as a result of unexpected events, shall give the Insured the cash previously paid along with the cost of providing it to the bank account of by a person specified by the Insured, upon the request of the Insured and if possible,
- 17) **continuation of treatment in Poland** – resulting from an insurance event:
 - a) **first consultation with the doctor attending the continuation of treatment in Poland**, subject to earlier consent of the Emergency Call Center,

- b) **removal of plaster cast, change of dressings, removal of stitches, injection,**
- c) **transport to a facility and between facilities** – if such transport is necessary due to the Insured's health condition, shall bear the costs of transport by the cheapest means of transport approved by the attending doctor,
- d) **Rehabilitation equipment costs** – if, as a result of an insurance event, the Insured should use Rehabilitation equipment in line with their doctor's recommendation, shall reimburse the costs of purchase or lending of such equipment, unless they are covered by the public health insurance,
- e) **daily hospital allowance** – if the Insured's Hospitalisation is continued directly after the Insured's return to Poland, shall pay the Insured the daily hospital allowance; the benefit shall be paid based on a hospital discharge summary report,

for the Accompanying Person:

- 18) **transport of the Accompanying person necessary for the transport of the Insured to the Country of residence** – if the trip takes place on written recommendation of the attending doctor abroad,
- 19) **meals and accommodation for the Accompanying person** necessary to settle any formalities related to the Insured's return to the Country of residence (alcoholic drinks excluded),
- 20) **visit of the Accompanying person** – shall reimburse the round trip costs (train ticket, bus ticket or, if land transport takes more than 8 hours, economy class plane ticket), costs of meals (alcoholic drinks excluded) and accommodation of the person visiting the hospitalised person:
 - a) if the Insured is hospitalised abroad for more than 7 days and unaccompanied by anyone,
 - b) If the Insured is hospitalised and is under 18 years of age, and is not accompanied abroad by a parent (or a legal guardian);
 - c) if the Insured is in a life-threatening condition confirmed by a written opinion of the attending physician,
- 21) meals and accommodation of the person staying with the Insured's corpse (alcoholic drinks excluded),
- 22) transport of the Accompanying person in relation to the Insured's death – to the place of burial of the Insured in the Insured's Country of residence; shall bear the costs of a train ticket, bus ticket or, if land transport takes more than 8 hours, economy class plane ticket,
- 23) costs of transport of the guardian (in the case of school camps, camps, bivouacs and school trips) if it is possible for one of the guardians to accompany the hospitalised Insured child, shall also cover the costs of transport of the guardian upon the completion of treatment, from the place of the Insured's Hospitalisation abroad to the place from which the Insured will be able to continue their trip as previously planned,
- 7. Assistance within the **SUPER** scope shall cover the assistance benefits described in Section 6 and the following:

for the Insured:

- 1) **trip interruption costs** – shall bear the costs of transport of the Insured to Poland (train ticket, bus ticket or, if land transport takes more than 8 hours, economy class plane ticket) if the originally planned means of transport may not be used and the Insured is forced to suddenly interrupt their trip due to the following:
 - a) Sudden illness or Personal accident of the Insured's Next-of-kin which require Hospitalisation and occurred in Poland;

- b) death of the Insured's Next-of-kin;
- c) damage to the Insured's property or to their business premises, arising from a Hazardous event or offence, rendering it necessary to perform legal and administrative tasks for which the Insured's presence in Poland is necessary,
- 2) **replacement for a business trip** – if the Insured is unable to continue performing the Insured's duties during a business trip, shall bear the costs of transport of a person who will replace the Insured (train ticket, bus ticket or, if land transport takes more than 8 hours, economy class plane ticket),
- 3) **sending necessary personal items** – in the event of damage, destruction or loss of the Insured's personal items (excluding any documents, regardless of their nature), which are necessary to continue the trip, shall organize and cover the costs of shipping replacement personal items to the Insured's place of stay. In the event of loss of medicines, the use of which is prescribed by a doctor, shall organize and cover the costs of shipping those medicines to the Insured's place of stay. The condition for the performance of this service is to make the aforesaid items or medicines available to the Emergency Call Center,
- 4) **reimbursement of ticket costs in the event of airline bankruptcy** available in case of sum insured covering medical expenses and assistance amounting to EUR 60,000 or more – if the Insured has purchased a ticket from a regular airline (excluding charter flights) and is on a Foreign trip, and during the travel time the regular airline declares bankruptcy or suspends flights for this reason, shall reimburse the cost of return transport by public means of transport to the Insured's Country of residence, up to the amount of EUR 200, based on bills, proofs of costs incurred and an unused regular airline ticket. shall only be liable if the regular airline ticket was purchased before the date of bankruptcy. The reimbursement shall apply to a ticket for a travel not organized by a travel agency, which is not covered by the tourist or bank guarantee, for which the Insured has not received reimbursement from other sources (e.g., chargeback). The term bankruptcy shall be construed in accordance with the currently applicable Bankruptcy and Reorganization Law or other provisions concerning similar legal proceedings subject to the jurisdiction of a competent court in another country.
- 5) **costs of extended stay abroad** – in the event of cancellation of a pre-planned return from a Foreign trip as a result of a Terrorist attack, volcanic eruption, strike, riots, hurricane, flood or earthquake, the beginning of which took place during the Insured's stay abroad, shall reimburse costs of accommodation and meals (excluding alcoholic beverages) up to EUR 100 per day, incurred from the third to the seventh day of the extended stay abroad (in total, up to EUR 500),
- 6) **Luggage delay** – if the Insured has correctly checked in Luggage with a professional air carrier and the Luggage was delayed during the Insured's Foreign trip, shall reimburse the documented costs of purchasing items replacing the items contained in the Luggage, provided that the delay exceeds 5 hours (counted from the moment of reporting the delay in delivering the Luggage to the carrier and receiving a document confirming the delay, until it is made available to the Insured); the reimbursement shall not be paid if the Luggage is delayed during the return trip after the Insured has crossed the border of the Insured's Country of residence.

after the return to Poland:

- 7) **visit of a nurse** – if the Insured is hospitalised for at least 7 days in relation to an insurance event, _____ shall bear the costs of the assistance of a nurse directly after the Hospitalisation, within the scope recommended by the attending doctor and possible to perform at the Insured's place of stay. The insurance shall not include costs of medicines, medical supplies or other materials used as part of nursing,
- 8) **domestic help** – if the Insured is hospitalised for at least 7 days in relation to an insurance event, _____ shall bear the costs of domestic help directly after the Hospitalisation, within the scope recommended by the attending doctor and possible to perform at the Insured's place of stay. The scope of domestic help shall include: preparing meals, shopping, helping with dressing, washing and care-related activities, performing small cleaning tasks (vacuuming, cleaning the floor, dishwashing). This insurance shall include only the cost of service and not the cost of means used to provide it,
- 9) **tutoring** – if the Insured child is hospitalised for at least 7 days in relation to an insurance event, _____ shall bear the costs of tutoring directly after the Hospitalisation for subjects included in the curriculum and selected by the child's legal guardian;
- 10) **child entertaining** – if an Insured child is hospitalised for at least 7 days in relation to an insurance event, _____ shall bear the costs of a single visit of an entertainer, on the seventh days after the Insured's return to Poland at the latest,
- 11) **psychological assistance** – if during the trip the Insured suffers from traumatic experiences (Terrorist attack, natural disaster, death of a Next-of-kin), _____ shall bear the costs of 1 appointment with a psychotherapist within 30 days after the Insured's return to Poland,
- 12) **treatment of a tropical disease** – if within 60 days after the Insured's return to Poland the Insured is diagnosed with a tropical disease (that is: malaria, dengue, yellow fever, cholera, leishmaniosis, filariasis, typhoid fever, Japanese encephalitis) which the Insured contracted during their trip abroad, _____ shall bear the costs of doctor's appointments, diagnostic tests and medicines that help fight the disease,

for the Accompanying person:

