

PUBLIC OFFER ON ELECTRONIC VOLUNTARY COMPREHENSIVE INTERNATIONAL TRAVEL INSURANCE CONTRACT CONCLUSION

OFFER No. 001/OP

Kyiv

October 23, 2018

General Terms and Conditions

12.1. This public offer (hereinafter – the Offer) is the official offer of the Insurer to an indeterminate number of capable individuals to conclude an electronic comprehensive international travel insurance contract (hereinafter – the Contract) with the Insurer.

12.2. The Offer is a standard form within the meaning of Article 634 of the Civil Code of Ukraine, which can be accepted by another person by adhering thereto.

12.3. The Insured is a capable individual who has adhered to this offer under the provisions of Articles 634, 642 of the Civil Code of Ukraine and concludes a contract with the Insurer by accepting this Offer.

12.4. The Contract is concluded in accordance with the Rules of Voluntary Medical Expenses Insurance approved by the State Commission for Regulation of Financial Services Markets of Ukraine under number 2117003, dated January 19, 2017 (License AV No. 547198, dated November 24, 2010), the Rules of Voluntary Accident Insurance approved by the State Commission for Regulation of Financial Services Markets of Ukraine under number 1093, dated June 26, 2018 (License AV No. 5447191, dated October 24, 2010), the Rules of Voluntary Financial Risks Insurance approved by the State Commission for Regulation of Financial Services Markets of Ukraine under number 1880137, dated December 21, 2007 year (License AV No. 547212, dated November 24, 2010), (hereinafter – the Rules).

12.5. The fact of signing Part 1 of the Contract by the Insured and payment of the insurance premium is considered as an unconditional acceptance of the Offer.

12.6. At the request of one of the Parties, the Parties shall be obliged to reproduce the Contract on paper within five working days after the date of submission of such written request.

Section 1. Medical expenses insurance during travelling abroad

13. Subject matter of insurance

13.1. The subject matter of insurance shall be property interests not contradicting to the effective law of Ukraine related to life, health of the Insured person and medical expenses of the Insured person and also extra expenses, which are directly connected with an insured event occurrence during the Insured person's travelling abroad.

14. Definitions and list of insurance risks and insured events

14.1. The insurance risk shall mean an event that is probably and accidentally to take place and is insured.

Under this Contract the following risks are insured:

14.1.1. acute illness;

14.1.2. exacerbation of chronic illness;

14.1.3. health disorder of the Insured person resulted in an accident occurrence to the Insured person during the validity period of the Contract at the territory covered by the Contract;

14.1.4. death due to an acute illness, an exacerbation of chronic illness or an accident;

14.2. The insured event shall mean documented expenses of the Insured (the Insured person and/or the Authorized Insurer's specialized service (Assistance)) to be paid the cost of provided health and medical care, transportation and other services **selected by relevant insurance program**, while travelling, such as:

14.2.1. outpatient treatment and diagnostics, such as the emergency conservative and surgical treatment in clinics, polyclinics;

14.2.2. urgent inpatient treatment;

14.2.3. inpatient treatment after validity period expiration up to 15 days if it is necessary according to the medical indications;

14.2.4. emergency medical care (Ambulance);

14.2.5. emergency dental care;

14.2.6. expenses payment or compensation for purchase of the prescribed medications;

14.2.7. medical transportation to the medical facility if health does not allow moving independently;

14.2.8. medical transportation of the hospitalized Insured person from abroad to the closest medical institution in the country of residence (medical evacuation);

14.2.9. repatriation of remains to the place of residence in case of death;

14.2.10. burial costs in the country of temporary stay in case of death;

14.2.11. return fare of one the Insured person's adult close relative and his/her accommodation in a hotel if the Insured person stays in a hospital (inpatient care) in the country of temporary stay for more than 10 days;

14.2.12. early return of the Insured person's children to the country of residence and, if necessary, escorted by a third party.

15. Exclusions from insured events and insurance limitations.

15.1. Exclusions from insured events are:

15.1.1. Treatment and diagnostic of chronic diseases, congenital malformations, deformations and chromosomal abnormalities, inherited diseases.

