

Services:

The following benefits are included on the basis of the General Terms and Conditions

BENEFITS	
24h EMERGENCY LINE 🕿 +36(06)-1-814-9500	
Worldwide emergency service: 24 hours a day - 365 days per year in case of illness, accident, prosecution, los cheques	s of travel documents / traveller's
CANCELLATION	
Reimbursement of cancellation costs due to a reason stated in the General Terms & Conditions Excess: 5.000 HUF per person per incident	Up to 1.250.000 HUF
DELAY PROTECTION	
Reimbursement in the case of missed outbound flights due to airport shuttles being delayed. Reimbursement of extra costs due to delayed arrival at the home airport Excess: 13.000 HUF	Up to 100.000 HUF
Reimbursement in case of delayed departure (delay caused by airline)	Up to 40.000 HUF
HEALTH INSURANCE ABROAD	
Expenses for medication, medical treatment and hospitalisation including home and / or emergency transportation for medical reasons or after 3 days in hospital	Up to 37.500.000 HUF
Repatriation in case of death or	100%
optional funeral expenses	Up to 187.500 HUF
SEARCH AND RESCUE	
Costs of search and rescue operations	Up to 3.750.000 HUF
LUGGAGE INSURANCE	
Current value in case of robbery, theft or damage by the transporter Excess: 19.000 HUF per person	Up to 500.000 HUF
PERSONAL PUBLIC LIABILITY	
Property and personal damage, comprehensive Excess: 19.000 HUF per incident	Up to 50.000.000 HUF

Insurer
AGA International S.A.
Hungarian Branch Office
Budaörs, Szabadság út 117, H-2040
Company reg.number: 13 17 000129,
Tax number: 23837324-2-13

Contact-Service Center
We will be more than happy to provide further information regarding travel insurance:

***** +36 (06) 23 50 7416

⊠ugyfelszolgalat@mondial-assistance.at

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Customer Information:

Please note

The Aer Lingus Travel Insurance including Cancellation

- → is valid for one trip and one person
- is valid for the duration of one trip (from departure to return), but a maximum of 31 days. In case of One-way trip the coverage ceases after 24 hours of the respective Aer Lingus flight departure
- → is valid for travels Worldwide.
- → is valid, if it has been taken out at the time of booking your flight and is documented on your booking confirmation and if the premium has been paid.
- → can only be purchased in connection with an Aer Lingus online-ticket and only for the respective flight/travel

Withdrawal rights:

The Aer Lingus Insurance can be cancelled within 14 days after booking with Aer Lingus if the trip has not started yet and no claim has been raised.

Deadline for purchasing this insurance

Immediate coverage exists, if the policy has been taken out on the day of booking of the trip, irrespective of the period of the remaining time until departure. In case of delayed insurance arrangement, only events occurring after a 10 days grace period are insured (Exception: accident, death, elementary damage). If the booking is confirmed only 31 days before departure cancellation protection is constituted only if the insurance policy is taken out simultaniously. There is no further grace period granted.

Health insurance abroad

Reimburses the cost for medically necessary treatment abroad up to the maximum amount stated:

- → Medication, medical treatment and hospitalisation
- → The costs of overnight stays of a relative to travel to the insured
- → repatriation in case of death or optional cost of funeral on location/place of death

Luggage Insurance

- reimburses the time value of your luggage in case of robbery, theft, damage or loss up to the max. amount stated;
- → If the delay in delivering the luggage to the holiday location exceeds 12 hours, the cost of purchasing new items that are absolutely essential.

24h Emergency Line

offers immediate help in case of an emergency (illness, accident or death) abroad. Call the Mondial Assistance 24h emergency line +36(06)-1-814 9500.

Important!

- → Have the exact address and phone number of your residence ready.
- + Have the names of your contact persons on behalf of the police, hospital, offices.
- Report incidents and provide further details for assistance service (e.g. the exact name and address of your bank, in case of loss of credit card the number of your account, card number.)

If the insured is imprisoned or threatened with imprisonment, the 24-hour emergency call center will help to obtain a lawyer and an interpreter and also raise any bail that may be required. In case of an unforeseen event the 24h Emergency Line informs your relatives if desired.

All listed benefits are offered according to the general terms and conditions that are available on www.mondial-assistance.hu. Oral agreements are invalid. Changes to the offered premiums, tariffs and conditions need written approval by the insurer. Premiums include insurance tax, no other fees are taken. Hungarian law applies to the insurance contract. Insurance cover is valid for the persons stated on the travel confirmation and after payment of the premium.

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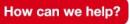
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Claims Handling:

1. Cancellation:

- → Cancel your trip with your airline/service provider
- File your claim within 48 hours to the Mondial Assistance claims department in written form preferably via E-Mail to karbejelentes@mondial-assistance.at
- > Required documents for the subsequent claims handling:
 - ★ Policy document/proof of insurance
 - ★ Booking confirmation
 - ★ Cancellation notice made out by airline/service provider
 - ★ Original documents giving proof to the claim (e.g. medical report)

2. Luggage Insurance:

The insured person is obliged to inform the airline (right in the luggage delivery hall) about the delay/non-delivery of the piece(s) of luggage. The airline will issue a confirmation that you have to pass on to Mondial Assistance.

3. Required documents for the subsequent claims handling:

- → Policy/proof of insurance
- → Booking confirmation
- → Original documents giving proof to the delay or loss

4. Additional information needed:

- → Bank account number and address of the account holder
- → Details on other insurances (e.g. creditcards, motoring association, health insurance,...)

Send your documents to

AGA INTERNATIONAL S.A. Magyarországi Fióktelep Budaörs Szabadság út 117. B.épület IV.emelet 2040

karbejelentes@mondial-assistance.at

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AGA International S.A.
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□ segelykozpont@mondial-assistance.at



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INSURANCE CONDITIONS

(General conditions of insurance)
Valid from 1 February 2012

AGA International SA, Branch office for Hungary - 2040, Budaörs, Szabadság út 117.B.ép. 4.em. ORCO Business Park Telephone: +36 (06) 23507426 - Fax: +36 (06) 23507414 Email: ugyfelszolgalat@mondial-assistance.at - www.mondial-assistance.hu

Bank details: UniCredit Bank Hungary Zrt., IBAN: HU96 1091 8001 0000 0129 1222 0007, SWIFT: BACXHUHB,

Reg.nb:13 17 000129, Tax nb: 23837324-2-13

Important: These insurance conditions in English are for information purposes only. Only the current insurance conditions in the https://nungarian.language-version are an integral part of the contract. Hungarian language only will be used to make claims, to issue the policy, to process claims, etc. Only those parts of the insurance conditions apply, which correspond to the relevant range of services of the chosen insurance package. Applicable law and place of jurisdiction: Any dispute or claim arising out of or in connection with the insurance contract shall be governed by the law of Hungary. The place of jurisdiction is Budapest.