- 13) **care over Next-of-kin** – in the case of:
 - a) Hospitalisation or death of the Insured – _____ shall bear the costs of the return of Next-of-kin accompanying the Insured during the trip and insured by _____ to their Country of residence (train ticket, bus ticket or, if land transport takes more than 8 hours, economy class plane ticket), provided that the originally planned means of transport could not have been used; in the case of minor children, the trip may take place under the guardianship of a representative of _____;
 - b) Hospitalization of the Insured who is under 18, after the planned date of return to the Country of residence – _____ shall bear the costs of the extended stay (meals, excluding alcoholic beverages, and accommodation expenses) of one parent (or legal guardian) and the cost of returning to the Country of residence (train ticket, bus ticket or, if land transport takes more than 8 hours, economy class airplane ticket),

for a sportsperson:

- 14) **ski lift voucher** – _____ shall reimburse the costs of a

ski lift voucher and participation in ski and snowboard schools if the Insured was unable to use them due to a Personal accident or Hospitalisation in relation to a Sudden illness. Costs shall be reimbursed for a period of full days during which the Insured could not use the voucher and participate in a ski or snowboard school;

- 15) **accommodation in the event of an avalanche** – if access to the ski resort where the Insured is accommodated is blocked, or the public transport to this resort is cancelled or limited due to snowfall or avalanche, _____ shall reimburse the evidenced costs of accommodation of the Insured in other place and transport of the Insured to that place of accommodation, or costs of transport to the ski resort where the Insured is accommodated, up to EUR 150. The accommodation benefit in the event of an avalanche shall be paid based on confirmation of the natural disaster by the ski resort;
- 16) **benefit in the event of the closure of ski trails** – if, during the Insured's Foreign trip, marked trails in the ski regions are closed, _____ shall pay a benefit in the amount of EUR 20 for each full unused day during a maximum period of 5 days. The benefit shall be paid provided that all ski trails within a radius of 30 km from the Insured's place of accommodation are closed and the cover is extended to include the Winter sports-related risks. The benefit arising from the closure of ski trails shall be paid after documenting the closure of ski trails in the period from December 1 to March 30.
- 17) **benefit in the event of the closure of bathing areas** – if guarded bathing areas in seaside resorts are closed during the Insured's Foreign trip, _____ shall pay a benefit in the amount of EUR 20 for each full unused day during a maximum period of 5 days. The benefit shall be paid provided that all bathing areas within a radius of 30 km from the Insured's place of accommodation are closed. The benefit shall be paid after documenting the closure of bathing areas in the period from June 1 to September 30.
- 18) **golf course rental** – _____ shall reimburse the costs of golf course rental in the case the Insured cannot use it due to a Personal accident or Hospitalisation in relation to a Sudden illness. Costs shall be reimbursed for a period of full days during which the Insured could not use the golf course in question;
- 19) **Sports equipment rental** – in the case where the Insured is deprived of the ability to use Sports equipment insured at _____ for reasons and in circumstances specified in § 21 Section 3 points 3, 4 and 5 of these GT&C, _____ shall reimburse the costs of rental of Sports equipment insured.

**§ 16.
Limitations of liability**

- 1. _____ shall not be liable for any costs incurred by the Insured without the consent of the Emergency Call Center.
- 2. The above restrictions shall not apply to situations in which the Insured, due to their health condition, cannot reasonably contact the Emergency Call Center and in the case of Dental treatment and a single Outpatient clinic appointment if the Insured selects the doctor and covers the costs of the appointment.
- 3. The insurance shall not cover the costs incurred if the Insured acts contrary to the decision of the Emergency Call Center agreed with the attending doctor performing the treatment abroad.
- 4. The Insurance shall not cover events arising as a consequence of:

**THIS IS NOT COVERED
BY THE MEDICAL
EXPENSES INSURANCE**

- 1) medical contraindications concerning the trip,
 - 2) continuation of the treatment of illnesses that occurred before the entry into the insurance contract,
 - 3) indications concerning a procedure, treatment or medical observation at a hospital and the damage event is related to the above indications,
 - 4) venereal diseases and diseases being the result of HIV infection,
 - 5) Epidemic of an infectious disease or Pandemic declared before the date of commencement of the Insured's Foreign trip, except for Sars-Cov-1 or Sars-Cov-2 with their mutations,
 - 6) failing to submit to vaccination or other preventive procedures required under the International Health Procedures,
 - 7) artificial conception and any other sterility treatment,
 - 8) abortion if the procedure was not performed for the purpose of saving life or health,
 - 9) purchase of contraceptives,
 - 10) special diet for the Insured comprising tonics and products taken by the Insured habitually, as well as massages, baths, inhalations, therapeutic gymnastics and irradiation (even if such measures are recommended by the doctor),
 - 11) treatment at a sanatorium, therapy, prophylaxis and physiotherapy,
 - 12) treatment and stay at nursing homes, hospices or rehabilitation centers,
 - 13) unconventional treatment,
 - 14) self-treatment or treatment by a doctor being a member of the Insured's family,
 - 15) any kind of vaccination (except for a situation where a vaccination is carried out as part of health- or life-saving first aid),
 - 16) plastic and cosmetic surgery,
 - 17) when in the attending doctor's opinion treatment may be postponed until the Insured returns to the Country of residence with the exception of the situation described in § 15 point 2,
 - 18) continuation of the treatment of the Insured if the attending doctor consents to transporting the Insured to their Country of residence and the Insured objects to that with the exception of the situation described in § 15 point 2.
5. Nor shall the risks specified below be covered by the insurance, unless the coverage was extended to include them:
- 1) practising Winter sports,
 - 2) practising Extreme sports,
 - 3) performing Physical work.

WHAT IS COVERED BY THE PERSONAL ACCIDENT INSURANCE?

III. PERSONAL ACCIDENT INSURANCE

§ 17.

Subject matter of insurance

1. The subject matter of the insurance shall be Personal accidents which occurred during the period of insurance coverage, within the scope specified in these GT&C.
2. The Personal accident insurance contract provides for the following benefits:
 - 1) death benefit for death which resulted from a Personal accident and occurred within 2 years of it – a benefit equal to 100% of the sum insured specified in the Insurance document shall be paid,

- 2) benefit for Damage to health – a benefit being a percentage of the sum insured, equal to the percentage of the damage to health shall be paid.
 - a) Degree of Damage to health shall be determined based on the Percentage table of benefits for Damage to health attached as Appendix 2 to these GT&C.
 - b) The insurance coverage shall not include other types of damage than those listed in this Table.

THESE ACCIDENTS ARE NOT COVERED

§ 18.