15.1.2. Tumours, diseases of endocrine system and organs (diabetes, thyroiditis, etc.).

15.1.3. Nervous system diseases (except for neuritis), mental illness and related traumatic injury (psychopathy, neurosis, asthenic depressions, somatoform autonomic dysfunction, etc.) psychotherapy, speech therapy and phoniatrics treatment (care), use of neuroleptics, tranquilizers, antidepressants, hypnotics and sedatives drugs.

15.1.4. Venereal diseases and diseases transmitted mainly through sexual contact, immunodeficiency states, AIDS, immune disorders. Systemic connective tissue diseases, degenerative and dystrophic changes, diseases and its complications (chondrosis, arthrosis, osteoarthritis, etc.).

- 15.1.5. Diseases of blood and blood-forming organs, chronic disease of peripheral vessels (varicose veins, obliterating endarteritis and atherosclerosis, chronic venous/lymphatic insufficiency, haemorrhoids, etc.).
- 15.1.6. Epidemic or pandemic diseases, dangerous infection, chronic persistent infections (ECHO. TORCH, etc.).
- 15.1.7. Acute and chronic radiation sickness.
- 15.1.8. Any health problems, complications or death as a result of failure to comply with physician's recommendations, side effects of drugs that were not prescribed by a doctor.
- 15.1.9. Disease or consequences (complications) of diseases of viral hepatitis and tuberculosis.
- 15.1.10. Hearing diseases and disorders (cerumen impaction appearance, complications because of cooling and/or water getting), except for acute illness.
- 15.1.11. Fungal and dermatological diseases, allergic dermatitis including those which caused by ultraviolet radiation and sunburns of I-st and II-nd degree, except cases when the immediate medical care for the Insured person's life saving is necessary.
- 15.1.12. Diseases and states arising before commencement of insurance period and/or at the territory of permanent residence, which led to medical or additional expenses during the trip; and diseases and states that arose after returning from a trip.
- 15.1.13. Further treatment if the Insured person refuses from medical evacuation to the country of residence.
- 15.1.14. Medical examination and services that are not reasonably necessary or medically urgent, or which are not included to the treatment prescribed by the doctor.
- 15.1.15. Services and treatments that can be deferred until return from a trip, including surgical operations, which may be replaced with course of conservative treatment until the end of a trip.
- 15.1.16. Vaccinations, medical expertises, instrumental and laboratory tests unrelated to an insured event.
- 15.1.17. All kinds of plastic, reconstructive and cosmetic surgeries and procedures, all kinds of prosthetics and organ transplantation. Diagnosis and treatment of cellulite, obesity, metabolic syndrome.
- 15.1.18. Dental treatment, except emergency care.
- 15.1.19. Physiotherapy treatment, physical therapy and non-traditional methods of treatment, use of laser technology.
- 15.1.20. Artificial insemination, infertility treatment, measures to prevent pregnancy.
- 15.1.21. Treatment of injury received due to an intentional violation of the law by the Insured person.
- 15.1.22. Treatment of injury received due to a vehicle driving by the Insured person if the Insured person hasn't a driving licence.
- Self-treatment, treatment by a person or institution who does not have appropriate permissions for medical activity in a country of temporary stay, as well as treatment of disease or injury caused by the intentional actions of the Insured person, including suicide attempts or intentional self-inflicted injuries.
- 15.1.23. Treatment of disease or injury caused by ionizing radiation, radioactive contamination of any origin or toxic or explosive materials of nuclear production or components of these substances.
- 15.1.24. Transport services (taxis, public transportation, etc.), except hospital emergency services or transport from hospital to hospital under medical transportation.
- 15.2. The Insurer shall not be indemnified the cost of treatment and the expenses for health and medical care, transportation and other services:
- 15.2.1. If the Insured person has been recognized incurably ill before the trip.
- 15.2.2. In cases occurred during a trip which has been made contrary to a doctor's advice or for the purpose of pre-planned or intended treatment abroad.
- 15.2.3. Related to the extra comfort, including: TV, telephone, air conditioning, hair cutter, massage, cosmetician, taxi etc.
- 15.2.4. Exceeding necessary, when health condition of the Insured person has gained so much (according to the medical indications) that it is possible independent returning (repatriation) to the country of residence or escorted by third party.
- 15.2.5. Any dental prosthetics including dental appliance and fake teeth providing (except urgent dental services in order to prevent complications during food eating).
- 15.2.6. Treatment in the country of temporary stay after the date when the medical transportation (repatriation) is possible according to the medical indications and physician's opinion who is authorized by the by Authorized Insurer's specialized service (Assistance).
- 15.2.7. Corrective or rehabilitative treatment, treatment at resorts, in rest houses, convalescent homes and other resort facilities.
- 15.2.8. Medical repatriation, if disease or injury is not serious enough (according to the medical indications) and treatment can be carry out in country of residence of the Insured person, and/or disease or injury does not prevent continuation of the travel or independent return of the Insured person to the country of residence.
- 15.2.9. Treatment in the country of residence of the Insured person.
- 15.2.10. Accommodation in a hotel and other costs of the Insured person's close relative if the Insured person stays in a hospital (inpatient care) in the country of temporary stay for less than 10 days due to an acute illness, an exacerbation of chronic illness, health disorder as the result of an accident.
- 15.2.11. Pregnancy (except ectopic), childbirth, abortion. Menstrual disorders, endometriosis, menopausal syndrome.
- 15.2.12. Resulted from diving into the water using breathing apparatus (scuba).
- 15.2.13. Resulted from jumping from a height (parachute jumping, ropejumping, etc.) including jumping in water.