GENERAL CONDITIONS FOR ALL LINES OF INSURANCE

I Insured events

The insured events in the individual insurance lines are listed exhaustively. An extension analogously to similar events not listed shall be excluded.

II Agents or assistants

No agent is authorised to make oral or written auxiliary agreements to provide insurance cover that varies from the general and additional insurance conditions or to make an assessment of facts that is binding for the insurer. Additional conditions or variations are only valid if they are set out in writing and produced by the insurer on behalf of the company.

1. Insured persons / exclusions

1.1 The persons designated in the policy provided that, at the time the insurance was taken out, they have had their regular place of residence in Hungary, Switzerland, Liechtenstein or a State of the European Union (EU) for at least six months.

In the family insurance up to max. 2 adults and 5 minors can be named as coinsured in the policy, regardless of their degree of relationship.

- 1.2. No insurance cover exists for events in relation to -
- 1.2.1. Psychological illnesses and diseases of the nervous system (excluding the first occurrence with in-patient treatment after the reservation has been made and the policy taken out); organ transplants (dialysis); HIV+, mental or physical disabilities:
- 1.2.2. The following illnesses and existing complaints as they pertain to cancellation of travel, curtailment of travel and foreign travel treatment costs where the insured has received treatment for these complaints as an in-patient and/or outpatient within the 12 months prior to the insurance being taken out. Heart diseases; stroke; cancer; diabetes (type 1+2); migraine, epilepsy, multiple sclerosis;

2. Insurance period

Insurer

AGA International S.A.

Hungarian Branch Office

Tax number: 23837324-2-13

Budaörs, Szabadság út 117, H-2040

Company reg.number: 13 17 000129,

2.1. Line of insurance – Cancellation cover

Insurance cover starts when the insurance policy is taken out and ends with commencement of travel. The insurance policy must be taken out and the premium paid for insurance packages containing cancellation insurance cover on the day travel is booked. If the policy is taken out at a later date, only events are insured which take place after the 10th day following purchase of the policy (exception: accident, death, elementary event). If insurance cover is taken out less than 31 days before commencement of travel, cancellation insurance is only provided if the insurance policy is taken out at the same time as travel is booked. Within 30 days of travel it is no longer possible to take out a policy retrospectively including cancellation insurance.

2.2. In the other lines of insurance the insurance cover only comes into force if the premium is paid before the start of travel and lasts from the time of commencement of travel known at the time the cover was taken out until the end of the period of travel but up to a maximum travel duration selected with the insurance tariff.

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If the date the policy is taken out and the start of insurance are identical, insurance cover will start at 0.00 hours on the following day.

3. Scope of insurance

According to the agreed scope outside Hungary or country of residence (exception: luggage insurance also applies in Hungary, outside the permanent place of residence and work).

4. Insurance sum

The insurance sum of the respective line of insurance limits all benefits for insured events which occur during the insurance term.

If the insurance cover applies to more than one trip, the respective insurance sum represents the max. cover for all occurrences of damage overall within a line of insurance (cancellation cover, luggage, treatment costs, etc.) for the duration of the term of insurance (exception: Annual Travel Cover).

5. Claims against third parties

All insurance benefits are subsidiary, i.e. they will only be paid unless they cannot be reimbursed from other existing cover (e.g. private or social insurance policies).

6. Events that are not insured

In addition to the general exclusions from insurance cover listed below, special exclusions also exist in the respective lines of insurance.

- 6.1. No insurance cover exists for events which have been caused as follows:
- 6.1.1. As a result of deliberate or grossly negligent acts by the insured;
- 6.1.2. Directly or indirectly in connection with unrest, war events or terrorism of any kind
- 6.1.3. As a result of a strike;
- 6.1.4. Through violence resulting from a public meeting or demonstration, if the insured has been an active participant;
- 6.1.5. As a result of the suicide or attempted suicide initiated by the insured;
- 6.1.6. Resulting from orders by the authorities;
- 6.1.7. Directly or indirectly as a result of the influence of ionising radiation as defined by the current version of the Radiation Protection Law or nuclear energy;
- 6.1.8. The insured is suffering from impairment caused by alcohol, addictive drugs or medicine or if a prescribed course of treatment has not been followed;
- 6.1.9. The claim is caused by motor sports competitions (time trials and rallies) and training associated with these events;
- 6.1.10. Conditions that were already in existence or were expected at the time the insurance was taken or at the time the journey was booked or at the time the journey was started; this also applies to existing medical conditions.
- 6.1.11. Occurred as a result of epidemics and pandemics;
- 6.1.12. Travel that commenced or was not interrupted immediately in spite of travel warnings issued by the Foreign Office.
- 6.1.13. Directly or indirectly as a result of a natural catastrophe, seismic activity or the effects of the weather.
- 6.2. No reimbursement will be made for loss of enjoyment during the holiday.

Procedure in the event of a claim

In addition to the general obligations listed below, particular obligations exist in the respective lines of insurance. The insured has an obligation to observe the following procedure, otherwise the insurer has a right to deny benefits or claims:

To keep the losses to a minimum and to avoid unnecessary costs;

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- 7.2. To indicate the losses directly to the insurer and to follow the insurer's instructions:
- 7.3. To present the occurrence and extent of the damage truthfully and to furnish proof. The insured must provide any information that is relevant to the matter and submit original invoices or original
 - receipts. If applicable, doctors and/or hospitals as well as social insurers and public bodies involved are to be authorised and requested to provide the information required and the insurer is to be allowed to verify the cause and amount of the claim asserted:
- 7.4. To safeguard claims for damages against third parties in the correct form and within the time allowed and, if required, to assign the amount of damages paid to the insurer:
- 7.5. Losses caused by criminal activities are to be reported to the police without delay giving precise information about the facts and the extent of the loss, and proof is to be obtained that the crime has been reported;
- 7.6. Original copies of proofs such as police reports, confirmations from travel company couriers, invoices from doctors and hospitals, proofs of purchase, etc. are to be given to the insurer.