Limitations of liability

1. The insurance shall not cover Personal accidents arising as a consequence of:
 - 1) disturbances of consciousness and mind, apoplectic or epileptic attacks or any other spasmodic attacks involving the entire body of the Insured,
 - 2) improper treatment or improperly performed procedures on the Insured's body – the insurance coverage shall apply if the treatment, including the diagnosis and procedures, were a consequence of an accident included in the insurance contract.
2. A Personal accident shall not be understood as events caused by processes in the human body, e.g.: faintness, heart attack, haemorrhage, cerebral stroke, cardiac arrest or cerebral haemorrhage.
3. Nor shall the risks specified below be covered by the insurance, unless the coverage was extended to include them:
 - 1) practising Winter sports,
 - 2) practising Extreme sports,
 - 3) performing Physical work.
4. In particular, shall not be liable for the consequences of Personal accidents such as: pain, physical and moral suffering, as well as property loss involving loss of property, its destruction or damage to it.

IV. LEGAL ASSISTANCE INSURANCE

§ 19.

Subject matter of insurance

WHAT IS COVERED BY THE LEGAL ASSISTANCE INSURANCE?

1. The subject matter of the insurance shall be the necessary costs of the fee for one lawyer empowered by the Insured within the scope of matters related to the Insured pursuing claims for damages due to torts which occurred within the insurance period; shall cover the above costs up to EUR 2,000.
2. In justified situations in which the Insured is accused of acts concerning their third party liability, shall:
 - 1) bear the costs of legal assistance in order to obtain release from detention (one lawyer's fee) up to EUR 1,000,
 - 2) extend a reimbursable loan to cover bail of up to EUR 10,000 if the Insured was detained by prosecution service of a foreign country as a result of an event for which the Insured is liable and for the release from detention to be granted the bail as security for costs of proceedings and fines imposed by the judiciary needs to be covered; the loan shall be guaranteed by a person indicated by the Insured and reimbursed within 30 days of its extension.

§ 20.
Limitations of liability

THESE COSTS ARE
NOT COVERED

1. The insurance provided by shall not cover the following costs:
 - 1) those related to a settlement of a matter if the costs are grossly disproportionate to the claims agreed upon by both parties, which claims the Insured was not obliged to cover these claims in individual legal circumstances,
 - 2) those which a person other than the Insured is obliged to incur,
 - 3) damages which the Insured has to pay, fines, administrative or judicial penalties, other financial penalties, taxes or other fees of public and legal character,
 - 4) those which arise as a consequence of using the service of persons unauthorised to provide legal assistance or opinion within an individual scope,
 - 5) those which arose upon the request of the Insured but without the consent of and which were not necessary to protect the Insured's rights,
 - 6) those related to the Insured providing false or misleading information or falsified documents,
 - 7) those related to the Insured consciously dissimulating information or documents which may influence the manner in which legal assistance is provided or the course of the proceedings,
 - 8) costs of claims transferred to the Insured after the occurrence of an insurance event,
 - 9) costs of third party claims which the Insured pursues on their own behalf.
2. Legal assistance shall not be provided if the Insured's legal problem concerns any of their professional activities, including their work abroad or driving and possessing a mechanically propelled vehicle or the Insured's participation in political activities or if bail is required in order to secure customs duties or administrative charges, fines, exemplary damages, compensation, etc.

V. LUGGAGE INSURANCE

§ 21.

Subject matter of insurance

1. The subject matter of the insurance shall be the Luggage owned by the Insured during their trip.
2. The insurance contract shall cover the Luggage only if it is:
 - 1) looked after by the Insured,
 - 2) left in a left luggage office against receipt,
 - 3) entrusted to a professional carrier for the purpose of carriage based on a transport document,
 - 4) in a separate locked luggage room at a railway station or in a hotel,
 - 5) in a separate locked room in the Insured's accommodation (tent excluded),
 - 6) in a locked boot or in storage cabinet being an integral part of a motor vehicle,
 - 7) in a locked compartment of a camper or watercraft.
3. shall be liable for the Luggage only if loss or damage resulted from:

ONLY ITEMS
LOCATED IN THE
SPECIFIED PLACES ARE
COVERED

- 1) an accident of a means of transport,
- 2) a Hazardous event,
- 3) a Personal accident or a Sudden illness of the Insured as a result of which the Insured is suddenly unable to look after their Luggage,
- 4) a Burglary into the rooms listed in point 2 (2-7),
- 5) a Robbery.

4. If the Luggage was entrusted to a professional air carrier, the insurance coverage shall also apply when there is no confirmation of damage circumstances specified in point 3, provided that the carrier confirmed that the Luggage had been lost or damaged.

§ 22.
Limitations of liability

THIS IS NOT
COVERED

1. The following types of damage shall not be covered by the insurance:
 - 1) those of the value below PLN 100 (Franchise deductible),
 - 2) those inflicted intentionally by a person living in a shared household with the Insured,
 - 3) those resulting from seizure, destruction or confiscation by customs authorities or other authorities,
 - 4) those resulting from war, martial law, state of emergency, Terrorist attacks, acts of sabotage or the Insured's participation in riots, commotion, strikes, protest actions, road blockages, and fights,
 - 5) those occurring in electric and electronic appliances as a result of their defects and passage of electric current during the use of these appliances, unless the passage of electric current caused fire,
 - 6) those which are the consequence of normal wear and tear of an item in connection with its normal use, manufacturing defects, self-ignition, self-damage, leakage or, in the case of fragile or glass-packed item – breaking or loss of value,
 - 7) those in arms and its related accessories,
 - 8) those resulting from practising Winter sports and Extreme sports (if the insurance cover is not extended to cover such risk),
2. Furthermore, the following shall not be covered by the Luggage insurance:
 - 1) cash and securities, gift vouchers, tickets, credit and payment cards, jewellery, items made of metal and precious stones,
 - 2) works of art, documents, collections, musical instruments,
 - 3) items serving the purpose of service and production and trade, propellants,
 - 4) car and motorcycle accessories, camper and boat fittings,
 - 5) damage in the case of which only Luggage containers were damaged (suitcases, trunks, etc.).

VI. THIRD PARTY LIABILITY INSURANCE

§ 23.

Subject matter of insurance

WHAT IS THE
THIRD PARTY LIABILITY
INSURANCE?

1. The subject matter of the insurance is the Insured's private third party liability for bodily damage or property damage inflicted on third parties during their trip, which the Insured is obliged to redress in accordance with the law of the country in which the Insured inflicted the damage.
2. liability covers damages caused by persons and pets for which the Insured is responsible, which must be repaired by the Insured under the law of the country where the Insured stays while traveling abroad.

3. Within the scope of third party liability insurance, _____ shall be liable for events related to Amateur sports and, if the insurance cover was extended by the following risk, for events resulting from practising Winter sports or Extreme sports.
4. To the extent of its liability, _____ shall:
 - 1) verify the validity of claims brought against the Insured and provide all types of legal assistance in the case of invalid claims,
 - 2) pay the costs of engaging a defence counsel to represent the Insured's interests in a proceedings,
 - 3) pay the costs of fees for experts appointed upon _____ consent in order to establish the damage circumstances or appraise the damage,
 - 4) reimburse the necessary costs justified by the circumstances of an individual accident, incurred in order to prevent the damage from escalating,
 - 5) pay the necessary costs of court protection against a third party claim in a litigation conducted at the request of _____ or upon its consent,
 - 6) pay out the damages the Insured is obliged to pay to the injured as part of the risks specified in the insurance contract based on the recognition issued or confirmed by _____, a settlement entered into or confirmed by _____ or a court ruling.
5. All costs and expenses incurred in connection with defence against claims against the Insured may be paid on condition that _____ prior written consent is obtained.