16. Actions of the Insured (the Insured person) upon occurrence of the event having signs of the insured one.

- 16.1. Upon occurrence of an event that can be recognized as insured event, the Insured person shall immediately, but in any event not later than in 24 hours:
- 16.1.1. Contact the Authorized Insurer's specialized service (Assistance) by phone, which is specified in the Contract and receive recommendations for further action.
- 16.1.2. If the Insured person requires urgent emergency medical care, and it is not possible to notify about it prior to receipt of medical care, such notification shall be made within 24 hours after receiving the necessary assistance. Such notice may be sent by any person who acts for and on behalf of the Insured person. Inability to notify the Insurer and / or the Authorized Insurer's specialized service (Assistance) shall be confirmed by the Insured person with documents.
- 16.1.3. Provide the Specialised service of the Insurer (Assistance) with the following information:
- name of the Insurance company;
 - Insurance contract number
 - full name of the Insured person
 - validity period of the Contract
 - address, telephone
 - detailed description of circumstances of an event and the nature of assistance required.
- 16.1.4. Follow all recommendations of the Authorized Insurer's specialized service (Assistance) regarding further actions after contacting it.
- 16.1.5. Take measures to minimize or prevent losses which resulted from the event having signs of the insured one.
- 16.1.6. If the Insured (the Insured person), under the Insurer's consent, had paid the cost of medical services or purchased medicine under prescription of the trusted Insurer's physician or the Authorized Insurer's specialized service (Assistance), the Insurer shall indemnify the amount spent, on the basis of documents confirming the amount of loss.
- 16.1.7. If case of insured event occurrence the Insured (the Insured person) may, at its discretion, pay for the cost of services provided under this Contract only if its expected costs shall not exceed EUR/USD 500.