8. The 24-hour emergency call centre

In the event of an emergency the insured can obtain help via a 24-hour call centre as part of the general conditions. The 24-hour emergency call centre makes the decision about the selection and implementation of the appropriate assistance

Unless the 24-hour emergency call centre is notified without delay, no benefits can be claimed for the following lines of insurance: curtailment of travel, unscheduled return journey home, illness and accident insurance during foreign travel.

9. Loss of entitlement to insurance benefits

The insurer does not have to pay benefits if

9.1. As a result of the insurance case, the insured deliberately provides information that is untrue, in particular in the notification of loss, conceals important facts or falsifies evidence, even if the insurer does not suffer any disadvantage as a result of it.

10. When does the insurer pay the compensation?

- 10.1. If investigations or proceedings are initiated by the authorities in relation to the insurance case, the payment will not be due until after these have been completed.
- 10.2. If the grounds and amount of the benefits the insurer has an obligation to pay have been decided, the payment is due two weeks thereafter.

CANCELLATION COVER

Insured costs

- 1.1. Cancellation costs due under the insurance policy arising from the insured travel package in the event of cancellation at the time at which the insured event starts to occur. Additional costs incurred as a result of cancellation at a later date will not be reimbursed.
- · For reservation of flights at net prices, the ticket service fee: max. HUF 1.2. 16.250,- (prices beyond HUF 162.500,- max. 10% of the all round price), as well as the travel agency booking fee, as far as it is declared on the invoice included the amount insured. • For other bookings the booking fee with a maximum of HUF 6.250,- per person HUF 12 500 and per trip: only if the booking fees are indicated as such on the booking confirmation and were considered for the calculation of the insurance premium. Various "handling" fees are not insured.
- 1.3. Cancellation deductible insurance

If the insurance package taken out is "travel protection without cancellation", it does not contain any cancellation insurance. However, any deductibles for cancellation insurance up to HUF 250.000,- (individual insurance) or HUF 500.000,- (family insurance) included in the travel price are insured.

Please note the insurance conditions included in your travel package. In the event of a claim, please first submit your claims to the insurance company included in your package. Send proof of payment made to the insurer to settle

the deductible.

1.4. What deductible does the insured person bear? If the refund claim exceeds HUF 3.750.000,- per person or HUF 7.500.000,per insured booking, 80% are covered for the amount which exceeds HUF 3.750.000,- or HUF 7.500.000,-(deductable 20%).

Insured events

- 2.1. Sudden serious illness, reaction to inoculation (only for prescribed inoculations), injury in an accident or the death of the insured. An illness is considered to be serious if it results in mandatory incapacity to travel and work. Please see the exclusions listed in point 1.2 of the general conditions of insurance for all lines of insurance.
- 2.2. A deterioration of an existing organic complaint of the Insured equivalent to point 2.1. Please see the exclusions listed in point 1.2 of the general conditions of insurance for all lines of insurance.
- 2.3. Pregnancy of the insured, if pregnancy has been ascertained and confirmed after the insurance has been taken out and travel booked.2.4. Unexpected termination of employment by the employer.
 - Unexpected termination of employment by the employer.

 No insurance cover exists in the event of termination of employment or termination of an employment contract by mutual consent or cancellation of insurance on account of exceptional work-related situations.
- 2.5. Call up for basic military service or non-military equivalent.
- 2.6. Service of a petition for divorce by the spouse of the insured.
- 2.7. If damage by the elements or theft causes serious impairment to the insured's property and therefore the insured's presence is essential.
- 2.8. Failure to pass a final class examination or a final school-leaving examination
- 2.9. Sudden serious illness, serious injury in an accident or the death of the following persons: Spouse, partner (identical residential address for previous 6 months), parents (step, in-law, grandparents), children (step- grandchild), sibling, brother-in-law, sister-in-law or a single specified person at risk named in the policy (1 person at risk per policy. No person at risk possible for more than 15 persons insured on one policy). Exclusions for the above listed persons stated in point 1.2.1 of the general conditions of insurance apply to all lines of insurance. If an existing illness of the persons listed above, which existed when the insurance was taken out, deteriorates, it is not an insured event even if care is required.
- 2.10. If up to seven persons have booked travel together and are insured on one policy, an insurance case exists if one of the reasons set out in points 2.1 to 2.9 has occurred for only one of these 7 persons.

3. Events that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance exists for the following situations:

- 3.1. If the travel company cancels the contract;
- 3.2. For events and illness caused by misuse of alcohol or drugs:
- 3.3. If an event or illness already existed or could be expected at the time the insurance was taken out or at the time the journey was booked;
- For planned or expected operations, postponed operation dates or medical interventions,
- 3.5. If on account of a delay in recovery from treatment or a therapy travel is not possible,
- 3.6. In the event of a health treatment being granted.

4. Procedure in the event of an insurance case

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the following shall apply:

- 4.1. After the start of an insured event caused for health reasons the place where the reservation was made (travel agency) and the insurer are to be notified in writing within 48 hours or two working days in order to allow the insurer to appoint a medical examiner to assess the claim.
- 4.2. The insured undertakes without delay to comply with instructions to attend an examination by the medical examiner.
- 4.3. The following documentation is to be sent to the insurer:
- Proof of insurance (policy);
- Fully completed claim form;
- Confirmation of reservation by the tour operator;

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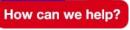
Insurer Contact-Service Center

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- Cancellation invoice and the tour operator's cancellation scale overview;
- Detailed medical documentation incl. medical history in respect of the illness (e.g. patient file, treatment documentation, medical results);
- Notification of sickness by a health insurance panel physician
- Mother-child booklet:
- Death certificate, proof of relationship (e.g. marriage certificate, birth certificate);
- Proof of that partners live together by means of a registration slip;
- Application for divorce / termination of employment / call-up order, etc.;
- School notification, final certificate, certificate of final school-leaving examination;

CURTAILMENT OF TRAVEL

1. Insured costs

- 1.1. The costs of travel services that have been booked but not used (e.g. hotel, hire care, round trip). The day of departure or the day on which the insured event occurs is considered to be a used day of travel or hire.
- 1.2. Any reimbursements or alternative services given directly to the insured will be deducted from his claim to Mondial Assistance as set out in point 1.1.
- 1.3. Not reimbursed are the costs of a booked return trip.