§ 24. Limitations of liability

THIS IS NOT
COVERED

1. The following types of damage, benefits and claims shall not be covered by the insurance:
 - 1) those arising in relation to the Insured's consumption of alcohol,
 - 2) those of the value below EUR 150 (Integral franchise),
 - 3) those exceeding the scope of statutory third party liability of the Insured,
 - 4) those arising from an agreement entered into by the Insured or specific covenants,
 - 5) any damage inflicted by the Insured upon the Insured's Next-of-kin,
 - 6) those inflicted intentionally by a person living in a shared household with the Insured,
 - 7) those caused to the natural environment,
 - 8) those arising in relation to the possession or use of firearms,
 - 9) those occurred during hunting,
 - 10) those in cash, securities, jewellery and all types of documents,
 - 11) any damage arising from possessing, driving, using or starting motor vehicles, aircrafts, and ships,
 - 12) those which the Insured is obliged to pay based on a judgement of a criminal court,
 - 13) damages to property of the Insured or possessed by the Insured (including rented or borrowed property) or actually looked after or controlled by the Insured, except for a room rented in a hotel or guesthouse,
 - 14) those resulting from exercising a profession, working abroad or running a business,
 - 15) those resulting from practicing Winter sports or Extreme sports, unless the insurance coverage is extended to cover such risk,
 - 16) any claims that arose from infecting another person with a sickness,
 - 17) those resulting from the possession of wild and exotic animals during the Foreign trip, for which the Insured is responsible,

- 18) those caused by the Insured to animals for which the Insured is responsible,
- 19) caused by a dog of a breed recognized as aggressive,
- 20) caused by the Insured's pet which was not subjected to the required vaccinations or preventive examinations.
2. In the case of damage being the consequence of Amateur sport or practising Winter sports or Extreme sports covered by the insurance contract:
 - 1) _____ liability for personal damage shall be limited to 50% of third party guarantee sum within the scope of personal damage, and to 25% of third party guarantee sum within the scope of property damage,
 - 2) a Deductible franchise amounting to 5% of the value of the damage which occurred shall apply.

VII. FINAL PROVISIONS

1. In accordance with applicable regulations _____ is obliged to comply with the sanctions imposed by the Republic of Poland, the European Union, the United Nations or other authorised states or organisations on the Policyholder, the Insured, the beneficiary or any other person entitled to a benefit, in accordance with the applicable regulations, and is therefore entitled to:
 - 1) refuse to conclude the insurance contract, including the part in which it is to be concluded for the account of the Insured concerned,
 - 2) terminate the insurance contract, including the part in which it was concluded for the account of the Insured concerned, which shall be treated as a termination for a valid reason due to the applicable sanction regulations,
 - 3) to fail to make payment under the insurance contract, in respect of the benefit or return of the premium, irrespective of whose account and in what manner it would be made, to the extent that this would result from these sanctions.
2. _____ shall make the GT&C available on its website and at its registered office free of charge in a form which allows them to be obtained, reproduced and recorded.
3. Any notifications and declarations of _____, the Insured, the Policyholder and the Beneficiary shall be submitted in writing or in document form, otherwise being null and void, unless the provisions hereof or of the insurance contract allow another form.
4. The Insured, the Policyholder are obliged to notify _____ about any change of their address or e-mail address.
5. Any matters not regulated herein shall be settled based on the provisions of the Polish Civil Code and other provisions of the Polish law.
6. The following are appendices to these GT&C forming their integral part:
 - 1) Benefits limits table – Appendix 1,
 - 2) Percentage table of benefits for Damage to health – Appendix 2.
 - 3) Sports table – Appendix 3.
7. These General Terms and Conditions were approved by virtue of resolution no. _____ of the Management Board of _____ dated November 21, 2024 and apply to the insurance contracts entered into from December 11, 2024.
8. If using the translation of these GT&C, the parties agree that, in case of doubt, the Polish language version shall prevail.
9. _____ declares that it has the status of a large entrepreneur within the meaning of Article 4 point 6 of the Act on the prevention of excessive delays in commercial transactions.

PLEASE REMEMBER TO
CONSULT THIS TABLE

Benefit limits table

No	Scope	SUM INSURED/ GUARANTEE SUM and liability limits
1.	MEDICAL EXPENSES – KL	up to EUR 500,000
1.1.	Outpatients clinic	up to the sum insured for KL, excluding USA, Canada, Japan, Australia, and the Caribbean Islands where the liability limit for treatment at an Outpatients clinic depends on the sum insured for medical expenses and is EUR 3,000 for a sum insured for medical expenses lower than EUR 60,000 and for other cases – EUR 7,000
1.2.	Hospitalisation	up to the sum insured for KL
1.3.	Rescue	EUR 7,000 in case sum insured for medical expenses lower than EUR 60,000 and in other cases – EUR 10,000
1.4.	Appointment with a doctor	up to the sum insured for KL
1.5.	Medicines and dressing materials	up to the sum insured for KL
1.6.	Pregnancy complications and early delivery	up to the sum insured for KL
1.7.	Dental treatment	EUR 250
1.8.	Decompression chamber	up to the sum insured for KL
1.9.	Transport to and from a medical facility, between facilities and to the place of accommodation	up to the sum insured for KL
1.10.	Glasses repair or purchase and dental prothesis repair	up to the sum insured for KL
1.11.	Daily hospital allowance – if the National Health Fund paid the KL	for at least 3 days of Hospitalisation, EUR 100 per day, for a maximum of 10 days
2.	ASSISTANCE	Sub-limits of the sum insured for medical expenses
Scope for the Insured		STANDARD SUPER
2.1.	Day-and-night service of Emergency Call Center, including reimbursement of the costs of the first phone call	✓
2.2.	Phone call to the Emergency Call Center's doctor in Polish	✓
2.3.	Phone interpreter	✓

Scope for the Insured		STANDARD	SUPER
2.4.	Transport to the Country of residence	no limit	
2.5.	Transport of a corpse	no limit	
2.6.	Purchase of a coffin, cremation or burial abroad	up to the sum insured for KL	
2.7.	Transport for the purpose of continuation of the trip	EUR 500	
2.8.	Costs of meals and accommodation for the purpose of convalescence	EUR 150 per day for a maximum of 7 days	
2.9.	Transmitting messages	✓	
2.10.	Assistance in the case of loss of documents	✓	
2.11.	Cover for loss of cash	EUR 125	
2.12.	Renewal of insurance coverage	up to the sum insured for KL, for a maximum of 7 days	
2.13.	Telephone legal assistance	✓	
2.14.	Substitute driver	EUR 500	
2.15.	Flight delay/ cancellation	EUR 250	
2.16.	Cash transfer	✓	
2.17.	Trip interruption costs	–	up to the sum insured for KL
2.18.	Replacement for a business trip	–	up to the sum insured for KL
2.19.	Sending necessary personal items	–	✓
2.20.	Airline bankruptcy	–	EUR 200 for the sums insured for KL from EUR 60,000 and above
2.21.	Costs of extended stay abroad (from 3rd to 7th day)	–	EUR 100 per day, up to EUR 500
2.22.	Luggage delay	–	EUR 250
after the return to Poland:			
2.23.	First consultation with the doctor attending the continuation of treatment after the return to Poland	up to the sum insured for KL	
2.24.	Removal of plaster cast, change of dressings, removal of stitches, injection	up to the sum insured for KL	
2.25.	Transport to a facility and between facilities after the return to Poland	up to the sum insured for KL, for a maximum of 7 days	

