

PRODUCT INFORMATION • 2011-2012 WINTER



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The detailed information concerning the insurance products is included in the insurance conditions marked EUB2011-01U2 (hereinafter referred to as: Conditions) available in Hungarian at the website of www.eub.hu and the offices of the sales partners of the Insurance Company.

SERVICES (HUF)	TOP EXTRA ① TENERPART EXTRA ④ AIR HOLIDAY EXTRA ⑤ SÍ EXTRA	TOP ② TENERPART TOP ③ AIR HOLIDAY CITY ⑥ SÍ PROFI	NÍVÓ ⑦ TENERPART NÍVÓ ⑧ INSURANCE OF MANUAL WORKERS ⑨ SÍ SZTÁR	EURO 30 ⑩ EURO 30 PRAKTIKUM	EEK-PLUSZ
A) Healthcare assistance and insurance					
Refunding of medical and rescue costs in the case of accident or sickness: Within this:	100 000 000	50 000 000	15 000 000	4 000 000	The Insurer does not undertake the refunding of medical and rescuing costs!!
– in the case of sickness at most	100 000 000	50 000 000	15 000 000	2 000 000	
– in the case of rescue with emergency helicopter	10 000 000	5 000 000	2 500 000	2 000 000	
– mountain rescue	2 500 000	1 500 000	750 000	750 000	
– transportation with ambulance car	2 500 000	1 500 000	750 000	750 000	
– hyperbar-chamber treatment (Tengerpart products and Air Holiday Extra, Sport Extra)	10 000 000	3 000 000	2 000 000	–	
– emergency dentist services	€ 500	€ 400	€ 300	€ 200	
– hospital care daily refunding for insuree, provided the refunding of the hospital costs is done on the basis of EHIC or another insurance (for max. 30 days)	40 000	35 000	30 000	30 000	
Organising transportation home, refunding the surplus costs that incurred (rescue airplane transportation as well in medically justified cases)	without limit	without limit	without limit	without limit	without limit
Health care assistance services: 24 hour Hungarian language assistance service	24 hour Hungarian language assistance service				
Organizing the transportation of corpse to home, refunding of the costs incurred	without limit	without limit	without limit	without limit	without limit
B) Additional travel related assistance					
Visit to a sick child: – transport costs	500 000	200 000	100 000	–	–
– accommodation costs for 7 nights at most	€ 500	€ 300	€ 150	–	–
Changing the trip home due to sickness or accident	–	–	–	–	–
– accommodation cost for Insuree in total (max. 7 nights)	€ 500	€ 300	€ 150	–	–
– accommodation cost for relative in total (max. 7 nights)	€ 500	€ 300	€ 150	–	–
– refunding the transport surplus cost of relative occurring due to his/her travelling home at the same time as Insuree:	500 000	200 000	100 000	–	–
Refunding the accommodation cost of relative during the hospital stay of Insuree in total (max. 7 nights)	€ 500	€ 300	€ 150	–	–
Patient visit: – transport costs	1 000 000	400 000	200 000	–	–
– accommodation cost in total (max. 7 nights)	€ 500	€ 300	€ 150	–	–
Transporting children home	1 000 000	400 000	200 000	–	–
Travelling home before due time, because of the sickness or death of a relative at home	500 000	200 000	100 000	–	–
Interpreter service in the case of sickness, accident or vehicle failure	30 000	15 000	–	–	–
Finding the Insuree, rescuing him/her	2 000 000	500 000	–	–	–
Cash subsidy mediation	800 000	200 000	100 000	–	–
Information in the case of travel document lost	Service	Service	Service	–	–
Refunding of ski pass in the case of the sickness or death of insuree	⑨ 100 000	⑥ 50 000	⑦ 15 000	–	–
Home security service for an unexpected trip home	500 000	200 000	100 000	–	–
Medical consulting by phone in Hungarian language	24 hour service	24 hour service	24 hour service	–	–
C) Vehicle assistance core services					
Car rescue company information	Service	Service	Service	–	–
Sending a driver in the case of the sickness or accident of Insuree	300 000	100 000	50 000	–	–
D) Accident insurance					
Insurance for death originating from an accident	3 000 000	2 000 000	1 500 000	200 000	1 000 000
Insurance for air catastrophe (in addition to accident caused death service)	④ 3 000 000	⑤ 2 000 000	–	–	–
Insurance for permanent health damage originating from accident (100 %)	6 000 000	2 000 000	1 500 000	200 000	1 000 000
Accident hospital daily refunding	2 000	1 000	–	–	–
Accident sick benefit supplementing service	6 000	3 000	1 500	–	–
E) Luggage insurance					
In case luggage or travel document is stolen or their damage due to accident, in total, at most:	400 000	280 000	200 000	50 000	80 000
– within this, cost refunding for replacing travel documents	without limit	15 000	5 000	5 000	5 000
– within this, cost refunding for bank card replacement	10 000	5 000	1 000	–	–
– within this, insurance for skiing accessories	⑨ 300 000	⑥ 200 000	⑦ 100 000	–	–
– within this, sport devices related insurance	① ④ 200 000	② 125 000	③ 80 000	–	–
– refunding the travelling and consultation costs abroad related to the replacement of travel documents	50 000	25 000	10 000	–	–
– limit by objects	60 000	30 000	15 000	10 000	15 000
– limit by packages	150 000	90 000	40 000	25 000	40 000
– within this, „laptop-insurance” (service for mobile computers) in total	100 000	–	–	–	–
Supplementary luggage insurance in the case of air luggage	④ 100 000	⑤ 50 000	–	–	–
– within this, air luggage damage related refunding	④ 50 000	⑤ 25 000	–	–	–
F) Luggage delay (abroad)					
– in the case of luggage delay between 6 and 12 hours	10 000	–	–	–	–
– in the case of luggage delay exceeding 12 hours, but at most 24 hours	40 000	10 000	–	–	–
– in the case of luggage delay exceeding 24 hours	80 000	50 000	–	–	–
G) Flight delay abroad and on arrival home					
Flight delay – abroad	④ 40 000	⑤ 20 000	–	–	–
Flight delay on arrival home	④ 20 000	⑤ 5 000	–	–	–
H) Missing a flight because of delay caused by a traffic accident					
Missing an air flight because of delay caused by a traffic accident	④ 100 000	⑤ 25 000	–	–	–
I) Legal protection assistance provision and insurance*					
a) payment of bail and costs incurring	4 000 000	500 000	250 000	400 000	–
b) work fee of lawyer	2 000 000	250 000	100 000	200 000	–
J) Liability insurance*					
Refunding the compensation liability of Insuree	1 000 000	⑤ 500 000	⑦ 250 000	⑩ 200 000	–
– within this professional liability insurance	–	–	–	200 000	–
K) Hotel and camping liability insurance*					
– refunding of compensation liability (with 10 % deductible)	① 50 000 additional 100 000	② 60 000	③ 40 000	–	–
N) Flash-card insurance					
– restoring digital photos stored on flash card	may be selected for the payment of a separate fee	may be selected for the payment of a separate fee	may be selected for the payment of a separate fee	may be selected for the payment of a separate fee	may be selected for the payment of a separate fee

L) Vehicle assistance – Auto Extra supplementary product	Auto-Extra vehicle assistance service	M) Insurance for the inability to travel (cancellation) and for interrupting a trip or for substituting the deductible part	Storno Kombi (may be signed together with the passenger insurance)	Deductible part replacing insurance (may be signed together with the passenger insurance)	Storno Basic (may be signed independently)
Transport to service station	70 000	a) maximum insurance amount/bookings and insurance events b) maximum insurance amount by insurees c) deductible part burdening the beneficiary in the percentage of the amount that is to be refunded by insurer d) minimum amount of the deductible part that is to be covered by beneficiary	2 000 000 1 000 000 10% 5000 HUF/person, except in the case of an apartment, when it is 1000 HUF/person	600 000 150 000 0% –	2 000 000 500 000 20% 10 000 HUF/person
Storage of vehicle (for at most 5 days)	5 000 / day				
Contact keeping with service station (Attention! The insurance does not cover the repair costs.)	Service				
Transportation home by car rescue service in the case of a traffic accident	500 000				
Transportation home by car rescue service in the case of technical failure	200 000				
Services concerning the persons travelling in the vehicle (for all the passengers altogether): – organising the further travelling of the persons travelling in the vehicle, travelling back for repaired vehicle – refunding of transport costs, – organising accommodation for persons travelling in the vehicle, refunding of the accommodation cost, – provision of a rented car	140 000 (and within this for each insured person at most 20 000 HUF per person)				
Refunding of phone and taxi costs	10 000				

Attention: Services marked with a number are included exclusively in the products that are marked with the given number! As regards product ⑩ risk coverage is also effective for professional exercise organised by education institutions involving physical work.