2. Insured events

- 2.1. Events that will endanger the physical safety of the insured at the holiday destination and therefore continuation of travel cannot be reasonably expected. Even events that are listet unter points 6.1.7. and 6.1.13. in the general conditions for all lines of insurance, if the physical safety of the insured is endangered.
- 2.2. Events which are listed under points 2.1., 2.2., 2.7. and 2.9. for cancellation cover and travel is curtailed.

3. Events that are not insured

The exclusions listed in the general conditions of insurance for all sectors and the exclusions listed in the field of travel cancellation cover apply.

4. Procedure in the event of a claim

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the following shall apply:

- If the 24-hour emergency call centre is not notified immediately, no benefits can be claimed.
- 4.2. The following documentation is to be sent to the insurer:
 - Proof of insurance (policy);
 - Confirmation of reservation by the tour operator;
 - Confirmation of the landlord/travel company courier concerning curtailment of travel;
 - Confirmation of the tour operator concerning travel services that cannot be reimbursed:
 - Doctor's confirmation (including patient name, diagnosis and treatment data) of the doctor ON SITE, who ordered curtailment of travel in writing, and the doctor who continued the treatment in Hungary:
 - Death certificate;
 - Other official certificates:
 - Notification of sickness by a panel physician

EXTRA COSTS INCURRED BY THE ADDITIONAL RETURN JOURNEY

1. Insured costs

The following costs are insured

- 1.1. Additional costs for the return journey in the event of early or delayed return travel by the insured and other relatives insured in his party (max. 2 adults and five minors) from a foreign destination to Hungary, depending on the nature and quality of travel booked and insured, providing that the return journey was included in the insured package.
- 1.2. Repatriation costs in the event of the insured dying during the journey.

Insured events

Insurer

2.1. Events that will endanger the physical safety of the insured at the holiday

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destination and therefore continuation of travel cannot be reasonably expected. Even events that are listet unter points 6.1.7. and 6.1.13. in the general conditions for all lines of insurance, if the physical safety of the insured is endangered

2.2. Events which are listed under points 2.1., 2.2., 2.7. and 2.9. for cancellation cover.

3. Events that are not insured

The exclusions listed in the general conditions of insurance for all sectors and the exclusions listed in the field of cancellation cover apply.

4. Procedure in the event of an insurance case

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the following shall apply:

- If the 24-hour emergency call centre is not notified immediately, no benefits can be claimed.
- 4.2. The following documentation is to be sent to the insurer:
 - Proof of insurance (policy);
 - Confirmation of reservation by the tour operator;
 - Doctor's confirmation (including patient name, diagnosis and treatment data) of the doctor ON SITE, who ordered the return travel in writing, and the doctor who continued the treatment in Hungary;
 - Death certificate;
 - Other official certificates:
 - Notification of sickness by a health insurance panel physician
 - Original ticket for the additional return journey, boarding pass, etc.

HEALTH- AND ACCIDENT INSURANCE (FOR FOREIGN TRAVEL)

1. Insured events

- 1.1. The following insurance is provided in accordance with the limit provided by the insurance package
- Treatment costs for initial assistance and direct pain relief (also decompression chamber),
- Transport of patient or repatriation costs, cost of search and rescue activities,
- Invalidity
- Repatriation costs in the event of death, in the event of acute illnesses and accidents of the insured which occur during travel abroad.
- 1.2. Where no valid social insurance exists or if subrogation fails by virtue of the documents to be furnished by the insured, a 20% deductible is deducted from the amount reimbursed for treatment costs or, if payment was made in advance, a repayment is required.

2. What is considered to be an accident?

An accident as defined by this policy is an event that is not intended by the insured, which occurs suddenly as a result of mechanical impact from outside on the insured's body and causes physical injury or death.

The following scenarios are also considered to be accidents:

- 2.1. Pulled or torn muscles and tendons;
- Poisoning or burns, the ingestion or inhalation of toxic or caustic substances, fluids or gasses;
- 2.3. Drowning.

3. Insured costs / benefits to be paid

- The costs required for doctors, transporting patients, hospital stays and medicines, which occur in relation to an accident or acute illness which occurs abroad
- Cost to transport the patient for one-off medical treatment for in-patient or outpatient care in the closest hospital abroad and return transport to accommodation.
- 3.3. Recovery, search and rescue costs.
- 3.4. Emergency transport/repatriation
- 3.4.1. Repatriation where this is required for medical reasons (incl. ambulance aircraft)

If medical treatment on site is not adequate and the insured is fit for transport with the agreement of the doctor providing treatment on site and the medical

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director of Mondial Assistance, Mondial Assistance will organise and undertake transport to repatriate the insured.

- 3.4.2. Repatriation where there is no medical need (excl. ambulance aircraft) In the event of a hospital stay of more than three days, the insured can be repatriated at the request of the insured or the insurer, providing that the insured is fit to travel, if transport is possible without an ambulance aircraft.
- Transport for repatriation will be to HUngary or a neighbouring state, if the 3.4.3. journey was started there. The actual form of return transport will be selected by the insurer according to medical need.
- The insured will not have any claim to emergency transport and repatriation, if the insured receives the cost of emergency transport from the third party or organises the transport himself. If in spite of this transport takes place, the insured assigns all claims against other insurers to Mondial Assistance.
- Additional costs for a relative to travel to the insured

In the event of a hospital stay in excess of five days, Mondial Assistance will pay – at the request of the insured – the cost of travel to and from the place where the insured is in hospital (excl. the cost of overnight stays) of a person close to the insured or the overnight costs and/or rebooking costs (depending on the nature and quality of the booked and insured travel) of a person travelling with the insured in the event of return travel being delayed by up to one week

3.6. Following repatriation via ambulance jet (item 3.4) the insured is given the choice of waiving the benefits due to him from the travel curtailment insurance policy and instead request to repeat travel in the form of a travel voucher up to the value of the package booked before travel (max. HUF 375.000,-).

4 a Invalidity

> The calculated compensation for invalidity will be paid in accordance with the following principles if the insured is still suffering from permanent impairment to health one year after the accident.

> Compensation is calculated in accordance with the degree of disability and the agreed insurance sum. The total insurance benefit for several parts of the body or organs is limited with the insurance sum.