17. Documents confirming an insured event occurrence and amount of loss

17.1. The Insurer shall pay insurance indemnity on the basis of the following documents:

- 17.1.1. invoice of a medical institution (on a letterhead or with an appropriate stamp) specifying full name of the patient, precise diagnosis, date of admission, treatment duration, detailed data on provided medical services, diagnostics, medicines prescribed, stating their quantity and cost;
 - 17.1.2. prescriptions that are written to the Insured person by a treating doctor to purchase medicines with title of each medicine required;
 - 17.1.3. itemized invoices for other medical services broken down by date and their cost;
 - 17.1.4. documents confirming payment for medicines, provided medical services (cash records, receipts, receipts of funds, bank receipts, etc.);
 - 17.1.5. documents of the Authorized Insurer's specialized service (Assistance) for costs related to the insured event;
 - 17.1.6. in case of death of the Insured (the Insured person) – death certificates and documents on transfer of body or burial abroad;
 - 17.1.7. certificates of the competent authorities, confirming the fact of occurrence (the reasons for occurrence) the event c, according to the event that occurred;
 - 17.1.8. copy of the Insured's (the Insured person's) national passport;
 - 17.1.9. copy of the Insured's (the Insured person's) international passport;
 - 17.1.10. copy of identification number of the Insured (the Insured person);
 - 17.1.11. original travel documents;
 - 17.1.12. certificates of the competent authorities, confirming the fact of occurrence (the reasons for occurrence) the event having signs of the insured one, according to the event that occurred;
 - 17.1.13. original or a copy of the Contract;
 - 17.1.14. claim for payment of insurance indemnity under the Insurer's form;
 - 17.1.15. other documents at the request of the Insurer to determine the nature, circumstances of the event having signs of the insured one, its consequences and amount of loss.
- 17.2. In disputed cases, the Insurer shall have the right to initiate and the Insured person shall be obliged to be medical or clinical examined in the medical facilities and/or expert institutions or with relevant experts, specialists or professionals.
- 17.2. The documents listed in p. 17 may be submitted in Russian, English, French, German languages. If the documents are submitted in other languages, the Insured (the Insured person) have to provide the Insurer with an official translation into Ukrainian.
- 17.3. All specified documents shall be fully submitted in originals or copies, or in duly certified copies with the provision of originals for verification of their authenticity.

18. Procedure of insurance indemnity payment

18.1. The Insurer shall pay insurance indemnity in the following ways:

- 18.1.1 By transfer of funds to account of the Authorized Insurer's specialized service (Assistance), medical facility that provided services on the basis of documents proving the fact of insured event occurrence and determining the cost of actually provided (required) medical care.
- 18.1.2 As indemnity to the Insured (the Insured person) of the cost of health care received if the Insured (the Insured person) paid for such care on its own under the Insurer's consent or if the cost of treatment does not exceed EUR/USD 500, subject to provision of all required documents specified in p. 17 of this Contract.
- 18.1.3. To the person who paid the cost of repatriation of the body of the Insured (the Insured person) if payment for such service was not carried out by the Authorized Insurer's specialized service (Assistance).
- 18.1.4. The Insurer shall indemnify the costs in accordance with selected insurance programs (Annexes hereto) for emergency medical care and services that have been provided to the Insured (the Insured person) during stay abroad and / or when travelling in Ukraine within the sum insured or limits of the Insurer's liability.

Section 2. Travel accident insurance

19. Subject matter of insurance

19.1. The subject of the Contract shall be the property interests of the Insured and / or the Insured person which does not contradict the current legislation of Ukraine and are related to life, health and work ability of the Insured (the Insured person).

20. Definitions and list of insured events

- 20.1. Under this Contract an accident shall be considered a sudden, random, short-term event, independent of the will of the Insured person (the Insured), which actually occurred and resulted in health disorder (traumatic injury, accidental acute poisoning by poisonous plants, chemicals (industrial or household), poor quality of food, medicines; electric shock, frostbite, burns; ruptures (wounds) of organs or their extraction due to incorrect medical manipulations); tears (injury) of organs or their removal as a result of incorrect medical procedures) of the Insured person (the Insured) or its death.
- 20.2. Insured events shall include:
 - 20.2.1. injury/health disorder of the Insured (the Insured person) due to an accident;
 - 20.2.2. if the Insured (the Insured person) becomes primary disable due to an accident;
 - 20.2.3. death of the Insured (the Insured person) due to an accident.

21. Exclusions from insured events and insurance limitations.

- 21.1. Events shall not be considered as insured and payment of insurance indemnity shall not be carried out if events specified in p.20.2. of this Contract have occurred as a result of:
 - 21.1.1. Poisoning by drugs or toxic substances, alcohol or other substances that were used for the purpose of intoxication, except for cases where the use of such substance was the result of unlawful actions of third party.
 - 21.1.2. Suicide of the Insured (the Insured person) or attempted suicide or intentional injury;
 - 21.1.3. Self-medication or other medical intervention, carried out by the Insured (the Insured person) without medical prescription.
 - 21.1.4. Diseases of the Insured (the Insured person) except tetanus, rabies and other diseases that are transmitted through bites of animals and insects.
 - 21.1.5. Participation of the Insured (the Insured person) in strikes, riots, internal disturbances and etc.
 - 21.1.6. Failure to comply with the rules (regulations) of safety standards or industrial hygiene.
 - 21.1.7. Events that occurred during detention, arrest.
 - 21.1.8. Events that occurred outside the territory of this Contract.
 - 21.1.9. Mental disorders.
 - 21.1.10. Any action of the Insured (the Insured person) made under alcohol, narcotic or toxic intoxication;
- 21.2. Insured events shall not include:
 - 21.2.1. Death of the Insured (the Insured person) from diseases that were not the result of an accident
 - 21.2.2. Exacerbation of a chronic disease, food poisoning.