→ Subjects of the insurance contract

Insurer: European Travel Insurance PLC, a legal person, which in exchange for the insurance fee undertakes an insurance risk and in case the legal basis exists it commits itself to perform the obligations that are included in the Service Table of Section 4 (4) of the General Conditions I and in the Special Conditions.

Contracting Party the party, who signs the insurance contract and who pays the insurance fee.

Insured Person may be the natural person in connection with whose life, health conditions, luggage and vehicle related events the contract is signed, provided:

- the permanent home address of the given person is within the territory of the Republic of Hungary, and he is insured in the framework of the system of Hungarian compulsory health insurance or he is entitled to health services under any other legal title, and who has a valid social security identification code (TAJ number) (independently of citizenship),
- in case a given person is not a Hungarian citizen and he has his permanent home address within the territory of the Republic of Hungary, but he travels into the country of his citizenship, then the Insurer undertakes to bear the risks only in case the country belongs among the countries of the European Union. In this case in respect of the country of the citizenship the undertaking of the risk covers trips lasting at most 30 days. The territorial effect of the insurance contract in cases other than this does not cover the country/countries of the citizenship of the Insured Person.

– in case the permanent home address of the given person is not within the territory of the Republic of Hungary and he does not have a valid TAJ number there, however his permanent home address is located within the territory of countries bordering the Republic of Hungary – with the exception of Ukraine – and he has there a valid compulsory health insurance or he is entitled to health care services, then Insurer undertakes to bear any risks with the condition that the territorial effect of the insurance does not cover the territory of the Republic of Hungary and the territory of the country of the permanent home address or citizenship of the Insured Person, however Insurer undertakes transportation home to the country of the permanent address of the Insured Person as well.

– Any natural person may be an insured person as regards inability to travel.

Beneficiary is the person, who is entitled to insurance services.

Contracting Party with the written consent of Insurer may indicate and modify a Beneficiary. The written statement concerning the indicating and modification of the Beneficiary has to be forwarded to the Insurer – in line with the contents of Sections 11.1 of the Conditions.

The indication of the Beneficiary will lose its effect if Beneficiary dies before the occurrence of the insurance event.

The Beneficiary of the services due in the life of the Insured Person is the Insured Person, provided in the contract no other Beneficiary is named. In case the Insured Person dies, then the Beneficiary will be the inheritor of the Insured Person, provided no other Beneficiary was named in the contract, or the indication of the Beneficiary lost its effect or it is invalid.

The contracting party of the travel contract is classified the Beneficiary exclusively in respect of inability to travel and interrupting the trip or insurance covering the deductible part of the risk, that is, the natural person, legal person or other organisation without legal personality paying the fee of the travelling service on the basis of the given contract.

→ Conclusion of the insurance contract and the risk bearing of insurer

The insurance contract is established after its being signed by the Contracting Party and the Insurer, and it is certified by the insurance policy. It is a **prerequisite of establishing the insurance contract that the Insured Person should stay at the time when the contract is signed within the territory of the Republic of Hungary (in the case of conditions defined in Point I.1.2.(3)(c) either in the country of his citizenship or in the country of his permanent home address)**. Deviations from this are possible exclusively with the written permit of Insurer. In the case of insurance concerning the inability to travel the insurer does not apply this restriction.

In respect of insurances concerning the inability to travel or insurances concerning the substitution of deductible part it is a prerequisite of signing the insurance contract that the signing of the insurance contract and the payment of the insurance fee should be done on the day when the trip is reserved, or – exclusively in case the reservation of the trip was done more than 14 days before the starting day of the trip – at the latest within 5 days after the day when the trip was reserved. The insurance contract will come into effect at the time that is given in the insurance contract as the starting time of risk bearing, but at the earliest after the payment of the insurance fee to the Insurer (or its agent) and it will be in effect till the expiry time given in the contract.

If the day given as the starting time of risk bearing is the day when the insurance fee is paid, then:

– the exact time (hour, minute) of the payment of the fee has to be also indicated in the insurance contract or the insurance policy. In case on the contract or on the policy the time of the payment of the fee is not indicated with the accuracy of hour and minute, then the risk bearing of Insurer may start the earliest at 0 hours on the day that follows the payment of the fee,

– immediately after the payment of the fee the risk bearing of Insurer starts exclusively in respect of traffic accidents, in respect of other type of events the risk bearing of Insurer may start the earliest after the passing of 3 hours from the starting time that is indicated in the policy.

The latest time of starting risk bearing may be at most 365 days after the signing of the insurance contract, with the exception of the Cancellation Basic product, in the case of which it may be 550 days.

The insurance contract is effective till the time that is indicated in the insurance contract as the expiry of insurance, but at most till 365 days after the insurance contract's effective date.

The risk bearing of Insurer starts on the effective day of the insurance contract, with the exception if parties stipulate it otherwise.

The insurance contract as regards inability to travel (cancellation), interruption of the trip or for services substituting the deductible part (Section (M)):

- the insurance concerning the inability to travel and the deductible part substituting insurance in respect of specific insured persons will come into effect at the time when the insurance contract is signed, but at the earliest simultaneously with the payment of the insurance fee. On the first day of risk bearing the risk bearing of Insurer extends exclusively to accident events, and – exclusively in case the insurance contract is signed after the day when the trip is reserved – the risk bearing of Insurer covers, in the first 5 days of risk bearing exclusively accident events,
- in respect of inability to travel insurance and in respect of deductible part substituting insurance the risk bearing of Insurer may last the latest from the effective date till the time that is given as the starting time of using the travel service in the travel contract, provided the insurance fee is fully paid. In case the starting of the travel service is not defined in the travel contract or in any of its appendices with the accuracy of hour and minute, then the effect of the insurance contract may last the latest till 12.00 hours on the first day when the travel service is used.
- exclusively in respect of „Interrupting the trip” related insurances the effect of the insurance contract and at the same time the risk bearing of Insurer starts at the time that is given in the travel contract as the starting time of the trip – but at the earliest, when the insurance fee is paid – and it will end at the time that is given as the end of the trip in the travel contract, but it will end the latest at the expiry time indicated in respect of the passenger insurance in the insurance contract,
- in respect of insurances concerning the inability to travel and the insurances substituting the deductible part, if the trip is reserved within 2 calendar days prior to the planned starting date, then the risk bearing of Insurer covers exclusively the accident events and the events of death.

→ Insurance fee

The insurance fee is the counter-value of the risk bearing of Insurer. The extent of the insurance fee is stipulated in the insurance contract. The insurance fee is calculated on the basis of the tariff of Insurer effective at the time when the contract is signed, with taking into consideration the age of the Insured Person, the content and services of the insurance and the territorial effect of the insurance.

The insurance contract is a single fee contract. The fee is due when the contract is signed.

Contracting Party meets its obligation to pay the insurance fee at the time, when the insurance fee is paid into the cashier desk or arrives to the bank account of either the Insurer or its representative (agent).

The prescriptions concerning the fee discounts that may be provided by Insurer and the additional fees payable in the case of supplementary services that may be provided by Insurer are included in Point I.3.2 of the **Conditions**.

→ Cases of contract termination

The contract will be terminated in the following cases:

- at the expiry time that is defined in the insurance contract, or
- if the Insured Person dies, or
- in the other cases that are regulated under the special conditions, or
- in case Contracting Party enforces its fee refunding, then on the day when the fee refunding request is submitted or at the time when the period starts in respect of which Insurer repays the fee.

→ Fee refunding

Contracting Party may claim fee refunding in the following cases:

Insurer undertakes the refunding of the complete fee in case the following conditions are jointly met:

- Contracting Party reports its fee refunding claim in writing at that organisation unit of Insurer or its agent, where the insurance contract was signed, at the latest on the day before the risk bearing would start,
- Contracting Party returns simultaneously with this to the given organisation unit fully all the – original and duplicate - copies of the insurance policy.