Degrees of invalidity in the case of full loss or full inability to use

 Arm below the shoulder joint 	70%
 Arm up to above the elbow joint 	65%
 Arm below the elbow joint or one hand 	60%
- Thumbs	20%
- Index finger	10%
- Other fingers	5%
 Leg up to above the middle of the hip 	70%
- Leg up to the middle of the hip	60%
- Leg up to the middle of the lower leg or one fo	ot 50%
- Big toe	5%
- Other toes	2%
 Loss of sight in one eye 	30%
 Loss of sight in both eyes 	100%
- If the sight in the other eye had	already
before the event insured against occurred	60%

Loss of hearing in one ear 15% 60% Loss of hearing in both ears If the hearing in the other ear had already been lost

before the event insured against occurred 30% Loss of sense of taste 5%

- In the case of partial loss or partial use a correspondingly reduced level of 4 a 2 disability is assumed.
- For cases not listed above the level of invalidity is set on the basis of the above percentage rates.
- The fact that the consequences of an accident are worse as a result of a physical deficiency that existed before the insurance was taken out does not give entitlement to a higher invalidity payment.

If illnesses or ailments that existed before the accident influenced the consequences of the accident, the benefit is to be reduced in line with the proportion of the illness or the ailment.

4.b. Event of death

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been lost

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- Should the insured die on the occasion of an accident as listed above or within 5 years as a result of injuries sustained during the accident, the insurer will instead pay the sum agreed in the event of death. Unless the insured has left written instructions to the contrary, the sum in the event of death will be paid out to the rightful heirs upon presentation of proof that they are the beneficiaries (certificate of inheritance). Payments made on account of permanent invalidity arising from the same event will be deducted from benefits paid upon death.
- 4.b.2. If the death occurs as a result of the accident within a year of the accident, no claim shall exist for invalidity benefit.
- 4.b.3. If the insured dies for a reason not related to the accident (without an accident) and a claim already existed for invalidity benefit, this is to be paid on the basis of the last medical results indicating the level of invalidity to be expected.
- 5. When does the insurer pay the insurance benefits on account of permanent invalidity?

As soon as the insurer has received the documents which furnish proof concerning the circumstances and consequences of the accident and the completion of the treatment required for assessing invalidity, the insurer undertakes to explain within three months whether and to what extent the insured has a claim

Duration of the insurance

If the insured is not fit for transport as a result of the consequences of the accident or illness abroad, the obligation to pay benefits shall end two months after the occurrence of the insured event.

7. How are the benefits paid by the insurer calculated if the treatment costs are also insured elsewhere?

> If the treatment costs are insured with several insurers at licensed undertakings, they will only be reimbursed in total once.

8. Events that are not insured (exclusions)

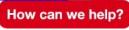
> In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance cover exists for the following situations:

- 8.1. Treatments and other measures prescribed by physicians which were the purpose of the journey or the necessity for which were known or could be expected before the insurance was taken out and/or the journey commenced;
- 8.2. Use of treatments associated with the destination (e.g. health cures);
- 8.3. Health cures to lose weight or for aesthetic reasons;
- 8.4. Events resulting from tiredness or exhaustion;
- 8.5. Pregnancy, occurrence of birth after the 36. week of pregnancy, abortions or treatment following contraceptive measures;
- 8.6. Dental treatment relating to the preservation of teeth or prostheses or treatment not related to emergency treatment for direct pain relief;
- 8.7. Provision of therapeutic aids (e.g. spectacles, prostheses, etc.)
- 88 Inoculations, medical reports and certificates;
- 89 Events which occur as a result of practising an employment-related manual activity or during military service;
- 8.10. Examinations to monitor health, post-treatment and therapies;
- 8 11 Additional costs for a special class or special services (e.g. telephone, TV,
- 8.12. Telephone and taxi costs of the insured or accompanying persons (excluding the one-off transportation of the patient, except transportation of a sick person
- 8.13. Additional hotel costs or expenses of accompanying persons (excluding point 34)
- 8.14. Quarantine costs:
- 8.15. Therapeutic treatments and patient repatriation in relation to misuse of alcohol
- 8.16. Impairment to health caused by flying with any kind of aircraft, unless the insured is a passenger on an engine-powered aircraft or jet approved for civil air transport:
- Extreme sports, parachute jumping or similar activities; extreme hikes in high mountains without a qualified mountain guide, activities over 6.000 m and

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those which are not booked as an all-inclusive tour, or sporting activities in wild

- 8.18. Driving vehicles if the insured does not have the specified permission to drive (driving licence):
- 8.19. Underwater diving without proof of the diving qualification for the relevant
- 8.20. Death or invalidity which only occurs five years after the accident

Procedure in the event of a claim 9.

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the following shall apply:

- 9.1. The insured undertakes in all cases where insurance benefits are likely to be claimed to seek medical help as soon as possible and to follow the physician's
- 9.2. Immediate notification of the 24-hour emergency call centre where in-patient treatment is required or in the case of illnesses which require a number of outpatient treatments. If the insurer is not notified and the costs exceed HUF 75.000,- the insurer reserves the right to make a deduction, depending on the amount of the costs claimed.
- 93 Deaths, even if the accident has already been reported, are to be reported in as timely a manner as possible so that a post mortem can be arranged before
- 9.4. The insured undertakes to comply with a request to attend an examination by a medical examiner immediately.
- 9.5. The following documentation is to be sent to the insurer:
 - Proof of insurance (policy),
 - Confirmation of reservation by the tour operator,
 - Doctor's report (including the patient's name, diagnosis,, treatment data, the duration and extent of incapacity to work or invalidity),
 - Original doctor's or hospital invoice including the patient's name, date of birth, diagnosis and treatment data;
 - Medical results where the need to transport the patient is confirmed;
 - Other invoices or original documents where compensation has been requested:
 - Death certificate

LUGGAGE INSURANCE

Insured events

Items taken on the journey by the insured or items purchased for personal requirements in the course of travel, subject to the following provisions:

- Theft and robbery, if the police are notified within 48 hours at the relevant public security office;
- Damage where proof is furnished of negligent third-party intervention;
- Loss during transport in the area of accountability of a third party if there is confirmation from the originator;
- Delayed delivery to the holiday destination by a public transport company commissioned with the transport.

2. Definition of valuables

In particular, valuables are:

- Items containing or made out of precious metal, precious stones or pearls. 2.1.
- Timepieces, jewellery, furs and leather goods
- Electrical, electronic and optical equipment (incl. mobile phones) including accessories, in particular photographic, film, video and sound equipment, computers of whatever kind.