Scope for the Insured		STANDARD	SUPER
2.26.	Rehabilitation equipment costs after the return to Poland	EUR 50	
2.27.	Daily hospital allowance after the return to Poland	PLN 100 per day for a maximum of 10 days	
2.28.	Visit of a nurse	–	EUR 50
2.29.	Domestic help	–	EUR 50
2.30.	Tutoring	–	EUR 50
2.31.	Child entertaining	–	EUR 50
2.32.	Psychological assistance	–	EUR 50
2.33.	Treatment of a tropical disease	–	EUR 50
for the Accompanying person:			
2.34.	Transport of the Accompanying person necessary for the return of the Insured to the Country of residence	to Poland: up to the sum insured for KL, to another country: up to EUR 5,000	
2.35.	Meals and accommodation for the Accompanying person necessary to settle any formalities related to the Insured's return to the Country of residence	EUR 150 per day for a maximum of 7 days	
2.36.	Visit of the Accompanying person	transport: up to the sum insured for KL, meals and accommodation: EUR 150 per day, for a maximum of 7 days	
2.37.	Meals and accommodation of the person staying with the Insured's corpse	EUR 150 per day for a maximum of 7 days	
2.38.	Transport of the Accompanying person in relation to the Insured's death	to Poland: up to the sum insured for KL, to another country: up to EUR 5,000	
2.39.	Costs of transport of the guardian for the purpose of continuation of the trip	EUR 500	
2.40.	Care over Next-of-kin	–	transport: up to the sum insured for KL, meals and accommodation: EUR 100 per day, for a maximum of 7 days

Scope for the Insured		STANDARD	SUPER
for a sportsperson:			
2.41.	Ski lift voucher	–	EUR 300
2.42.	Accommodation in the event of an avalanche	–	EUR 150
2.43.	Golf course rental	–	EUR 125
2.44.	Closure of ski trails	–	EUR 20 per day for a maximum of 5 days
2.45.	Closure of bathing areas	–	EUR 20 per day for a maximum of 5 days
2.46.	Sports equipment rental	–	Sports Equipment rental EUR 20 per day for a maximum of 10 days
3.	PERSONAL ACCIDENTS – NNW	up to PLN 100,000	
3.1.	Death benefit	100% of the sum insured for NNW	
3.2.	Benefit for partial Damage to health	Specific percentage of the sum insured for NNW (in accordance with the Percentage table of benefits for Damage health attached as Appendix 2 to these GT&C)	
4.	LEGAL ASSISTANCE – PP		
4.1.	Lawyer's fee in damages cases	EUR 2,000	
4.2.	Lawyer's fee in third party liability cases	EUR 1,000	
4.3.	Loan for bail	EUR 10,000	
5.	LUGGAGE – BP	up to PLN 10,000	
6.	THIRD PARTY LIABILITY – OC	up to EUR 500,000	
6.1.	Personal damage related to practicing of Amateur sports, Winter sports and Extreme sports	50% of the guarantee sum for OC	
6.2.	Property damage related to practicing of Amateur sports, Winter sports and Extreme sports	25% of the guarantee sum for OC	

Percentage table of benefits
for Damage to health

YOU MAY OBTAIN BENEFIT ONLY IF
THE ACCIDENT RESULTED IN ONE
OF THE INJURIES BELOW

Type of Damage to health	Percentage (%) of Damage to health
Total loss	
1. Sight in one eye	30
2. Sight in both eyes	100
3. Hearing in one ear	30
4. Hearing in both ears	60
5. Smell	10
6. Both tongue and taste	50
Total physical loss of or total loss of control over individual organs	
7. Upper limb at the shoulder joint	70
8. Upper limb above the elbow joint and below the shoulder joint	65
9. Upper limb below the elbow joint and above the wrist	60
10. Upper limb below or at the height of the wrist	55
11. Lower limb above the medial aspect of thigh	70
12. Lower limb below the medial aspect of thigh and above the knee joint	60
13. Lower limb below the knee joint and above the medial aspect of the lower leg	50
14. Lower limb below the medial aspect of the lower leg and above the foot (knee joint)	45
15. Lower limb – the foot in the ankle area	40
16. Lower limb – the foot excluding the heel	30
Total physical loss	
17. Thumb	20
18. Index finger	10
19. Other finger	5
20. Big toe	5
21. Other toe	2
Burns (2nd and 3rd degree)	
22. Burns covering 5-15% of body surface area	10
23. Burns covering 16-30% of body surface area	25
24. Burns covering more than 30% of body surface area	45
Fracture within pelvis	
25. Multiple comminuted open fracture	20
26. Multiple comminuted fracture	8
27. Multiple fracture	5
28. Single fracture	3

Femoral fracture	
29. Comminuted open fracture	15
30. Other open fractures	10
31. Other comminuted fractures	8
32. Other fractures	5
Humerus fracture	
33. Comminuted open fracture	10
34. Other open fractures	8
35. Other comminuted fractures	5
36. Other fractures	3
Fracture of both bones in the lower leg/forearm	
37. Comminuted open fracture	10
38. Other open fractures	8
39. Other comminuted fractures	5
40. Other fractures	3
Fracture of the base of the skull and skull cap/shoulder blade	
41. Comminuted open fracture	15
42. Other open fractures	10
43. Other comminuted fractures	8
44. Other fractures	5
Fracture of the bony face, mandible, thumb (thumb phalanges or metacarpal bones), index finger, clavicle, kneecap, ankle bone or heel bone	
45. Comminuted open fracture	10
46. Other open fractures	6
47. Other comminuted fractures	4
48. Other fractures	2
Vertebral body fracture	
49. Open fracture	12
50. Multiple fracture	8
51. Single fracture	3
Fractures of the elbow bone, radial bone, tibial bone or fibular bone	
52. Comminuted open fracture	8
53. Other open fractures	6
54. Other comminuted fractures	4
55. Other fractures	2
Fractures of the ribs, spinous or transverse processes	
56. Open fracture	5
57. Other fractures	1
Fractures of the fingers and toes (except for thumb and index finger)	
58. Open fracture	3
59. Other fractures	1
Fracture of the metatarsal and metacarpal bones, sternum or wrist	
60. Open fracture	6
61. Other fractures	2