Insurer undertakes to partial refund the insurance fee in case the following conditions are jointly met, with the exception of the **„Auto Extra” product**, for which Insurer does not undertake any partial fee refunding:

- Contracting Party reports in writing the fee refunding claim before the expiry of the insurance contract at that organisational unit of insurer or its agent, where the insurance contract was signed,
 - the Insured Person/Persons and the Beneficiary/Beneficiaries issue a statement that no insurance event took place during the effect of the insurance contract or he/they do not wish to enforce any service claims as a consequence of the given insurance contract against the Insurer, – simultaneously with reporting the claim Contracting Party returns all the – original and duplicate – copies of the insurance policy.
- In the case of partial fee refunding the amount refunded by Insurer is that part of the insurance fee that is from the day that follows the day when the fee refunding claim is submitted till the expiry of the insurance contract reduced with a 10 % administration fee, with the exception of the following cases
- in case the duration of risk bearing was altogether 3 days – in this case Insurer does not undertake partial fee refunding,
 - if the insurance contract was established in respect of **„Euro 300” products**, then Insurer undertakes partial fee refunding at the earliest on day 21 of risk bearing. The fee due for the first 20 days of cost bearing will not be refunded by Insurer.
 - In the case of an „annual pass” Insurer will only undertake after the starting of the insurance period fee refunding only if from the insurance period at most 50 days have passed. In this case Insurer will repay 50 % of the complete fee.
 - In case a family tariff is applied, then the fee cannot be split and Insurer undertakes fee refunding exclusively jointly for all the insured parties, provided the above conditions are met in respect of all the involved persons.
- Insurer does not undertake any fee refunding as regards the fee of the inability to travel (cancellation) and the interruption of the trip, and the deductible part substituting insurances after the start of the effect of the insurance contract.

→ Conditions of insurer's performance

Deadlines, co-operation and information providing obligation

Insurer undertakes to perform the services only if the occurrence of the insurance event is reported within the shortest time possible – but at most within 12 hours – at the assistance service of Insurer, at the EUB-Assistance (e.g. through phone or fax), and the documents needed for judging the service claim are forwarded to EUB-Assistance (e.g. through fax), and EUB-Assistance permits the using of the service, with the exception of services that are described under the sections **„E) Luggage insurance” and „F) Luggage delay (abroad)” and „G) Flight delay abroad and when arriving home”,** which have to be reported at the insurer at the latest within 30 days after the occurrence of the insurance event with submitting the documents that are prescribed under the conditions as the prerequisite of the performance of the insurance service. In addition to the above preliminary reporting is not required for the performance of Insurer when danger of life has to be prevented stipulated under Points I.2.3.(2), II. A)2.1(4) and II. A)2.7.3.2 **Conditions**.

– In case the above deadline is not observed and due to these significant circumstances will become unexplainable, then the service providing obligation of Insurer will not incur.

– The Insured Person or the Beneficiary is obliged to provide all assistance to Insurer and EUB-Assistance needed for judging the service claim and to co-operate with them in the course of the performance of the service. **In case Insured Person or Beneficiary will not provide the assistance needed for performing the service, or if he does not co-operate in obtaining the information requested, and due to this significant circumstances become unexplainable, then the service providing obligation of Insurer will not incur.**

– The service providing obligation of Insurer will not incur also if in the course of reporting the contents of the Statements made by the Insured Person or its agent and the official documents or information otherwise available to Insurer deviate from each other, and due to this significant circumstances become unexplainable, or if Insured Person or the Beneficiary tells Insurer false data.

In case the statements made by Insured Person or its agent to Insurer deviate from each other in an unjustified manner or the rational reason of the deviation is not certified, then Insurer will accept the earlier made statement to be the true one.

The service providing obligation of Insurer will not incur in respect of the service types that are described under the specific conditions in the following cases:

– **E) In respect of luggage insurance**, if the content of the official report or the report issued by the passenger transport company concerning the damage event or the accusation submitted by the Insured Person to the authority and the data communicated towards the Insurer deviate from each other and due to this significant circumstances become unexplainable,

– **F) In respect of luggage delay (abroad)**, if the legal basis of the claim cannot be unambiguously established from the submitted documents,

– **Moreover the service providing obligation of Insurer will not incur in respect of any additional services – beyond the extent that is defined in Section A) of the insurance conditions – in the case of the occurrence of such an accident or sickness, the reporting of which had not been done in line with the insurance conditions due to the own mistake of the Insured Person, and the Insurer did not approve in advance the using of the health service, moreover the service providing obligation of Insurer will not incur in the case of L) Vehicle assistance – Auto-Extra supplementary product, if EUB Assistance was not informed about the occurrence of the insurance event without delay due to the own fault of the Insured Person and the services were not organised by EUB Assistance.**

– **M) The deadline for reporting the insurance event in respect of insurances concerning the inability to travel (cancellation) and trip interruption, as well as the deductible part substitution is the following:**

– Insurer undertakes to perform the services only in case cancelling the travel service towards the travel organiser is done without delay after the occurrence of the insurance event, but at the latest on the first workday following the day of occurrence, and the event indicated as the reason of cancellation is reported without delay after its occurrence to EUB-Assistance with giving the following data:

- the time of the cancelled travel service, the name and address of the travel service provider
- the name and address of the contracting party of the travel contract,
- the name of the cancelled passenger(s),
- the reason of inability to travel or interrupting the trip, exactly defined,
- if the reason of inability to travel or of interrupting the trip is the sickness or the accident of any person, then the name, address and phone number of the sick person or the person involved in the accident – where he is available at any time within 5 days after reporting, and the name and contact data of the service provider (e.g. doctor, hospital) that takes care of the health service,
- the identification number of the insurance policy concerning the inability to travel.
- the name, address and phone number of the reporting person.

After the above preliminary reporting the Insured Person is obliged to forward to Insurer the documents that are defined in Point I. 5.2 of the Conditions as soon as they are available. Insurer undertakes to perform the service claim exclusively after the receipt of all the needed documents. In case the above reporting obligation is not met due to an own fault, then service obligation of Insurer will not incur.

N) In the case of Flash-card data saving insurance Insured Person has to report the Service Claim to Insurer within 15 days after the occurrence of the insurance event, but at the latest 15 days after the expiry of the insurance in writing (email, fax, registered mail) on the „Flash Doctor” Product Service Claim Reporting Sheet available on the website of Insurer.

Insured Person is obliged to co-operate with Service Provider and if it is expectable from it, then it is obliged to permit and allow Service Provider all kinds of examinations concerning the data carrier and concerning the possible loss of data.

It is the task and responsibility of the Insured Person to pack the damaged/defective data carriers in a secure manner (protecting it from damages, as far as possible in a closed plastic bag, in packing that is padded and which cannot be opened without destruction) that are to be handed over to Service Provider for the purpose of restoring the data.

→ Documents required for performance

The obligation to forward the documents to Insurer is the task of the Insured Person or the Beneficiary with the exception of sickness or accident, in the case of which EUB-Assistance undertook to obtain the medical documents generated in connection with it, and with the exception of those other cases when Insurer notifies Insured Person or Beneficiary that it has taken over the task of the obtaining the documents from third persons.

In case Insurer or EUB-Assistance took over the task of obtaining the documents, then Insurer as a prerequisite of performance may request Insured Person or Beneficiary or their lawful representative to issue their consenting statement concerning the handing out of the data (in the form that is prescribed by the data service provider involved) in case the third persons issuing the requested documents (e.g. authorities, doctors, hospitals) request the presentation of the consenting statement for handing out the documents.

When presenting the service claim Insured Person or Beneficiary has to submit the following documents:

- printed and signed copy of the insurance policy,
- the service claim report sheet made available by Insurer, filled in fully and in line with the truth, signed either by the beneficiary or its proxy,
- in the case of organised group tour the report of the representative of the travel agency concerning the occurrence of the insurance event and its circumstances, in the case of travel or professional exercise organised by an education institution the certificate issued by the representative of the organising education institution concerning the fact that the travel/professional exercise was organised by the institution and the description concerning the circumstances of the insurance event,
- in the case of sickness or accident or an event that is related to it, the photocopy of all those medical documents connected to the insurance event, which have been generated from the time of its occurrence till the reporting of the service claim including the diagnosis and the detailed description of the medical treatment, the findings of the examinations done, as well as the unambiguous marking of the institutions, doctors providing the health service. In case the insurance event is reported to EUB-Assistance without delay after the occurrence of the event, with simultaneously indicating the contact data of the health service providing institution (exact name and address of the institution, phone and fax number or email address), then EUB-Assistance undertakes to obtain the needed medical documents from the given institution. In case the health service providing institution does not hand out within the requested deadline the documents requested to EUB-Assistance, then Insurer or EUB-Assistance will inform the Insured Person about this and will indicate that – due to the above – Insured Person is obliged to obtain the documents.
- in the case of an event that is related to sickness the background data concerning the health condition of the Insured Person, upon the request of Insurer,
- the original invoices of the costs incurred (e.g. medical care abroad, medicines, phone, accommodation, etc.), issued to name,
- in the case of an accident or an event connected to it the accident report needed for clarifying the immediate circumstances of the accident,
- in the case of a traffic accident or an event that is related to it, the detailed on site report issued by the competent authority and the investigation closing resolution, the police or medical document that refers to the measurement of the blood alcohol level,
- in case in connection with the insurance event in addition to law infringing other authority procedures had been also started, then the resolution closing the procedure within 2 days after its receipt, or in the case of criminal or law infringing procedure at least the certificate issued by the authority concerning the starting of the procedure or the report that was recorded by the authority concerning the case,
- in the case of a diving accident: the diving minutes and for certifying the diver classification of the Insured Person the official document accepted either by the World Underwater Federation /Büvár Világzövetség/ or the Hungarian Divers Federation and – if the accident occurred during training – the minute of the company that provided the training,
- all the travel documents connected to travelling abroad (tickets for the complete route /flight, bus, train, and boat tickets/, boarding cards, confirmations of accommodation reservations, petrol filling bills, motorway stickers and the invoices of gate/tunnel usage fees), copy of passport and visa, in the case of transporting to home the description of the route,
- copy of the TAJ-card /TAJ -Social Security Number/ or the written certificate of OEP /National Health Insurance/ about valid social security coverage, of the personal identity card and home address card, driving licence and the automobile registration certificate, and in the case of organised group trip the copy of the travel contract,
- damage event related medical documents that have been generated in Hungary after travelling home,
- rescue report,
- in case in respect of the service claim the beneficiary does not wish to act directly, then the relevant original proxy,
- the copy of EEK /European Health Insurance Card/ or the EEK-substituting form issued by OEP,
- in case patient has been transported home, then the receiving statement of the receiving hospital,
- in the case of phone costs related claim the original phone invoice and call list,
- the images and description of X-ray, CT, MRI and other image creating examinations, provided such documents are prepared in the course of the examinations,
- sick benefit certificate and the certificate of the Hungarian hospital about hospital in-patient service,
- firearm licence in the case of a hunting related service claim,
- the inoculation certificate certifying the provision of the mandatory protective inoculations.

In addition to the above the following documents have to be submitted (**Attention! This is indicative extracted information; the detailed description is available under Point 5.2 of General Part I of the Conditions!**):

E) Luggage insurance

- in the case of any theft or robbery the detailed report issued by the police abroad,
- in the case of luggage that disappeared or which had been damaged while being managed by a passenger transport company, primarily the travel ticket, (in the case of air luggage damages) the boarding card, the luggage dispatch note (luggage tag), the report that was submitted to the passenger transport company or the company's report acknowledging its responsibility,
- the original invoice that certifies the time and value of the procurement of the property in its new condition – issued to the name of the Insured Person – provided it is available. **In the framework of the Top Extra product as regards portable computers it is a prerequisite of refunding that the original invoice and guarantee slip certifying its procurement as a new product issued to the name of the Insured Person or – provided the Contracting Party is a company defined in Section 685 c) of the Civil Code – to the name of the Contracting Party be submitted to Insurer. (In respect of the insurance contract the purchase and sale contract does not substitute the original invoice issued to the name of the involved party.)**

F) Luggage delay

- the certificate issued by the air company concerning the delay and its duration, and the original certificate(s) concerning the purchasing of items that were needed abroad because of the delay of the luggage.

L) Vehicle assistance – Auto Extra package

- the certificate issued by the mechanic or service station that executed the repair or established the defect, and by the company that transported the vehicle about the inability of the vehicle to move as well as the original invoices of the costs that incurred, issued to name (with the identification data of the vehicle).

M) Insurance concerning the inability to travel (cancellation) and interrupting the trip

- the form or the copy of the log entry or patient medical card of the family doctor, the specialist doctor findings, or the hospital closing report, which has to contain primarily the number of the log or of the case, the diagnosis, the examinations done, the treatment recommended
- Moreover, in respect of the insurance event and service-type described in Special Conditions II of the Insurance Conditions the additional documents that are prescribed in Point 5.2 of General Conditions II!**

→ Due date of the performance of the insurer

- Insurer based on the insurance contract undertakes the obligation to perform the services that are defined in the Service-table included in Section 4. (4) of Conditions I, provided an insurance event occurs within the territorial effect that is defined in the insurance contract and during the period of risk bearing and provided the legal basis exists.
- Insurer will meet the service claim reported to it, within 15 workdays after the receipt of all the documents that are needed for its evaluation, with the exception if it is prescribed otherwise under the Special Conditions.
- In case the documents requested by Insurer are not submitted or submitted repeatedly deficiently in spite of the related notice sent, then Insurer may refuse the service claim or it may evaluate it on the basis of the documents that are available.
- Insurer does not undertake any liability for those damages that have been caused by the delayed performance of any of its services, provided the delay may be traced back to events that are beyond the control of the Insurer or its agents (force majeure type of events).

→ Exemptions

- Insurer will be exempted from under performing the service, provided it proves that the insurance event was caused by the Contracting Party or the Insured Person or his close relative (Section 3 (f) (93) of the Insurance Act (Bit/7) in an unlawfully, intentionally or due to grave negligence.
- Insurer will be exempted from under paying the insurance amount, provided the Insured Person did not meet any of its damage preventing and/or damage mitigation obligations.
- Insurer will be exempted from under performing the service in respect of the service-types that are described in the Special Conditions in the following cases:
 - **F) In respect of luggage delay (abroad)**, provided the delayed handing out of the luggage occurred due to the failure of the Insured Person or its relative.
 - **M) In respect of inability to travel (cancellation) or deductible part substituting insurances**, provided the payment of the travel fee due based on the travel contract to the travel organiser had not been made till the starting day of the trip the latest.

→ Exclusions

The risk bearing of Insurer does not cover those events, the reasons of which are completely or partially are the following:

- chronic mental state,
 - ionizing radiation,
 - nuclear energy,
 - war, fighting activities, hostile activities of foreign powers, disturbances, coups or coup efforts against the government, rebellion, civil war, revolution, riot, manifestation, demonstration, strike, terror act, workplace disorder, border incident, insurrection,
 - the suicide or suicide attempt of the Insured Person,
 - addictive diseases and events that may be connected to the withdrawal or overdose of medicines, alcohols or drugs (e.g. alcohol poisoning or delirium tremens),
 - the alcoholic condition of the Insured Person at the time when the insurance event occurred. If blood alcohol level was tested, then a blood alcohol concentration in excess of 0.8 ‰ has to be considered an alcoholic condition,
 - consumption of drug, substance of narcotic effect or medicine by the Insured Person, with the exception if they were applied based on the prescription of the therapist, in line with the prescription,
 - on the occasion of the occurrence of a given traffic accident the infringement by the Insured Person of at least two traffic policing rules effective within the given country at the time of the accident.
- From the aspect of the application of this item those acts are especially classified terror acts, which are violent or threatening with violence and dangerous as regards human life, material and immaterial goods or the infrastructure, which are taking a position concerning certain political, religious, ideological, ethnic targets or which are directed at or suitable for influencing any government or at creating fright within the society or within a part of the society.

In case a terror act occurring within the territorial effect of the insurance contract causes without any background an accidental injury for the Insured Person, then Insurer undertakes from among the services of Section A) exclusively the costs of health care transportation home that becomes necessary in connection with the accidental injury concerning all the Insured Persons involved in connection with the given event, in total at most up to the amount limit of 30 million HUF.