22. Actions of the Insured (the Insured person) upon occurrence of the event having signs of the insured one

22.1. Upon occurrence of an event that can be recognized as an insured event, the Insured (the Insured person) shall immediately, but in any event not later than in 24 hours consult the Authorized Insurer's specialized service (Assistance) by phone, which is specified in the Contract and receive recommendations for further action.

22.2. Within 15 days after end of travel the Insured (the Insured person) shall apply in writing to the Insurer and provide the documents necessary for a decision on payment of insurance indemnity.

23. Documents confirming an insured event occurrence and amount of loss

23.1. In case of disability or injury (temporary health disorder) the Insured (the Insured person) shall provide:

23.1.1. written notice of insured event occurrence and claim for payment of insurance indemnity;

23.1.2. original or a copy of the Contract;

23.1.3. documents from medical institutions, namely: sick leave, medical certificate of disability (in the case of disability), certificate of outpatient (inpatient) treatment; medical report (emergency room);

23.1.4. documents identifying the beneficiary of insurance indemnity (passport, ID number);

23.1.5. certificates of the competent authorities (according to the event that occurred);

23.1.6. MSEC (Medical and Social Expert Commission) certificate on disability;

23.1.7. accident report issued by officials relating thereto, or report of H-1 form;

23.2. In case of death of the Insured (the Insured person) the Beneficiary determined in accordance with the law, shall provide:

23.2.1. written claim for payment of insurance indemnity;

23.2.2. copy of this Contract;

23.2.3. certificate of cause of death and death certificate;

23.2.4. report of H-1 form;

23.2.5. certificates of the competent authorities (according to the event that occurred);

23.2.6. notarized certificate of inheritance (for successor);

23.2.7. documents, identifying the beneficiary of insurance indemnity (passport, ID number);

23.2.8. other documents on request of the Insurer.

23.3. If in order to receive insurance indemnity other documents are necessary, which are not possible to provide in a mentioned term (commercial court decision, certificate of inheritance, and etc.) the Insured (the Insured person) or the Beneficiary (heir to the Insured) shall provide them within two (2) working days after receipt from the relevant authorities.

24. Procedure of insurance indemnity payment

24.1. The Insurer shall issue a Claim report or make a decision to decline insurance claim in a term not exceeding fifteen (15) working days after receipt of all documents required for payment of insurance indemnity.

24.2. Insurance claim payment shall be made within a period not exceeding 15 (fifteen) working days from the date of decision to pay indemnity on the basis of a Claim report and shall be paid via the Insurer's cash desk, by postal order or transferred to a bank account specified by the Insured (the Insured person or the Beneficiary) in a claim for insurance indemnity payment.

24.3. The Insurer shall pay insurance indemnity:

24.3.1. in case of death of the Insured (the Insured person) due to an accident to the Beneficiary or heir - in amount of 100% of the sum insured;

24.3.2. In event of injury of the Insured (the Insured person) due to an accident and receiving disability group, indemnity shall be paid:

I group - 100% of the sum insured;

II group - 75% of the sum insured;

III group - 50% of the sum insured.

24.3.3. in case of injury of the Insured (the Insured person) – in a single payment in amount according to the table “Insurance indemnity payments in event of injury or harm to internal organs and body parts” which is Annex 4 to the Rules.

Section 3. Travel cancellation insurance

25. Subject matter of insurance

25.1. The subject of insurance shall be property interests of the Insured and / or the Insured person, which do not contradict the legislation of Ukraine related to the risk of losses due to cancellation or suspension of travel, organized by a tourism enterprise (hereinafter TE) under the terms of the contract for travel service, or other document certifying travel conditions.