Sports table

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THIS TABLE

Amateur Sports	Winter Sports	Extreme Sports	Amateur Sports	Winter Sports	Extreme Sports
• aerobics • aerodium/wind tunnel /indoor skydiving • badminton • baseball • jogging • orienteering • billiards • boxing aerobics • bouldering • capoeira • American football • frisbee • funball • go-kart • golf • grass boarding • halfpipe • ice hockey, roller hockey, field hockey • yachting • figure skating • horse riding • scootering • riding on objects pulled by water vehicles • camel riding, elephant riding • jeep safari • yoga • sea kayaking • canoeing • karting • kiteboarding, kitesurfing • road cycling • basketball • cricket • bodybuilding • kyudo • lacrosse • landkiting • athletics • longboarding, skateboarding • sightseeing flights as a passenger • archery • ice-skating • figure skating, speed skating • scuba diving up to 30 m (with documented qualifications, driver's license, or diving with an instructor) • asphalt surfing • motorboating • water skiing	• biathlon • cross-country skiing • kite snowboarding, kite skiing • downhill skiing • ski biking • skijoring • ski touring on marked routes • snowboarding • trikke skki	• abseiling • alpinism • ballooning • BASE jumping • bobsleigh • ice boating • boxing • bungee jumping • canopying • canyoning • downhill MTB • extreme marathon running • via ferrata • freediving • freeride • free skiing • acrobatic gymnastics • sports gymnastics • heli-skiing, boarding • himalaism • house running (rap sliding) • hydrospeed • mogul skiing • white-water kayaking • mountain biking • track cycling • hand-glider, paraglider, ultralight trike • marathon running • motocross • ultralight trike flying, • mountainboarding • hunting • wreck diving, cave diving • paragliding • parkour • engine-powered aircraft piloting • weightlifting • half-marathon running • rafting and other mountain river sports • rally raid • signum polonicum • ski mountaineering • off-piste ski touring • acrobatic ski jumping • high diving • ski jumping	• Nordic walking • paddle board, sup • paintball • parasailing • football • handball • water polo • swimming • polo • dog sledding • qigong • quad • ringo • rock boarding • rollerblading, inline skating, roller skating, roller skiing • water biking • rugby • sandboarding • tobogganing • volleyball • skateboarding • skeleton • skimboarding • trampoline jumping • snowmobile riding • water scooter riding • snorkelling • softball • defensive sports • combat sports • squash • surfing • martial arts • tai chi chuan • taiko • tambeach • dancing • technogym • table tennis • tennis • trampofoil • trekking up to 5,000 m ASL without the use of climbing, safety or belaying equipment • participation in sports camps by children under 18 years of age (excluding ski and snowboard camps) • floorball • wakeboarding • fishing • windsurfing • rowing • roller skating • indoor climbing • wrestling • zorbing • sailing up to 20 nautical miles from the coast		• parachuting • speleology • mountain sports • air sports • motor sports • aviation sports • sports in which snow or ice vehicles are used • shooting sports • fencing • gliding • Tatra mountaineering • tree climbing • medieval combat • mountaineering • rock climbing • mountain climbing • competitive performance of Amateur sports • competitive performance of Winter sports • Expeditions to places characterised by extreme climatic or natural conditions • trekking at altitudes of over 5 000 m ASL • zipline • sailing beyond 20 nautical miles from the coast

Quarantine/ isolation insurance
(KW code)

Pursuant to this clause, if an additional premium is paid, the subject matter of medical expenses and assistance insurance of the Insured who underwent **Mandatory quarantine or Isolation** while staying abroad, shall include documented **costs of the Insured's extended stay**, including costs of **accommodation, meals** (excluding alcoholic drinks) and **transport to the Country of residence** (if the pre-planned means of transport could not be used).

shall cover the **costs of the Insured's extended stay**:

- up to a maximum of EUR 1,000, if the sum insured for medical expenses and assistance is equal to or higher than EUR 60,000, and lower than EUR 150,000,
- up to a maximum of EUR 2,000, if the sum insured for medical expenses and assistance is equal to or higher than EUR 150,000.

The condition for applying for reimbursement of the costs of the Insured's extended stay is to provide, along with a claim form, proofs of costs incurred (e.g., bills) and confirmation of the Mandatory quarantine/ Isolation referral issued by a physician or sanitary and epidemiological services.

Mandatory quarantine – separation of a healthy person who has been exposed to Sars-Cov-1 or Sars-Cov-2 with their mutations, based on a quarantine referral issued by a physician or sanitary and epidemiological services, in order to prevent the spread of the disease. A mandatory quarantine imposed by local authorities on travellers crossing the border of the country of destination or transit **shall not be considered** a quarantine.

Isolation – separation of a patient with a positive test result for Sars-Cov-1 or Sars-Cov-2 with their mutations, who does not require hospitalization due to good health condition. Isolation is confirmed by a referral issued by the relevant sanitary and epidemiological services of the country of stay and a positive test result.

The above clause has been introduced pursuant to § 1 point 4 of the General Terms and Conditions for Safe Travels insurance approved by virtue of resolution no. _____ of the Management Board of _____ dated November 21, 2024.

Pet insurance
(ZD code)

Pursuant to this clause, if an additional premium is paid, the subject matter and scope of medical expenses and assistance insurance shall include:

- 1) **Necessary medical expenses for a Pet** accompanying the Insured during their Foreign trip, in connection with Sudden illness or Personal accident of the Pet, up to the sub-limit of the sum insured for medical expenses and assistance amounting to **EUR 500**.

Necessary medical expenses for a Pet – costs incurred abroad for veterinary consultations, tests, medicines, outpatients procedures, surgical procedures (including anaesthetic procedures) prescribed by a veterinarian, as well as medical accessories prescribed by a veterinarian, cremation or burial (if the Pet dies or has to be put down by a veterinarian), air transport costs if the previously planned means of transport could not be used. The medical expenses shall not include the costs of vaccinations, chips, planned treatment, delivery or dental treatment.

- 2) **Costs of care for a Pet** accompanying the Insured during their Foreign trip, in connection with Hospitalisation or death of the Insured. _____ shall cover the costs of care for a Pet owned by the Insured if their dog or cat is under their sole care during the trip, up to the sub-limit of the sum insured for medical expenses and assistance amounting to **EUR 100 per day** for a maximum of **7 days**.

- 3) **Costs of prolonged care of a Pet** – if the Insured is hospitalized during a Foreign trip and thus the Insured's return to the Country of residence has been delayed, _____ shall cover the costs of the prolonged stay at the Pet's hotel, up to the sub-limit of the sum insured for treatment and assistance costs of **EUR 100 per day** for a maximum of **7 days**.

The condition for applying for the reimbursement of the aforementioned costs, depending on the type of event, is to submit, along with the claim form:

- treatment records of the Pet and proofs of costs incurred (e.g., bills),
- copy of a document confirming the ownership of the dog or cat (e.g., passport or health records),
- medical records containing a medical diagnosis confirming the period of Hospitalization of the Insured abroad,
- proofs of costs incurred confirming the stay of the Pet in a pet hotel, along with the hotel's statement on the number of days of stay.

Pet – a dog or cat over 8 months old, owned by the Insured, excluding animals used for breeding or economical purposes.

Sudden illness of a Pet – a disease with sudden onset or aggravation of a chronic disease requiring medical aid due to which the Insured's Pet has to undergo treatment before the end of a trip.

Personal accident of a Pet – a sudden event caused by external circumstances, as a consequence of which the Insured's Pet suffered a permanent bodily injury, health disorder, or died.

The above clause has been introduced pursuant to § 1 point 4 of the General Terms and Conditions for Safe Travels insurance approved by virtue of resolution no. _____ of the Management Board of _____ dated November 21, 2024.