Moreover risk bearing **does not cover** the events that occur in the course of executing the following activities, and those events the reason of which is fully or partially due to the execution of the following activities:

- driving a vehicle that does not have a valid registration licence, or the driving of a vehicle for the driving of which the Insured Person did not have the valid driver's licence required,
- carrying on a sport activity in any of the sport branches, in which sport branch the Insured Person is classified as an official or competing sportsman,
- physical work execution (driving a truck that has the required authority permits concerning road transport and the driving of any passenger vehicles or buses are not classified an official physical work execution),
- the exercising of the following activities – classified as dangerous sports as regards the present insurance conditions: auto-motorsport, diving with or without respiratory accessories, rock climbing, mountain climbing, mountain roller skating, artificial wall climbing, any kind of expedition activity, caving, hunting, wild water paddling and rafting, snow rafting, sea kayak, hydrospeed, "banana" towed by motor boat, "air chair" and rubber tube towed by motor boat, jetskiing, waterskiing, wakeboarding, kitesurfing, surfing, windsurfing, sailing, mountain-bike riding, down-hill bicycle riding, mountain-board, trial or BMX bicycle riding, skiing or snowboard riding outside the track, quad (three or four wheel motorcycle) riding, bungee jumping, canyoning, any type of sky or gliding parachuting, paragliding, travelling with aircraft without engine (either as staff or passenger), travelling with aircraft equipped with engine (either as staff or passenger) except travelling as passenger on scheduled air flights operated with prescribed authority permits of passenger transport and travelling on scheduled charter air flights, riding on engine equipped sledges, exercising martial arts and **winter sports, with the exception of the Si-Sztár, Si-Profi, Si-Extra, the Top annual pass and the Top Extra annual pass products**, in the framework of which Insurer undertakes risk bearing in respect of the – non competitive – exercising of winter sports as well,
- usage of any weapon, except – provided the Sport Extra surplus charge is paid – hunting, if the hunting weapon is used lawfully according to the Hungarian legal provisions.
- From the aspect of the insurance conditions the following are classified **mountain climbing**:
 - touring in mountain regions, in case Insured Person leaves the marked out tourist path or if the route passes through a glacier, or the route conditions justify the usage of special gears (e.g. rope securing, crampons, ice-hooks, etc.). Moreover touring along "Klettersteig" ("via Ferrata") type routes and touring beyond 3,500 m above sea level are also classified mountain touring.
 - **if in respect of any of the section of the given route** the above described conditions exist (e.g. a part of the route is "Klettersteig"/"via Ferrata" type or leads through a glacier), then staying at the **other sections of the given route is also classified as mountain climbing**.

From the aspect of the insurance conditions the following are classified **auto-motorsport**:

- using any machine driven means of transport (e.g. motor or vehicle) outside the road or on racing track,
- participation on any auto or motor race or getting prepared, training for it,
- using any vehicle not permitted for being used in road traffic,
- using cross or trial motorcycle,
- participation on any organised motor or car adventure tour or tour race (any publicly announced motorcycle or car route is classified an auto adventure tour the purpose of which is to reach geographic point(s) that are determined by the organisers).

Moreover the risk bearing of Insurer **does not cover the following**:

- consequential damages (e.g. Insurer does not provide any refunding for tours or other services not used due to the occurrence of an insurance event),
- non property damages,
- for those events, which occurred in connection with the fact that in the course of exercising a sport activity the Insured Person did not use the required protective gears or did not observe the rules that are generally accepted in respect of the given sport branch,
- for those events that occurred in connection with the fact that the Insured Person did not observe the prescriptions issued by the authority – competent as regards the place, where the activity was carried out or the prescriptions of the operator of the given facility, or in the case of work executing it did not observe the rules and accident prevention prescriptions concerning the given job scope.

The service providing obligation of Insurer does not cover the refunding of the costs of measures introduced for preventing the damage. Insurer does not undertake any service in respect of any such diseases, in connection with which the Insured Person did not meet the preventive measures (e.g. preventive inoculation, medicines) as recommended by the National Center for Epidemiology/Országos Epidemiológiai Központ/ (www.oek.hu).

Moreover the risk bearing of Insurer does not cover in respect of service-types that are described under the Special Conditions the below defined following cases:

A) Health care assistance and insurance and B) Assistance for continuing the trip, and C) Basic services of vehicle related assistance

The risk bearing of Insurer does not cover the following sicknesses and accidents:

- the reason of which is fully or partially a health condition that existed before the starting of the insurance or before the starting of the trip abroad (e.g. sickness, complaint, symptom),
- with which the Insured Person had been under medical care within six months prior to the starting of the risk bearing or travelling abroad, or if this would have been necessary from medical aspects, independently of the time when the disease was diagnosed.

Moreover risk bearing does not cover:

- psychiatric and psychic diseases,
- control examination, follow up treatment,
- treatment, caring provided by a near relative,
- physiotherapy treatment, acupuncture, as well as treatment, medical exercise provided by natural therapists,
- protective inoculation, routine and screening examinations,
- diseases spreading through sexual activities, immunodeficiency diseases caught through sexual activities (e.g. AIDS) and the related diseases,
- costs related to contact lenses, eye-glasses,
- pregnancy care, pregnancy routine examinations,
- infant care, child care,
- definitive dentistry services, for jaw orthopaedic service (with the exception of accident), for orthodontics, paradontological treatments, tartar removal, tooth replacement, tooth crowns (with the exception of the temporary repair of the broken crown), preparation or repair of any implants or bridges,
- costs that incur after time of arriving home to the territory of the Republic of Hungary.

B) Additional travel assistance „Home-protection” service

The Insurer does not undertake any service, in case:

- the occurrence of the elementary disaster was already known or was probable already at the starting time of travelling abroad, or it was known or probable at such an earlier time, when the trip home could be still modified free of costs (e.g. flood forecast),
- in respect of such damages, which occurred in the real estate in connection with a damage that was caused earlier (e.g. the further damaging of a building or building section that had been already damaged previously).

D) Accident insurance

Insurance concerning permanent health damage originating from an accident

The risk bearing does not cover:

- slipped vertebral disk or other hernia related diseases,
- injuries indicated by strain symptom,
- conditions after joint arthroscopy that healed without any complication,

- accidents in the case of which direct causal connection of anatomic distortion cannot be established with the fresh accident event on the basis of the available medical documents.

E) Luggage insurance

Insurer does not refund:

- damages caused by losing, abandoning, dropping or leaving without any guard luggage or travel documents,
- the value of that luggage, which was stolen not from the trunk of the vehicle (according to Section II. E)1.1. (8) of the Conditions), or in the case of which aggressive intrusion is not documented unambiguously,
- the damage caused in the luggage, if it was caused by stealing the properties left in the vehicle or in its locked roof luggage compartment between evening 8 hours and morning 8 hours local time,
- damage caused due to theft or robbery occurring in the course of camping, if camping did not take place at the a place that had been marked out by the authorities for this purpose,
- damages of losing the data in the case of the damages of data carriers,
- damages that are caused by the luggage or travel document falling into water or becoming damp (independently of the circumstances of falling into the water or becoming damp),
- damages of seizing, confiscation or damages of destroying the properties done by the authorities,
- the consequential damages and indirect losses that are connected to the transport, damaging of the properties,
- damages that originate from the specific character of the properties,
- damages that may be traced back to the construction, manufacturing, material and similar type of hidden defects of the properties,
- the costs of visa replacement,
- damages originating from the failure of any vehicle or its accessories,
- damages that occur in things that are delivered on the vehicle with the application of some external fixing structure (e.g. bicycle holder, roof luggage holder, etc.) and damages that originate from the opening of the roof luggage compartment or its becoming damaged, with the exception of luggage damages or luggage destruction occurring on the occasion of a traffic accident, provided transport was done in line with the effective traffic policing rules and theft damages caused by the breaking up of the locked roof luggage compartment box (opening through the aggressive destruction of the lock structure),
- damages that originate from the lack of necessary packing or its deficiencies and – in case it was done by the Contracting Party/Insured Person himself or his relative – from the improper loading or placement of the items transported,
- damages concerning luggage stored in campers or caravans, with the exception if the damage that was caused at a time when the camper or caravan was used for the purpose of accommodation in a certified manner in a guarded camping site that had a licence issued by the local authorities.

As regards the application of the insurance conditions the following are not classified as luggage (Non insured items):

- jewellery, noble metals, gems, semi-precious stones, or objects that contain these as components or basic substances,
- cash or cash substituting means of payment (e.g. bank or credit cards, etc.),
- vouchers, cards providing entitlement for using the service (e.g. skiing pass, mobile phone charging card),
- savings books, securities,
- travel tickets, documents (with the exceptions of travel documents according to the conditions),
- noble fur, art objects, collections of objects of identical function, art collections,
- bicycle (with the exception of the cases included in the insurance conditions), or any other vehicle or means of transport and their parts, accessories or its fitting items (e.g. car roof luggage holder, roof box, trailer, auto radio, auto tape recorder, auto CD player, motorised luggage storing box),
- sport gears, with the exception of cases described under the insurance conditions,
- firearms and ammunition, music instruments, furniture,
- artificial teeth, artificial set of teeth, orthodontics,
- sunglasses and any other non dioptric glasses, contact lenses,
- those travel documents, watches and any other technical articles or mobile phones and their accessories, which the Insured Person does not take with himself as hand luggage into the passenger space of the airplane on the occasion of air travel, or in the case of travelling with vehicle he leaves it the luggage compartment of the vehicle,
- any kind of computers of any size (e.g. laptop, notebook) and their accessories,
- key, electronic remote controller devices,
- food products, tobacco products and means connected to smoking (e.g. pipes, cigar cutter, pocket lighter, etc.),
- tools used for executing work or any item that is transported with the purpose of non individual use (e.g. goods samples and items that are transported in a commercial quantity, that is in a quantity that exceeds the personal need of the Insured Person)

I) Provision of assistance and insurance concerning legal protection

- risk bearing of Insurer does not cover money penalties, fines established at the expense of the Insured Person or other costs and expenses burdening the Insured Person.
- Insurer will not provide any service or may refuse to issue its preliminary consent if:
 - a procedure had been started against the Insured Person due to rule infringement or negligent criminal act committed by him as the user of the vehicle, and the given vehicle at the time of committing the act did not have a valid liability insurance,
 - the Insured Person drove the vehicle without the permit of its owner or without a valid driver's licence or a registration licence and a traffic accident occurred,
 - a procedure is started against the Insured Person due to the well founded suspicion of intentionally committed criminal act, hit and run accident, neglecting to provide assistance,
 - the earlier signed legal protection insurance of the Insured Person covers the insurance event that is defined in the present condition.