3. Insured costs

Subject to point 6

- Where the loss is complete or the current value has been completely destroyed (see point 4) but up to a maximum of its acquisition price;
- In the case of damaged items, the cost of repair providing that this does not exceed the current value minus the residual value but up to a maximum of the cost of acquisition at the time minus the residual value.
- If the delay in delivering the luggage to the holiday location exceeds 12 hours, the cost of purchasing new items that are absolutely

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essential (see point 6.7).

Current value

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The current value is equivalent to the purchase price of the insured items minus a reduction in value in line with age and use.

- 4.1. The current value is calculated as follows:
- 411 With written proof of value and/or ownership

= 100% 0-6 months 6 months - 1 year 80% Each further year or part thereof minus 10%

Without written proof of value and/or ownership 412

0-6 months 80% 6 months - 1 year 70% Each further year or part thereof minus 10%

- 4.2. A higher loss of value is assumed in the case of electronic equipment, depending on technical progress.
- 43 Cosmetics, perfume, medicines, consumer goods, calculation of current value

5. Insured events under certain prerequisites

- 5.1. Valuables in accordance with point 2 are only insured if
 - They are being carried and looked after safely in personal custody (physical or visual contact) so that a third person cannot take it away without having to overcome resistance;
 - Proof is furnished that the items have been handed over to an accommodation provider or cloakroom service (e.g. receipt) or
 - The items are stored in a locked room that is not accessible to the general public, using all available security equipment (safe, cupboards). Bags of whatever kind - vanity cases, briefcases, jewel boxes, suitcases or similar containers - are not considered to be

In each case the type of storage must be appropriate for the value of the item (e.g. safe). If a valuable cannot be stored in a secure place, no insurance cover is available.

- 5.2. Valuables in accordance with point 2 are not insured during transport if they are entrusted to a third party as well as in the case of theft out of a motor
- 5.3. Sports equipment and forms of transport of whatever kind are only insured during transportation by public transport. Please note the exclusions in accordance with point 7.3.
- 5.4. Thefts from vehicles or boats are only insured if proof can be furnished that this occurred between the hours of 6.00 a.m. and 9.00 p.m. An exception to this is theft from a vehicle in a guarded garage. A further precondition is that luggage is locked in a securely locked luggage compartment. If the vehicle does not have an enclosed luggage compartment, it must be stored where it is not visible from the exterior.
- Thefts from caravans outside camping sites are not insured. 5.5.

Limited insurance benefits

- 6.1. Cost of obtaining new official documents and cheques up to max. 10% of the
- 6.2. Viewing aids (spectacles and contact lenses) and other prosthetic aids (e.g. wheelchairs, hearing aids, etc.) up to max. 20% of the insurance sum.
- 6.3 Breakages (excluding the suitcase) up to max. 10% of the insurance sum.
- 6.4. Mobile phones: The actual amount paid for the telephone - max. HUF 12.500,-
- For all the valuables insured in accordance with point 2, limited to 50% of the 6.5. insurance sum
- In the case of theft from a vehicle, for all the insured items limited to 50% of 6.6. the insurance sum.
- 6.7. If the delay in delivering the luggage to the holiday location exceeds 12 hours, the cost of hiring or purchasing new items that are absolutely essential up to 10% of the insurance sum. No benefit is paid if there is a delay in delivering luggage at the home airport. Costs incurred for special delivery or collecting the delayed items of luggage cannot be reimbursed.
- 6.8. If the luggage is finally declared to be lost, any new items purchased by way of replacement at the holiday location will be deducted from the insurance henefit

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Costs for taxis and telephone expenses are not insured.

7. Events/items that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance cover exists for the following situations:

- 7.1. Cash, bank notes, credit cards, keys, tickets, collections of stamps or coins, documents and paperwork with a value, precious metals, loose precious stones, trading goods and items that are valuable as art or as collectors' items, tools, equipment and items for the exercise of a profession, musical instruments, vehicle accessories, tools and spare parts, medical equipment, weapons, computer software, mobile phone cards, bonus agreements or credit for calls, cost of having a mobile phone blocked or cost of reregistering the phone if it is lost.
- 7.2. Objects on or in unlocked vehicles or boats as well as motorcycle and bicycle bags or suitcases and their contents, insofar as these bags/suitcases are left on the vehicle.
- 7.3. Vehicles, mobile homes, caravans, motor and sailing boats, sports equipment and kit from HUF 1250.000,- total value (excluding: golf travel insurance packages), motorcycles, aircraft, hanging and para gliding, hanggliders and the relevant accessories or spare parts and special equipment.
- 7.4. Damage which is due to premeditation or negligence Negligence is always deemed to have occurred if theft was possible due to a lack of physical and/or visual contact.
- 7.5. Damage due to insufficient or defective packaging or storage.
- 7.6. Damage that can be attributed to leaving something behind, misplacing it, losing it or dropping it.
- 7.7. Damage caused by wear and damage caused by spoiling goods, leaking fluids or the effects of the weather.
- 7.8. Damage which is caused indirectly or directly by acts of war, civil unrest, plundering, seizure by the authorities and strikes.
- 7.9. Losses covered by other insurance.
- 7.10. Consequential losses as a result of the event (e.g. charge to block forms of payment or mobile phones).

8. Procedure in the event of an insurance case

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the following shall apply:

- 8.1. Losses which are sustained while in the custody of a transport company or accommodation provider are to be notified to these organisations immediately and a certificate requested.
- 8.2. In the case of damage which cannot be identified immediately from the outside, the transporting company is to be requested immediately after discovery to inspect and certify the damage. The respective time allowed by the company for complaints and making claims must be observed.
- 8.3. The following documentation is to be sent to the insurer:
 - Proof of insurance (policy);
 - Confirmation of reservation by the tour operator,
 - Fully completed loss form for luggage, with a list of the contents of the luggage, stating the age, brand, purchase price (with proof of value or original invoices, if available);
 - Original notification to the police at the relevant public security office in the event of robbery or theft;
 - Original notification of loss of the airline or the transporting company (confirmation from the airline or transporting company of definitive loss is issued at the latest 90 days after the loss occurred) in the event of damage or delayed delivery of luggage;
 - Original invoices or original receipts for replacement purchases;
 - Original airline ticket or boarding pass;