**Insurance of organized trips for children and youth
(WZ code)**

Pursuant to this clause, if an additional premium is paid, the subject matter of medical expenses and assistance insurance of an Insured Child who during the Insured's stay abroad is not accompanied by any Parent or Legal Guardian and who has been undergoing Isolation or **Mandatory quarantine** or **Hospitalization** which will not end until the planned date of return to the Country of residence, will include the documented expenses, including:

- **stay of a Parent or Legal guardian or trip educator (guardian)**, including the costs of their **accommodation and meals** (excluding alcoholic beverages) in the country where the Insured Child is isolated/ quarantined/ hospitalized, and
- **transport of a Parent or Legal guardian** to the country where the Insured Child is isolated/ quarantined/ hospitalized and return to the Country of residence, or **transport of a trip educator (guardian)** from the country where the Insured Child is isolated/ quarantined/ hospitalized to the Country of residence, up to a maximum of **EUR 1,000**, unless these costs are covered by another entity.

The condition for applying for the **reimbursement of the costs of stay and transport of a Parent or Legal guardian or trip educator (guardian)**:

- in the event of **Isolation**, is to submit, along with a claim form, a positive test result, proof of costs incurred (e.g., bills) and confirmation of isolation referral issued by a physician or sanitary and epidemiological services of the country of stay,
- in the event of **Hospitalization**, is to submit, along with a claim form, proof of costs incurred (e.g., bills) and medical records regarding the Hospitalization of the Child.
- in the event of **Mandatory quarantine**, is to submit, along with a claim form, proof of costs incurred (e.g., bills) and confirmation of Mandatory quarantine referral of the Child, issued by a physician or sanitary and epidemiological services of the country of stay,

Isolation – separation of a patient with a positive test result for Sars-Cov-1 or Sars-Cov-2 with their mutations, who does not require hospitalization due to good health condition. Isolation is confirmed by a referral issued by the relevant sanitary and epidemiological services of the country of stay and a positive test result.

Mandatory quarantine – separation of a healthy person who has been exposed to Sars-Cov-1 or Sars-Cov-2 with their mutations, based on a quarantine referral issued by a physician or sanitary and epidemiological services, in order to prevent the spread of the disease. A mandatory quarantine imposed by local authorities on travellers crossing the border of the country of destination or transit shall not be considered a quarantine.

Child – a person (also adopted) participating in package holiday for children and youth (in the form of a summer camp, camping trip, school trip, etc.), who on the first day of Isolation or Hospitalization is under 18 years of age.

Parent or Legal guardian – the natural (biological) father or natural (biological) mother of the Insured Child, or a person who fully or partially adopted the Insured Child.

The above clause has been introduced pursuant to § 1 point 4 of the General Terms and Conditions for Safe Travels insurance approved by virtue of resolution no. of the Management Board of dated November 21, 2024.

**Quarantine/ isolation insurance clause of the Insured
(code KW1)**

Pursuant to this clause, subject to the payment of an additional premium, the following documented costs are included in the subject-matter of treatment and assistance of an Insured who, while abroad, is subject to Mandatory quarantine or Isolation:

1. **stay in an Isolatory**,
2. **extended stay** (in the case of round trips, also the costs of the Insured's extended stay after the end of the accommodation in the last hotel in which the Insured was accommodated before being placed under Mandatory quarantine or Isolation).
3. **transportation to the country of residence or for the purpose of continuing the journey**, including the costs of visa extensions and rebooking.

covers the above costs:

- up to a maximum of **EUR 3 000** if the sum insured for medical expenses and assistance is equal to or more than EUR 60 000 and less than EUR 150 000
- up to a maximum of **EUR 8 000** when the sum insured for medical expenses and assistance is equal to or more than EUR 150 000

insofar as a pre-planned stay (including accommodation and food costs excluding alcoholic beverages) or means of transport could not be used.

The condition for claiming reimbursement is the submission, together with the claim form, of evidence of the costs incurred (e.g. receipts) and confirmation of referral to Isolation or Compulsory Quarantine/Isolation by a doctor/sanitary-epidemiological service or written confirmation by a doctor of the Compulsory Quarantine/ Isolation.

Mandatory quarantine – the isolation of a healthy person who has been exposed to Sars-Cov-1 or Sars-Cov-2 infection with their mutations, based on a referral to quarantine by a doctor/sanitary-epidemiological service or a written confirmation by a doctor that a quarantine has been held, in order to prevent the spread of the disease. A quarantine is not considered to be a compulsory quarantine imposed by local authorities on travelers crossing the border of the destination country of travel and transit countries along the route of travel.

Isolation – isolation of a patient positive for Sars-Cov-1 or Sars-Cov-2 with their mutations who does not require hospitalisation due to a medical condition. Isolation is confirmed by a referral issued by the relevant sanitary-epidemiological services of the country of residence or by a written confirmation from a doctor of the isolation and a positive test result.

Isolatory – place of isolation of a person infected or suspected of being infected with Sars-Cov-1 or Sars-Cov-2 with their mutations (e.g. awaiting the result of laboratory diagnosis) referred to Isolation or Mandatory quarantine by the sanitary-epidemiological services of the country of stay.

liability shall exclude the situations indicated in § 9 of the GT&Cs.

The above clause has been introduced pursuant to § 1 point 4 of the General Terms and Conditions for Safe Travels insurance approved by virtue of resolution no. of the Management Board of dated November 21, 2024.

Package trip insurance clause for children and young people in quarantine, isolation or hospitalization (code WZ1)

Pursuant to this clause, subject to the payment of an additional premium, the following documented costs are included in the subject-matter treatment and assistance insurance of an Insured Child, who while abroad, is not accompanied by any Parent or Legal guardian and who is subject to Isolation or Mandatory quarantine or Hospitalization which will not end until the planned date of return to the Country of residence:

1. stay of a Parent or Legal guardian or trip educator (guardian) in the country where the Insured Child is isolated/ quarantined/ hospitalized,
2. transport of a Parent or Legal guardian to the country where the Insured Child is isolated/ quarantined/ hospitalized
3. transport of the Child and a Parent or Legal guardian or trip educator (guardian) to the Country of residence

In the event of Isolation or Mandatory quarantine of the Child ending before the scheduled date of return to the Country of residence, documented costs are included:

1. stay of the Child and the trip educator (guardian) of the holiday of children and young people in a Isolatory (in the case of round trips, also the costs of prolonged stay of the Child and the educator after the end of accommodation in the last hotel facility in which the Child was accommodated before entering the Mandatory Quarantine or Isolatory);
2. transport of the Child and the trip educator of the holiday of children and young people for the purpose of continuing the journey.

covers the above costs up to a maximum of EUR 2 000, unless these costs were covered by another entity or a pre-planned stay (including accommodation and food costs excluding alcoholic beverages) or means of transport could not be used.

The condition for claiming reimbursement of accommodation and transportation costs of the Child, Parent or Legal guardian or trip educator of the holiday of children and young people is the submission, together with the claim form:

1. in the event of Isolation: a positive test result, proof of costs incurred (e.g., bills) and confirmation of isolation referral issued by a physician or sanitary and epidemiological services of the country of stay, or written confirmation by a doctor of the Mandatory quarantine/ Isolation;
2. in the event of Hospitalization: proof of costs incurred (e.g., bills) and medical records regarding the Hospitalization of the Child;
3. in the event of Mandatory quarantine: proof of costs incurred (e.g., bills) and confirmation of Mandatory quarantine referral of the Child, issued by a physician or sanitary and epidemiological services of the country of stay, or written confirmation by a doctor of the Mandatory quarantine/ Isolation;
4. in the event of stay in an Isolatory: proof of costs incurred (e.g., bills) and a referral to an Isolatory issued by a doctor or sanitary-epidemiological service of the country of stay.