J) Liability insurance and K) Hotel and camping liability insurance

The Insurer will not refund:

- damages, which are based on a guarantee obligation that is undertaken in a contract or unilateral statement that is more strict than the liability of the Insured Person defined in the legal provision,
 - any penalty, money fine, other penalising type of costs and the representation costs of damage causing party connected to this,
 - the damage, which is caused by the Insured Person through committing a criminal act,
 - the damage, which was caused by the Insured Person to his relative,
 - damages that lead to the contamination of the environment or which cause environmental harms.
- the damage that was caused by Insured Person with such activity of his, which is tied to an authority permit, and Insured Person executed the given activity without such a permit,
- in case the Insured Person caused repeatedly damages with the same damage causing circumstances, and in spite of the notice given by Insurer he did not terminate the circumstances of damage causing, in spite of the fact that they could have been terminated,
 - the damage, if Insured Person was notified about the possibility of the occurrence of the damage event by a third party, and subsequently the damage event occurred in the lack of the measure that would have been needed,
 - damages that occurred in items that had been rented, held under leasehold, borrowed or taken over for retaining by Insured Person,
 - damages that had been caused by the gradual emission or impact of temperature, gases, steams, liquids, dampness or non atmospheric precipitations, as well as by nuclear events and radioactive contamination,
 - damages caused by items getting lost, their being lost, their being stolen.
 - damages caused by breaches of contracts.

L) Vehicle related assistance – Auto Extra package

The risk bearing of Insurer does not cover the inability of moving the vehicle, in case:

- the vehicle is used for business purpose passenger or goods transportation,
- the vehicle is used as a rented car,
- in case the inability of the vehicle to move is the consequence of the fact that the maintenance of he vehicle was not done according to the operation prescriptions effective as regards the given vehicle type, or if it was not done at the prescribed time (e.g. oil replacement, replacement of brake pads etc.).

The service providing obligation of Insurer does not cover the following:

- **repair costs of the insured vehicle**,
- the transportation cost of the luggage of the passengers, provided the luggage cannot be transported together with the Insured Person (e.g. due to its size or mass),
- damages that were caused by a company independent of the Insurer, which executed the repair-fitting or transportation works.

Insurer does not undertake the performance of the Auto-Extra services in case EUB-Assistance had not been notified without delay about the occurrence of the insurance event due to own fault, and the services were not organised by the EUB-Assistance or it did not give its prior consent to its usage.

M) Inability to travel (cancellation), trip interruption and deductible part substituting insurance

The risk bearing of Insurer does not cover the following:

- the amount of the airport fee („tax”),
- the costs of facultative programs, services,
- consequential damages.

The risk bearing of Insurer does not cover those sicknesses or accidents:

- in the case of inability to travel the reason of which is fully or partially a health condition that existed prior to the starting of the insurance or the reservation of the travel service, and in the case of the interruption of the trip it existed prior to the starting of risk bearing (e.g. sickness, complaint, symptom),
- with which the person, due to whom the trip was cancelled, or due to whom the interruption of the trip took place was under medical care within one year prior to the starting of the risk bearing or the signing of the travel contract, or this would have been necessary from medical aspects, independently of the time when the sickness was diagnosed.

Moreover risk bearing does not cover such inability to travel, the reason of which are:

- psychiatric and psychic diseases,
- control examination, follow up treatment,
- diseases or accidents, due to which they applied exclusively physiotherapy treatment, acupuncture, treatments that were provided by physiotherapists or natural therapists. Those cases are exempt from under this, when one of the above treatments had been applied on the basis of preliminary medical examination, on the basis of the recommendation of the doctor.
- diseases spread through sexual activities, immunodeficiency diseases obtained through sexual activities (e.g. AIDS), and diseases that are connected to this,
- pregnancy, in the case of usual symptoms of pregnancy, birth, with the exception of the case that is determined in Section M)1.(i) of Special Conditions II. However the risk bearing of insurer **does not cover** the cancellation of travel or interrupting the trip in connection with pregnancy or birth even in the case of pregnancy complications, in case the starting time of the trip is a time that follows week 27 of the pregnancy. Risk bearing of insurer does not cover that case either, when the given trip would not have been recommended by the doctor even in the case of an undisturbed pregnancy and the trip was reserved in the knowledge of the fact of pregnancy,
- the termination of a work relationship, provided:
 - it took place at an employer, at which at the time when the risk bearing started a bankruptcy or winding up procedure was in process, or if a liquidation procedure was initiated against the employer, on the basis of which liquidation was actually ordered,
 - if the exerciser of the employer rights is a close relative of the Insured Person or if the Insured Person has a majority influence in the given employer according to Section 685/B of the Civil Code,
 - termination of the work relationship during a trial period,

– if it takes place with regular termination initiated by employer in connection with going on old age or invalid pension,
– it was already known by the Insured Person prior to the starting of the risk bearing.
Risk bearing of Insurer does not cover such events that have a casual relationship with an event that occurred in the course of a competition related sport activity or training. Any sport activity is classified a competition related sport activity in which the Insured Person participates as a professional or non professional sportsman (e.g. championship, match) as a contestant, independently of the character of the competition. The risk bearing of Insurer does not cover that case either, when the competent authority refuses issuing the permit that is needed for travelling into any of the countries involved in the trip, or if it does not issue it till the planned start of the travel service, or if the Insured Person does not have the personal documents needed for the travel at the planned start of the trip, or if these documents are invalid (with the exception of the contents of Section II.MI).1.g)).

N) Flash Doctor data saving service

With the exception of the organisation of the transport or repair of the data carrier the risk bearing of Insurer does not cover the costs of the transportation and separately requested **data saving** of the data carrier in the case of the existence of the following reasons:

- the overcoming, repair of the damages may be claimed on the basis of another contract (e.g. transportation, maintenance, passenger insurance contract, law prescribed or manufacturer warranty);
- placing, forcing such foreign objects into the data carrier that are not desirable from the aspect of using the data carrier;
- disassembly, transformation the data carrier;
- if at the time of data loss the flash card was not under the guard of the Insured Person.

→ Territorial effect

The effect of the insurance contract covers **abroad**.

From the aspect of the insurance contract the following are classified as Europe:

Albania, Andorra, Austria, Belgium, Bosnia & Herzegovina, Bulgaria, Czech Republic, Denmark, United Kingdom, Estonia, Belarus, Finland, France, Greece, Netherlands, Croatia, Ireland, Iceland, Poland, Latvia, Lichtenstein, Lithuania, Luxembourg, Macedonia, Malta, Moldova, Monaco, Montenegro, Germany, Norway, Italy, Portugal, Romania, San Marino, Spain (including **Canary Islands** as well), Switzerland, Sweden, Serbia, Slovakia, Slovenia, Ukraine, Vatican its part that belongs to the geographical Europe, and the complete territory of **Cyprus, Egypt, Morocco, Turkey, Tunisia**.

– **Territories undertaken with World-1 extra fee:** countries outside Europe, with the exception of USA, Canada, Australia, New Zealand, Africa, for which latter ones World-2 extra fee has to be applied.

– **Territories undertaken with World-2 extra fee:** USA, Canada, Australia, New Zealand, Africa (with the exception of: Egypt, Morocco, Tunisia)

The **territorial effect of the insurance contract does not cover the territory of such countries or regions**, which are included among the **travel target countries and regions not recommended by the Ministry of Foreign Affairs of the Republic of Hungary** either on the first day of risk bearing or on the day when Insured Person enters the given country (See www.kulugyminiszterium.hu).

Moreover the territorial effect of the insurance contract does not cover the **territory of the country of the citizenship of the Insured Person** (with the exception of the cases that are determined in the insurance conditions), and the territory of the Antarctic.