26. Definitions and list of insured events

26.1. The insured event shall be the fact of incurred by the Insured's and / or Insured person's losses due to inability to travel or travel interruptions due to unforeseen and unintentional events and / or circumstances that occurred before the date of commencement of travel, namely:

26.1.1. Death of the Insured (the Insured person) or a member of its family (children, parents, wife / husband, full siblings);

26.1.2. Sudden health disorder: emergency surgery, stay in a hospital for more than 5 (five) calendar days inclusive, injuries of severe complexity of the Insured (the Insured person) or a member of its family, during the validity period of the Contract, if there is a medical prescription prohibiting travel and need for treatment (if there is no other capable direct relatives - in case of need to nurse injured family members of the Insured (the Insured person), infectious diseases that require isolated treatment (quarantine appointment);

26.1.3. Damage, destruction of property of the Insured (the Insured person) during the validity period of the Contract due to fire, explosion, natural disasters, illegal actions of third party in event if settlement of consequences of such damage requires the immediate presence of the Insured (the Insured person) at the place of an event and / or objectively impede the implementation of previously planned travel,

26.1.4. The need for participation of the Insured (the Insured person) in court and presence at hearings, if the Insured (the Insured person) is a defendant, witness or if presence is necessary under a court order, under condition that the fact of such hearing in the period of planned trip which objectively prevent its implementation, was not known to the Insured (the Insured person),

26.1.5. Official announcement of the country (region, city) of residence or the country of temporary stay (the place of booked travel: region, city) as a disaster zone, and in case of carriers strike, national unrest, epidemics, terrorist acts,

26.1.6. Cancel of airline flight due to closure of airspace over the territory of the country of temporary stay due to natural disasters and environmental influences,

26.1.7. Non-receipt of the Insured (the Insured person) of visa to the country of temporary stay in case of timely submission of full documentation, required to obtain a visa and which meets the requirements of the consulate (embassy) of the country of temporary stay subject to absence of previous visa refusal to a country, where trip for all Insured persons is planned;

26.1.8. Being late for the flight due to an accident, traffic accidents or breakdown of public transport (except taxis), on which the Insured (the Insured person) was going to the airport or railway station, and in case of late arrival of flight from another city;

26.1.9. The bankruptcy of the tour operator (provided that the tour operator is a resident of Ukraine) during the validity period of the Contract.

26.1.10. Insurance coverage shall apply only in cases provided under the selected insurance program (p. 7. Part 1 of the Contract)

27. Exclusions from insured events and insurance limitations.

27.1. Insurance shall not cover and insurance indemnity shall not be paid, if losses of the Insured (the Insured person) are caused by an event that:

27.1.1. is not defined as an insurance risk in the chosen insurance program (p. 7. Part 1 of this Contract), and / or took place prior before its inception or after expiry;

27.1.2. caused by circumstances of which the Insured (the Insured person) was aware or is expected to be aware, but failed to make efforts to avert the insured event occurrence;

27.1.3. occurred as a result of any acts of the Insured (the Insured person) in a state of alcoholic, narcotic or toxic intoxication, confirmed with documents in accordance with the law;

27.1.4. occurred as a result of epidemic, quarantine, infectious diseases of the Insured (the Insured person), family members, which could be prevented by pre-made vaccination and / or which is the result of violation of preventive quarantine measures after contact with a carrier of such infection;

27.1.5. occurred due to violation of the Insured (the Insured person) of laws, health regulations, sanitary and epidemic recommendations;

27.1.6. occurred as a result of mental illness of the Insured (the Insured person), a member of its family during the term of this Contract;

27.1.7. caused by military and associated risks (war, rebellion, revolution, civil unrest), any military manoeuvres, exercises or other military actions and their consequences, impact of mines, torpedoes, bombs, and other weapons of war;

27.1.8. caused by terrorist acts;

27.1.9. caused by the risks of nuclear energy and radioactive contamination; impact of ionizing radiation or contamination by radioactivity of any nuclear fuel, combustion or waste of nuclear fuel.

27.2. Insurance shall not cover losses incurred as a result of:

27.2.1. restriction or change of travel plans for any reason;

27.2.2. defer of travel / flight date for any reason.

27.2.3. The following persons shall not be accepted for insurance:

27.2.4. those with intend to go to the country of temporary stay for permanent residence, work and / or study;

27.2.5. those who have medical contraindications for health reasons.