PRIVATE TRAVEL LIABILITY INSURANCE

Insured events

An insured event exists if the insured causes a loss to persons or another person's property during travel and a claim is made against him where he is

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Budaörs, Szabadság út 117, H-2040
Company reg.number: 13 17 000129,
Tax number: 23837324-2-13

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liable for damages; more specifically

- Arising from the hazards of daily life, with the exception of the risk of a business, professional or commercial activity;
- 1.2. Relating to the keeping and use of bicycles;
- 1.3. Relating to non-professional sporting activity (excluding hunting);
- 1.4. Arising from the occasional use of motor and sailing boats but not the keeping of such boats;
- 1.5. Relating to the keeping and use of other watercraft not powered by an engine;
- During the use of living accommodation and other premises rented for private purposes.
- 2. Injury to persons and damage to property
- 2.1. Killing, physical injury and damage to a person's health.
- 2.2. Damage or destruction of tangible property.
- 3. Insured costs / services

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- 3.1. The satisfaction of an obligation to pay damages, which can be attributed to the insured on account personal injury or damage to property caused by an insured event arising from legal liability provisions under private law.
- The cost of determination and defence in respect of an obligation to pay damages claimed by a third party.
- 4. Which claims are only insured under certain prerequisites?

A claim for compensation of justified claims for compensation only exists outside Hungary if the claimant can enforce a claim against the insured's property.

5. Events that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance exists for the following situations:

- 5.1. If the assessment of the loss and settlement or the fulfilment of other obligations by Mondial Assistance is prevented by the state prosecutor, a third party or the insured:
- 5.2. For claims arising from unlawful and deliberate or grossly negligent actions;
- 5.3. For compensation obligations arising from losses which the insured or persons acting for him have caused through the keeping or use of aircraft and vehicles of whatever kind:
- 5.4. For losses the insured has caused to himself or his relations (spouse, partner, parents (step, in-law, grandparents), children (step, in-law, grandchildren), sibling, brother-in-law, sister-in-law, uncle, aunt, of a person listed in the policy or an insured person covered by the same insurance policy:
- 5.5. For damage the insured has caused during a sporting competition;
- 5.6. For damage caused by use, wear and excessive strain;
- For damage to things which the insured has borrowed, rented, hired or taken for safekeeping;
- 5.8. For losses caused through contamination or damage to the environment;
- 5.9. For damage to property caused to or with them as a result of their use, transportation, processing or other activities;
- 5.10. Through the transmission of an illness by the insured.
- 6. Procedure in the event of an insurance case

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects, the insured has an obligation to:

- 6.1. Authorise the lawyer appointed by the insurer (defending counsel, legal executive), give him all the information required and leave him to manage the case:
- 6.2. Authorise the insurer within the scope of his obligation to provide benefits to make all declarations that he deems to be useful:
- 6.3. If the insured is unable to obtain the insurer's instructions in good time, he must on his own initiative take all necessary actions for the case within the specified period.
- 6.4. The insured is not entitled to acknowledge a claim in part or in full without the insurer's permission.

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DELAYED DEPARTURE & ARRIVAL

1. Delayed arrival at destination

1.a. Insured events

The failure to catch the flight/sailing for reasons for which the insured is not to blame within the scope of the booked travel package

- caused by proved delay of the public means of transport (e.g. train, taxi, aeroplane) if the minimum connecting time has been taken into consideration when choosing the public means of transport.
- caused by an accident with the privat automotive when using it for getting to the airport/harbour.
- 1.b. Events that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance exists for the following situations:

- if an event is due to weather-related events
- for high traffic volumes (e.g. traffic jams).
- 1.c. Insured costs

The costs for delayed direct travel to the holiday destination are insured depending on the nature and quality of travel booked and insured, at most the fictitious flight costs in economy class to fly directly to the holiday destination.

2. Delayed arrival at home

2.a. Insured events

An event insured against applies if the booked arrival at the airport/railway station in the insured's home country is delayed (with proof of this provided) and as a result of this the return journey from the airport/railway station to the insured's place of residence is not possible or cannot be reasonably expected in accordance with the original plan without an overnight stay.

2.b. Insured costs

The cost of a taxi (max. 50 km) required because public transport is not available or the additional cost of an overnight stay required including subsistence (max HUF 25.000,- per person) will be reimbursed.

3. Procedure in the event of a claim

In addition to the obligations of the general conditions of insurance for all lines of insurance, if the insurer has a right to deny benefits and claims in other respects:

The following documentation is to be sent to the insurer:

- Proof of insurance (policy),
- Confirmation of reservation by the tour operator,
- Confirmation of the delay by the airline or transporting company incl. a description of the cause,
- The unused document for the outbound flight or ticket,
- The newly purchased ticket for outbound travel or boarding pass,
- Confirmation of the transport provider responsible for the delayed transfer including a description of the cause,
- Police notification in the case of an accident or an accident report
- Original invoice for alternative journey home, overnight stay and subsistence costs;

ASSISTANCE

Reason for the assistance

The insurer provides the assistance listed below for the following emergencies in which the insured may be involved during travel:

- Illness/accident
- Death
- Loss of travel funds
- Loss of travel documents
- Prosecution

The prerequisite for providing assistance is that the insured or his representative notifies the 24-hour emergency call centre (personally, by telephone, fax or email) when the event insured against occurs.

1.1. Illness/accident

Insurer

1.1.1. Outpatient treatment

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The 24-hour emergency call centre will advise, if requested, about the

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possibility of outpatient treatment by a doctor but will not actually contact the doctor.

1.1.2. Hospital stays

If the insured falls ill or has an accident and is therefore treated in hospital as an in-patient,

- the 24-hour emergency call centre will appoint a doctor to make contact with the insured's own doctor and the doctors providing treatment on site;
- During the hospital stay the appointed doctor will ensure that information is exchanged between the doctors involved;
- If requested to do so by the insured, the 24-hour emergency call centre will advise the relatives.

1.2.. Death

The insurer will either organise the transfer of the insured's corpse to the place of burial in Hungary or arrange burial at the travel destination, as requested.

1.3. Loss of travel funds

If travel funds are lost, the 24-hour emergency call centre will make contact with the insured's own bank. If required, the 24-hour emergency call centre will assist with the transfer to the insured of an amount of money made available by the insured's own bank.

1.4. Loss of travel documents

If travel documents are lost, the 24-hour emergency call centre will help to obtain replacement documents.