The **territory of foreign representations** is not classified the territory of the represented state from the aspect of the insurance contract, but it has to be considered to be the territory of the country in which it is geographically located.

In respect of services that refer to the **inability to travel (cancellation), the interruption of the trip or to the deductible part substitution** (Section (MI) the territorial effect of the insurance covers all the countries of the world, with the exception of the territories or countries that are not recommended by the Ministry of Foreign Affairs of the Republic of Hungary.

As regards the **Flash Doctor data saving insurance** the territorial effect of the insurance also covers the insurance events that occur within the territory of the Republic of Hungary.

→ Definition of the insurance event and the services of the insurer

The detailed description of the services is included in Insurance Conditions marked EUB2011-01U2!

A) Health care assistance and insurance

In the case of the sickness or accident of the Insured Person requiring emergency service Insurer undertakes to refund the medical and rescue costs that are needed within the framework of emergency service, and the implementation of transporting home as medically justified.

B) Additional travel assistance

In the case of the sickness or accident of the Insured Person requiring emergency service, the refunding of the travel and accommodation costs connected to health care services, and the other auxiliary services in the cases that are listed in the insurance conditions.

C) Vehicle assistance basic services

In the case of a vehicle that is incapable of movement Insurer will provide information concerning contacting a car rescue company, and in the framework of Driver Sending Service it will send a vehicle driver, in case the Insured Person receiving an emergency service is unable to drive his vehicle home in connection with the accident or disease he endured.

D) Accident insurance

In the case of **accidental death** Insurer provides a service of the amount that is defined in the contract, for the beneficiaries.

In the case of permanent **health damage originating from an accident** of an extent that exceeds 25 %, which occurs within 2 years after the occurrence of the insurance event Insurer pays that part of the amount that is defined in the insurance contract (100 %), which is proportional to the degree of invalidity.

Insurer will pay **accidental hospital daily refunding**, in case the Insured Person's accident emergency hospital service will be continued even after he has returned home. The amount of the service depends on the number of days spent in the hospital.

E) Luggage insurance and replacement of the travel documents

Insurer undertakes a service for the luggage that is owned by the Insured Person in the following cases:

- damages related to accidents that require emergency medical service (e.g. damaging of the clothing),
- injuries connected to traffic accidents,
- injuries caused by elementary damages,
- theft, robbery
- in the case of air luggage damage, supplementing the compensation that is paid by the air company

F) Luggage delay abroad

In the case of a determined duration delay of air luggage, Insurer will refund the amount of the purchases that were justified because of the delay, based on the submitted invoices.

G) Flight delay abroad and at the time of arriving home

Abroad:

In case the scheduled air flights are late with at least 12 hours, Insurer will refund the amount of emergency purchases that are justified and certified by invoices.

Upon arrival home:

In case the scheduled flight arrives to the Hungarian airport with at least a 2 hours delay, and due to this it is already not possible to travel home in the originally planned manner (e.g. the lack of public transport or because of being late for the train or bus transport), then Insurer refunds the justified transport and accommodation extra costs against invoices.

H) Missing a flight because of delay due to a traffic accident

If the vehicle with which Insured Person travels within 12 hours prior to the starting of the scheduled flight participates in a traffic accident and due to this Insured Person because of being late misses the flight for which he had a valid ticket, then Insurer will refund the costs of modifying the air ticket or – if modification is not possible – then the costs of purchasing an air ticket or a ticket for another means of transport for travelling within 24 hours to the same destination station.

I) Legal protection assistance and insurance

In case Insured Person as the user of a vehicle, as a pedestrian or as an amateur sportsman abroad commits a rule infringement or negligent criminal act, and due to this a procedure is started against him at the place where he committed the act, then Insurer will refund the work fee of the lawyer taking care of legal representation, the fee connected to the procedure, the litigation cost, the procedural cost, the remuneration of the witnesses and experts, the necessary translation costs, as well as the travel costs of the Insured Person.

Moreover Insurer pays the bail that is established by the competent authority.

J) Liability insurance

In case the Insured Person causes a personal injury neglectfully abroad to a third party by his activity done in the below listed functions, and a compensation liability has to be borne by the Insured Person, as the damage causing party in connection with material damages or in connection with personal injuries or in connection with the health care costs of the damaged person connected to this, then Insurer will refund the amount of compensation justly claimed from Insured Person in connection with this.

Risk bearing covers the following activities:

- user of a bicycle or a transport or delivery means that is not classified a vehicle,
- pedestrian causing a road accident,
- amateur sport activity (with the exception of dangerous sports)

K) Accommodation and camping liability insurance

Insurer undertakes the refunding of the compensation obligations that are due to material damages caused to the hotel by the Insured Person as an individual.

L) Vehicle related assistance – Auto Extra package

It refers to such a vehicle of the age of at most 10 years, used by the Insured Person lawfully, which may be operated with driver's licence valid for either A or B category vehicle. The Insurer in case the vehicle is incapable of movement undertakes services for transporting the vehicle to the service station, in case the vehicle cannot be repaired at the site within 5 workdays, then for transporting it home and for travel and transport costs of the passengers that are classified as Insured Parties.

M) Insurance concerning inability to travel (cancellation), the interruption of trips and the substitution of deductible parts

As regards cancelling a trip, Insurer will refund in the case of the certified and documented inability to travel of the Insured Person (sickness, accident, death) the cost invoiced by the travel office or the price of the cancelled air ticket with the exception of the deductible part that has to be paid by the insured person.

As regards interrupting a trip the insurer will refund the price of the services that had not been used in the case of a trip interruption that occurred because of the certified sickness, accident of the Insured Person.

In the case of deductible part substitution insurance, Insurer will refund the deductible part of the cost not covered by the inability to travel (cancellation) insurance contract that was signed for the cancelled travel service.

N) Flash-Doctor data saving insurance

Insurer in the case of data loss occurring on the flash card insured (e.g. due to damage, or incidental deleting) will organise through the service provider the saving of data concerning the data that are located on the flash card.

In case of a successful data saving the insured person has to cover the deductible part that is defined in the insurance contract.

→ Lapsing time

After the day when the insurance event occurred. In case reporting the insurance event is done within this period, then the lapsing time is 2 years after the time of the receipt of the last legal statement that was made between the Insurer and the Contracting Party or the Insured Person or other entitled party. The stipulated lapsing time deviates from the general lapsing time included in Section 324 (1) of the Civil Code.

CLIENT INFORMATION

The European Travel Insurance PLC started its operation on the Hungarian insurance market on January 1, 1997.

Its headquarters is located at: 1132 Budapest, Váci út 36-38. Phone: (36-1) 452-3580, fax: (36-1) 452-3312.

Company Registry Number: 01-10-043228, it was registered at the Court of the Metropolitan of Budapest, as the Court of Company Registered capital of the company: 400 000 000 HUF

Owners of the company:

Generali-Providencia Biztosító Zrt.

Europäische Reiseversicherung AG, München

Europäische Reiseversicherung AG, Vienna

61 %

26 %

13 %

Please read carefully the general and special insurance conditions referring to the insurance services you selected. We draw your kind attention to the fact that the insurance conditions represent an integral part of your insurance contract, since these conditions contain the characteristics of the insurance contract you intend to sign, as well as the rights and obligations of the contracting parties. Our product information document issued about the main features of the conditions of the insurance contracts does not substitute the contractual conditions.

In case in connection with the insurance contract to be signed or an insurance contract that had been already signed you have any questions or problems, then your insurance agent or – in the lack of having an agent, but independently of the agent as well – our client service is pleased to be at your disposal at the address of: 1132 Budapest, Váci út 36-38. (entry from the side of Csanády u) from Mondays till Thursdays between 8.00 and 17.00 hours, and on Fridays between 8.00 and 14.30 hours personally or through phone at phone number (1) 452-3580. Further information is available at the website of www.eub.hu as well.

If you have any complaints as regards the behaviour, activity or the negligence of our insurance company, you may present your complaint both verbally and in writing. If you wish to present your verbal complaint personally, then please visit our client service office at the above given address and times, but you may complain over phone as well at the above given client service phone number, where we will record the phone discussions, in line with the prescriptions of the legal provisions. You may hand over your written complaint personally or through another person at the client service of our insurance company, moreover you may send it by post or you may send it by fax to the fax number of (1) 452-3312 or through electronic mail to the email address of ugyfelszolgalat@eub.hu.