27.3. The Insurer shall not pay insurance indemnity to persons who at the time of signing this Contract have fully or partially concealed from the Insurer the circumstances referred to in p. 33.2.1. of this Contract and / or provided false information that was important at conclusion of this Contract.

27.4. Declined visa shall not be considered as an insured event in case if application to conclude this Contract was provided to the Insurer later than in fifteen (15) working days before the planned trip.

27.5. The Insurer shall not cover:

27.5.1. fines, late payment interests and other penalties;

27.5.2. cost of indemnification for moral damages, lost profits;

27.5.3. difference in exchange rates.

28. Sum Insured. Insurance Premium. Validity period and territory of the Contract.

28.1. Maximum sum insured for this type of insurance shall not exceed the amount equivalent to EUR / USD 7 000 (seven thousand) for each Insured person specified in the Contract for travel services.

28.2. International contract of comprehensive travel insurance covering financial risks insurance of losses incurred due to cancellation or interruption of trip shall be concluded in a period not less than 14 calendar days before the beginning of a trip and shall include medical travel expenses insurance and accident travel insurance.

28.3. The insurance premium hereunder shall be paid in one instalment and before the Contract inception.

28.4. This Contract shall enter into force on the date of commencement of its action, but not before 00 hours 00 minutes (Kyiv time) on the date, following the date of payment of the insurance premium in full amount.

28.5. The validity of this Contract expires after crossing the border of the country of residence by the Insured (the Insured Person).

28.6. If the Insured fails to pay the insurance premium in terms of this Contract, or paid the insurance premium partially, then this Contract shall be deemed invalid.

28.7. The territory of this Contract shall be the territory referred to in p. 10 of this Contract.

29. Actions of the Insured (the Insured person) upon occurrence of the event having signs of the insured one

29.1. In case of an event specified by this Contract, which has signs of an insured event, the Insured (the Insured person) shall:

29.1.1. as soon as possible, but not later than in 24 hours to notify the Insurer of an event occurrence that has signs of an insured event (by emergency phone, which is specified in the Contract);

29.1.2. contact the TE with notice of travel cancellation to receive information on penalties, accommodation hotel name and airline, which was to make transportation of the Insured (the Insured person);

29.1.3. within two (2) business days (excluding weekends and holidays) from the date of event occurrence that has signs of an insured event, notify the Insurer in writing;

29.1.4. take all possible measures and actions to prevent and reduce the amount of damage caused as a result of an event that has features of an insured event (to contact the TE as soon as possible, and if possible, to postpone the date of travel);

29.1.5. take measures to receive and transfer to the Insurer all necessary documents required under p.30 of this Contract for assessing the amount of damage caused, by referring to (as many times as needed) the competent authorities to receive additional documents and information;

29.1.6. provide written explanation on the Insurer's requests related to an event that has signs of an insured event.

30. Documents confirming an insured event occurrence and amount of loss

30.1. To recognise an event as an insured event and to calculate the amount of insurance indemnity, the Insured or the Beneficiary or the Insured person who, in accordance with the effective law of Ukraine, is entitled to receive insurance indemnity (is the recipient of an insurance claim payment), depending on the nature and circumstances of an event, that has signs of an insured event, shall provide the Insurer with:

30.1.1. written notice of an event occurrence that can be recognized as an insured event;

30.1.2. written claim for payment of insurance indemnity under the Insurer's form;

30.1.3. TE's official document confirming the fact of event occurrence, that has signs of an insured event;

30.1.4. copy of this Contract;

30.1.5. copy of identification code certificate, and copies of national and international passports of the Insured person;

30.1.6. documents to prove relationship of the Insured (the Insured person) and family member (in case of insurance risk occurred with a family member of the Insured);

30.1.7. copy of a contract for travel services;

30.1.8. documents confirming payment of consulate fee, travel services (checks, receipts);

30.1.9. documents confirming the return of payment by Travel agency to the Insured applying penalties (return payment calculation and cash order, etc.);