1.5. Prosecution

If the insured is imprisoned or threatened with imprisonment, the 24-hour emergency call centre will help to obtain a lawyer and an interpreter and also raise any bail that may be required.

REQUIREMENTS FOR HOME ASSISTANCE

1. The 24-hour emergency call centre

The 24-hour emergency call centre must always be notified immediately in order to claim the Home Assistance benefits. The 24-hour emergency call centre will then arrange all necessary activities, in particular it will make contact with the necessary trades, locksmiths and other public or private service providers.

An emergency situation exists

- If sustained impairment in the insured's quality of life occurs or
- Action is required immediately to prevent serious damage.

2. Insured persons

Insurance protection is provided for the insured and persons who live with him in the same household.

3. Scope of insurance

Insurance cover applies to main and second residences used by the insurer within Hungary.

4. When does the insurance apply?

A right to Home Assistance insurance benefits exists during the term of the insurance policy.

5. Insured services

5.1. Services from skilled tradesmen

If an emergency situation occurs for the insured dwelling, the 24-hour emergency call centre organises the following trades and covers the cost (travel time and working time) up to the max. agreed sum insured per insured event:

- Plumber in the event of damage to or defects with gas, water and heating installations;
- Electrician in the event of damage to or defects with electrical lines;
- Drying service;
- Locksmith, joiner and relevant specialist services in the event of damage or defects to entrance doors and windows;
- Roofer, carpenter and fitter for roof repairs on the insured's own home and ancillary buildings;
- Glass fitter if outside glass is broken;
- Pipe cleaning companies if blockages occur in the pipe system.
- 5.2. Loan of heaters

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If the heating system in the insured dwelling fails because of a breakage or fault during the heating period, the 24-hour emergency call centre will organise hired heaters for the time during which the heating system will not work and will cover costs up to the max. agreed sum insured per insured event.

5.3. Locksmiths

If the insured is locked out of the insured dwelling or keys to the insured dwelling are lost or stolen, the 24-hour emergency call centre will organise the unlocking and/or the replacement of the lost or stolen keys and will cover the cost of this up to the max. agreed sum insured per insured event.

5.4. Relocation services and emergency storage

If the insured dwelling cannot be used because damage has occurred and the contents of the dwelling have to be temporarily removed and stored, the 24-hour emergency call centre will provides the names of suitable companies (removal companies) and cover costs of up to the max. agreed sum insured per insured event.

6. Liability

The insurer is not liable for providers of help and services for which it has given contact details and/or commissioned work.

7. Events that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, the following damage and situations are not insured or are limited to the insurer's obligation to pay benefits.

- Services or benefits related directly or indirectly to routine maintenance and servicing.
- 7.2. No claim to a payment exists if the insurer has not given permission for the work to be carried out or the insured himself organises and undertakes rectification of the damage.
- 7.3. Damage will not be reimbursed if compensation can be obtained under another insurance policy.

8. Procedure in the event of a claim

The rules on how to respond as listed in the general conditions of insurance for all lines of insurance shall apply:

ROADSIDE ASSISTANCE WITHIN EUROPE

The 24-hour emergency call centre

The insured can call for help via the 24-hour emergency call centre in the event of an accident, breakdown or vehicle theft within the framework of the following conditions. In order to be able to claim for the benefit, it is always necessary to notify the 24-hour emergency call centre.

The 24-hour emergency call centre arranges all activities required, in particular the necessary contacts to breakdown organisations, repair workshops, hotels and both public and private transport companies and decides on the choice and implementation of the relevant assistance.

2. Insured vehicles

The insurance cover extends to passenger cars, motorcycles, caravans and people carriers with up to 9 seats registered in the name of the insured. No insurance coverage for rental car or commercial activities.

Insured persons

The insurance covers the insured and the persons who are in the insured vehicle at the time the breakdown or accident occurs.

Scope of insurance

The insurance cover applies to events during travel within Europe as a geographical area which occur more than 50 km away from the insured's place of residence, or after crossing the border to a foreign country, or for which the insured has booked at least one overnight stay. The products Annual Travel Cover and Roadside Assistance cover roadside-assistance-events independently of the distance from home.

Insured services

5.1. Roadside breakdown assistance or towing

If the vehicle can no longer be driven as a result of a breakdown or accident, the 24-hour emergency call centre will organise and pay for roadside help or towing (including recovery) to the nearest suitable repair workshop.

The cost of repairs and spare parts that are more extensive than pure roadside assistance are not insured.

5.2. Return of vehicle / Journey home

If a vehicle cannot be repaired following a breakdown or accident within 24 hours (when abroad, within 5 days because of the need for an expert report) at a repair workshop near to the place where the problem occurred, the insurer will organise and pay for the following services up to the sum insured:

- The documented cost for the vehicle occupants to return home to the place of residence of the insured but at the most the cost of the journey home using public transport. If travel by rail will last more than 6 hours, the insurer may opt as an alternative to claim a first class rail ticket or an Economy Class flight;
- Within Hungary the travel costs for one person to collect the repaired vehicle again will be covered.
- The cost of return transportation to the insured's place of residence of the vehicle that is not fit to drive or the vehicle that has been recovered.
- In the case of return transportation from a location abroad, the cost of transport within the stated limits will only be covered if the vehicle has not been written off; otherwise the customs duties will be paid.
- Car rental allowance in accordance with the insured package for the journey home or the onward journey of HUF 10.000,- per day for max 2 days.
- Overnight hotel accommodation if the vehicle cannot be repaired
 on the same day, the insurer organises a maximum of two overnight
 stays in a hotel and covers the costs in accordance with the selected
 insurance package.

6. Events that are not insured

In addition to the exclusions listed in the general conditions of insurance for all lines of insurance, no insurance exists if

- The problem occurs as a result of inadequate vehicle maintenance and
- The defects on the vehicle which caused the problem to occur already existed at the start of travel and/or could be ascertained;
- The insured resolved the problem himself.

7. Procedure in the event of a claim

The rules on how to respond as listed in the general conditions of insurance for all lines of insurance shall apply.

Insurer
AGA International S.A.
Hungarian Branch Office
Budaörs, Szabadság út 117, H-2040
Company reg.number: 13 17 000129,
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Contact-Service Center
We will be more than happy to provide further information regarding travel insurance:

2 +36 (06) 23 50 7416

⊠ugyfelszolgalat@mondial-assistance.at

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