Isolation – isolation of a patient positive for Sars-Cov-1 or Sars-Cov-2 with their mutations who does not require hospitalisation due to a medical condition. Isolation is confirmed by a referral issued by the relevant sanitary-epidemiological services of the country of residence or by a written confirmation from a doctor of the isolation and a positive test result.

Mandatory quarantine – the isolation of a healthy person who has been exposed to Sars-Cov-1 or Sars-Cov-2 infection with their mutations, based on a referral to quarantine by a doctor/sanitary-epidemiological service or a written confirmation by a doctor that a quarantine has been held, in order to prevent the spread of the disease. A quarantine is not considered to be a compulsory quarantine imposed by local authorities on travelers crossing the border of the destination country of travel and transit countries along the route of travel.

Child – a person (also adopted) participating in package holiday for children and youth (in the form of a summer camp, camping trip, school trip, etc.), who on the first day of Isolation or Hospitalization is under 18 years of age.

Parent or Legal guardian – the natural (biological) father or natural (biological) mother of the Insured Child, or a person who fully or partially adopted the Insured Child.

Isolatory – place of isolation of a person infected or suspected of being infected with Sars-Cov-1 or Sars-Cov-2 with their mutations (e.g. awaiting the result of laboratory diagnosis) referred to Isolation or Mandatory quarantine by the sanitary-epidemiological services of the country of stay.

liability shall exclude the situations indicated in § 9 of the GT&Cs.

The above clause was introduced in accordance with § 1 point 4 of the General Terms and Conditions of Safe Travels Insurance, approved by the Resolution No. of the Management Board of dated November 21, 2024.

INFORMATION ON THE PROCESSING OF PERSONAL DATA



Who is responsible for data processing?

Your Data Controller is _____ with registered office at _____.

You can contact us by sending an e-mail to _____, filing a contact form at _____, calling at _____, or sending a letter to the aforementioned registered office address. In matters related to the processing of personal data, you can contact our Data Protection Officer directly by sending an e-mail to _____ or a letter to the aforementioned registered office address.



Whose personal data do we process?

We process personal data of:

- the Policyholder,
- the Insured,
- persons seeking insurance coverage,
- other authorized persons under the insurance contract; data we possess do not always allow us to provide them with information on data processing (due to lack of contact details). In such a case, we ask the person providing the data to inform the above-mentioned persons of these provisions on data processing. Additionally, this information is available at _____,
- persons contacting us; their data are processed for the purpose of the contact.



For what purpose and on what legal basis we process your data?

We process your data:

- for the purpose of conclusion and performance of the insurance contract, including assessment of the insurance risk and repair of possible damages. The legal basis for data processing is Article 6 (1) (b) and (c) or Article 9 (2) (f) and (g) of the GDPR,
- for the purpose of pursuing the Data Controller's claims related to the insurance contract, which is the legitimate interest of the Data Controller. The legal basis for data processing is Article 6 (1) (f) of the GDPR,
- for statistical, actuarial and reporting purposes related to the conduct of insurance activities as part of the fulfilment of a legal obligation, in particular for the purposes of risk management, determining the amount of insurance premiums and reinsurance premiums, assessing the effectiveness of the reinsurance programme and establishing technical and insurance provisions. The legal basis for data processing is Article 6 (1) (c) of the GDPR,
- for the purpose of reinsurance of risks. The legal basis for data processing is Article 6 (1) (e) and Article 9 (2) (g) of the GDPR,
- for the purpose of marketing of our products and services, including for analytical and profiling purposes, which is the legitimate interest of the Data Controller. The legal basis is Article 6 (1) (f) of the GDPR.

Whenever we refer to the legitimate interest as the legal basis for data processing, i.e., Article 6 (1) (e) or Article 9 (2) (g) of the GDPR, this interest aims to provide persons entitled to financial insurance with financial security in their private and social life.



How long will your data be stored?

Your personal data will be stored until the claims under the insurance contract are time-barred or until the obligation to store data resulting from legal provisions expires, in particular the obligation to store accounting documents regarding the insurance contract.

In the case of data processed in connection with statistical purposes as well as actuarial and reporting processes, the data will be processed to the minimum extent necessary to achieve these purposes until the expiry of the data storage obligation resulting from legal provisions. We will stop processing your data for marketing purposes, including profiling and analytical purposes, if you object to the processing of your data for these purposes.

In addition, if you have consented to receiving commercial information via electronic communication channels (e-mail, text message, telephone contact) or to the sharing of data for marketing purposes, we will cease these activities if you withdraw your previously given voluntary consent in this regard.



Information on automated decision-making, including profiling:

For some insurance products, decisions can be made automatically as well as based on profiling. In such a case, we will always provide the person to whom the automated decision-making relates the right to receive appropriate explanations as to the basis of the decision made, as well as to challenge this decision, express their own position and obtain human intervention.



Information on profiling for marketing purposes:

Based on the personal data we have and information about the purchased products, we can perform profiling, i.e., automatic evaluation of certain personal characteristics regarding our customers.

The purpose of profiling is to better select information materials and offers regarding our products. Thanks to profiling, you will probably receive less information, but better suited to your preferences. You can object to profiling at any time.



Who may we transfer the data to?

Depending on the services provided, your personal data may be transferred to:

- our authorized employees,
- entities that process data on our behalf, including, but not limited to:
 - insurance agents,
 - entities cooperating with us in the process of claims repairing and/or insurance risk assessment,
 - entities providing assistance services,
 - entities providing us with advisory services,
 - providers of IT services,
- other data controllers who process data on their own behalf, including, but not limited to:
 - reinsurance companies,
 - medical facilities,
 - entities handling payments,
 - entities conducting postal or courier activities,
 - other entities under the law.

In addition, your personal data may be transferred to recipients located in countries outside the European Economic Area, but this will only take place if the transfer of data is necessary for the performance of the insurance contract.



What rights are you entitled to regarding the processing of your personal data?

- Right to request access to your data, and also request their rectification, restriction of processing or erasure, subject to restrictions in the exercise of the right to request access to data resulting from legal provisions.
- To the extent that the data is processed in order to conclude and perform the insurance contract or on the basis of your consent, you have the right to transfer your personal data, i.e., to receive your personal data from us in a commonly used readable format for the purpose of sending them to another data controller.
- The right to withdraw granted consents (however, withdrawing the consent will have no effect on the compliance of the processing which took place on the basis of the consent before it was withdrawn).
- Additionally, if the legal basis for the processing of personal data is the legitimate interest of the Data Controller, you are entitled to object to their processing. In particular, you have the right to object to the processing of data for the purposes of marketing and profiling.

In order to exercise the above rights, please contact us or our data protection officer. Contact details are listed above.

In addition, the data subject has the right to file a complaint with supervisory authorities dealing with the protection of personal data (the President of the Personal Data Protection Office).



Are you obliged to provide your data?

Providing personal data in connection with the concluded contract is necessary to enter into and perform the insurance contract and to assess the insurance risk. It is not possible to enter into an insurance contract without providing personal data. However, providing data for marketing purposes is voluntary.