The supervisory organisation of the insurance company is: Hungarian Financial Supervisory Authority (1013 Budapest, Krisztina krt. 39.) (hereinafter referred to as: Supervision), central postal address: 1534 Budapest, BKKP Pf. 777, central phone number: (36-1) 4899-100, central fax number: (36-1) 4899-102, phone number of the client service of the Supervision: 06-40-203-776, email address: ugyfelszolgalat@pszaf.hu. We draw your attention to the consumer protection website of the Supervision (www.pszaf.hu/fogyasztoknak), to the information available there as well as the applications available there that facilitate comparison.

The very essential rules concerning the consumer rights, their enforcement, and the institution system of consumer protection are included in Act CLV of year 1997 on consumer protection.

The Supervision inspects, as the consumer protection authority, in respect of the activity of our insurance company whether we observe

– the consumer protection provisions prescribed in the legal provisions that are defined in Act CLVII of year 2010 on the Hungarian Financial Supervisory Authority, defining the obligations concerning the behaviour that has to be exercised in connection with the consumer,

– the provisions of Act XLVII of year 2008 on prohibiting unfair commercial practices in respect of the consumers,

– the provisions of Act XLVIII of year 2008 on the basic conditions and specific limits of business advertising activities,

– the provisions of Act CVIII of year 2001 on the specific issues of electronic commercial services and services connected to the information society,

– the obligations concerning financial consumer legal disputes

and in case these are infringed it may conduct a consumer protection procedure.

The Supervision is not authorised to act in respect of legal disputes connected to the signing, validity, legal effects and termination of insurance contracts and to the breaches of contracts and its legal impacts.

In the interest of settling possible consumer legal disputes connected to the signing and performing of insurance contracts outside court procedures you may submit an application in writing to the Financial Conciliatory Body //Pénzügyi Békéltető Testület// (Postal Address: 1013 Budapest, Krisztina krt. 39.) of the Hungarian Financial Supervisory Authority. It is a prerequisite of starting the procedure of the body that consumer should try to directly settle its case of complaint with the Insurance company.

Moreover, we wish to inform you that based on Act LV of year 2002 on mediatory activities you may initiate a mediating procedure as well. Beyond this the consumer may enforce its claim originating from the insurance contract through the court as well. As regards court procedures the provisions of Act III of year 1952 on the Code of Civil Procedure have to be applied.

We wish to also inform you that it is possible to sign at our insurance company a legal protection insurance against the payment of an insurance fee. We ask you to carefully study its conditions that are included in the effective passenger insurance conditions.

We inform you that our Company manages the personal data of the insured person (contracting party, beneficiary, and claimant) and his data connected to the contract as insurance secret, and it may disclose it to third persons only with the written consent of the person involved. At the same time we inform you that data representing insurance secret may be disclosed in the cases that are listed item by item in Act LX of year 2003 on insurance companies and insurance activities and to the following organisations that are defined therein:

- a) supervision acting within its responsibility scope, b) prosecution and investigating authority, acting in the framework of a criminal procedure in process, c) court participating in a criminal, civil, liquidation or bankruptcy procedure or an independent court executioner acting in respect of a case of execution, d) notary public acting in a case of inheritance, e) the tax authority in cases defined by law, f) the national security service acting within its responsibility scope, g) insurer, insurance broker, special consultant, the Hungarian representation of a third country insurer, independent insurance broker or special consultant and their interest representing organisations, and the Hungarian Competition Authority acting within its competition supervision responsibility scope concerning insurance, insurance mediating, special consulting activities, h) custodian authority acting within its responsibility scope, i) the health authority included in Act CLIV of year 1997 on health care, j) in case the special conditions defined in a separate act exist, then the organisations that are authorised to apply special secret service means to collect secret information, k) reinsurer, and in the case of joint risk undertaking the risk undertaking insurer, l) in respect of data handed over in the course of data forwarding regulated in the insurance act, the policy recording registry organisation, m) in respect of an insurance contract portfolio handed over in the framework of portfolio transfer, the insurer that takes over the portfolio, n) in respect of data needed for damage settlement and enforcing refunding claims, moreover in connection with handling these over between each other, the organisation managing the Indemnification Account, the National Office, the correspondent, the Information Centre, the Indemnification Organisation, the damage settlement agent and the damage representative, and the damage causer, in case exercising its "freedom of self-determination" it wishes to have access to the repaired related data of the other vehicle involved in an accident from the damage reported minute of damage settlement related to his road traffic accident, o) the executor of the outsourced activity in respect of data needed for executing outsourced activities, p) in the case of a branch office – if the conditions of data management meeting the requirements prescribed by the Hungarian legal provisions are met in respect of each data, and the state of the headquarters of the third country insurer has a data protection legal provision that meets the requirements prescribed by the Hungarian legal provisions – the third country insurer, insurance broker, specialist consultant, q) Parliamentary commissionaire acting within its responsibility scope, r) as regards the damage history data and the bonus-malus system defined in the provision on the detailed rules of the bonus-malus system, classification under this system and the certification of damage events in the cases that are regulated in the provision against the insurer, if the organization or person indicated in points a)–j), n) and r) turns to it with a written request containing the name of the client or the indication of the insurance contract, the type of the data requested the purpose and the legal basis of requesting the data, with the condition that the organisation or person indicated in Points k), l), m), p) and q) is exclusively obliged to indicate the type of the requested data, the purpose of requesting the data and its legal basis. It is also to be deemed to be the certification of the purpose and legal basis if the legal provision authorising the learning of the data is mentioned.

Moreover data representing insurance secret may be disclosed in the following cases as well:

- a) upon the written request of the investigating authority, the national security service and the prosecution if there is any data that indicates that the insurance transaction is connected with drug misuse, terror activity, explosive material or explosive substance misuse, firearm or ammunition misuse, money laundering, criminal act committed in criminal co-operation or criminal organisation according to the contents of Act IV of year 1978 on the Criminal Code,
- b) upon the written request of the Hungarian crime fighting organisation or the National Police Headquarters, if it acts within its responsibility scope defined in Act XV of year 2003 on the prevention and stopping of money laundering, or on the basis of international obligation undertaking in the case of the written request of a foreign crime fighting organisation or a foreign Financial Information Unit, in case the request contains the confidentiality clause signed by the foreign data requesting party,
- c) towards third country insurer or third country data processing organisation (third country data manager), if the client (data subject) consented to it in writing and at the third country data manager the conditions of data management meeting the requirements prescribed by the Hungarian legal provisions are met in respect of each data and the state of the headquarters of the third country data manager has a data protection legal provision that meets the requirements that are prescribed by the Hungarian legal provisions,
- d) in the case of a branch office to the supervisory authority of the headquarters/main office of the enterprise having a foreign headquarters, for the purpose of the supervisory activity, if it meets the prescriptions that are stipulated in the agreement between the foreign and the Hungarian supervisory authorities,
- e) data that are not classified personal data for the purpose of establishing the foundations of law making and for studying the impacts to the Ministry of Finance,
- f) to the Supervision in the interest of meeting the legal provisions that refer to supervision implemented on merged basis and supplementary supervision.

Moreover we wish to inform you that Europe Assistance Kft. (1134 Budapest, Dévai u. 26–28.), as the agent of European Travel Insurance PLC implements for our insurance company, in the framework of outsourcing, assistance service connected to the damage settlement activity. In connection with this our company on the basis of the authorisation of law may hand over data and information concerning the damage event to Europ Assistance. Europ Assistance Kft. has all those technical, security and organisation means which exclude unauthorised access to the data, the unauthorised usage of the data, moreover any kind of misusing them.

Insured Person is entitled to receive information about his personal data managed by us, and upon his request our Company will record all the requested data modifications. The detailed provisions concerning data management implemented by Insurer are included in the general insurance conditions.

Insurer and Europe Assistance undertakes contact keeping with the Insured Person or the person acting on behalf of the Insured Person in Hungarian or English language. In the cases of dispute the statements made in Hungarian language will prevail.

The Hungarian legal provisions will be applied as regards the insurance contract, the co-operation and information providing obligation preceding it, and all the claims that are related to the insurance contract, provided parties do not agree otherwise or any legal provision does not prescribe it elsehow.

Budapest, November 2, 2011

European Travel Insurance PLC

EUB ASSISTANCE – 24 HOUR SERVICE

+36 1 465 3666



Generali information - EUB Client Service: 1132 Budapest, Váci út 36-38. • Tel.: +36 1 452 3580 • www.eub.hu • ugyfelszolgalat@eub.hu

The detailed information concerning the insurance products is included in the insurance conditions marked EUB2011-01U2 available in Hungarian on www.eub.hu and at the offices of the sales partners of the Insurance Company.