30.2. Depending on the nature of event and circumstances of occurrence, such documents may also be provided:

- 30.2.1. death certificate or a certificate of inheritance, certified in accordance with the law;
 - 30.2.2. certificate of medical institutions, extract from a medical record, certified with a signature of responsible person and seal of a medical professional, or sick leave;
 - 30.2.3. documents confirming the right of ownership, use and disposal of damaged (destroyed) property;
 - 30.2.4. documents issued by the relevant competent authority (certificate of fire protection service, seismic or meteorological service, departmental emergency gas service, electric service, MIA investigators, Ministry of Emergency Situations, etc.);
 - 30.2.5. original court's notice of case hearing appointment;
 - 30.2.6. copy of the court decision on appointment of a date and time of hearing (summons);
 - 30.2.7. extracts from several public sources (magazines, newspapers, their internet pages), indicating the recognition of a country (region of the country) as a disaster zone with date of occurrence and relevance of the event at the date of departure to the country of temporary stay;
 - 30.2.8. extracts from several public sources (magazines, newspapers, their internet pages), indicating the closure of airspace over that country, where the trip was planned, indicating the disaster and occurrence date;
 - 30.2.9. airlines schedule confirming flight cancellation of the Insured (the Insured person);
 - 30.2.10. official denial of consular services of the embassy, which shall be certified by the authorized signature and seal of the embassy;
 - 30.2.11. original international passport with stamp of visa refusal (if any);
 - 30.2.12. other documents or information requested by the Insurer needed to determine the circumstances and causes of an insured event and the amount of loss.
- Documents submitted to receive insurance indemnity shall be valid, provided in extent required by the Insurer (its representative), properly issued and certified.
- 30.2.13. Taking into account the characteristics of a particular insured event, the list of documents evidencing an insured event occurrence and amount of damage may be reduced under agreement between the Insurer and the Insured.

31. Insurance indemnity amount calculation.

- 31.1. Amount of damage shall be determined by the Insurer on the basis of one or more documents listed in p.30 of this Contract.
- 31.2. Insurance indemnity shall be determined as the difference between the actual costs incurred by the Insured due to purchase of travel services package at the moment of event occurrence, which has features of an insured event, and the amount returned by the TE applying penalties under contract for travel services.
- 31.3. The insurance indemnity in any case shall be paid within the sum insured, less:
 - 31.3.1. deductible amount, provided for in p. 9 of Part 1 of this Contract, if the penalties of TE shall not exceed 85% of eligible costs incurred by the Insured (the Insured person) to purchase a package of travel services. Where the penalty is not less than 85% - the Insurer shall pay insurance indemnity amounting to 75% of eligible costs incurred by the Insured (the Insured person).
 - 31.3.2. amounts indemnified by third party;
 - 31.3.3. amounts indemnified by another Insurer under such insured event. If property losses are insured with several Insurers and aggregate sum insured exceeds their actual size, insurance indemnity to be paid by all Insurers shall not exceed the actual amount of loss. In this case each Insurer shall pay indemnity pro rata the amount of the sum insured under the insurance contract concluded by it.

32. Procedure of insurance indemnity payment

- 32.1. The amount of insurance indemnity shall be paid upon complete establishment of the causes and amount of loss. Payment of insurance indemnity shall be made under this Insurance contract on the basis of the Insured's claim and Claim report, which shall be issued and signed by the Insurer (its representative).
- 32.2. Within 15 (fifteen) working days after receipt of all required documents and information about the circumstances of the insured event occurrence, the Insurer shall decide to pay insurance indemnity and issue the respective Claim Report, or shall decide to decline an insurance claim.
- 32.3. In case of decision to pay insurance indemnity, payment to the Insured shall be made within 15 (fifteen) working days after the date of signing the Claim report.
- 32.4. If it is decided to decline an insurance claim, the Insurer shall provide a written notice to the Insured of such decision, specifying the reasons for refusal within 15 (fifteen) working days after the date of such decision.
- 32.5. The Insurer shall have the right to postpone payment of insurance indemnity, if:
 - 32.5.1. the Insurer has doubts about validity of the information and documents provided by the Insured. Term of decision on recognition of an event as insured shall be extended for a period of the Insurer's receiving supporting documents from organizations, enterprises and institutions that have the necessary information, but such period shall not exceed ninety (90) calendar days after receipt of all necessary documents and information about circumstances of an insured event occurrence;
 - 32.5.2. if the documents provided shall not allow establishing the circumstances, causes, and amount of loss. In this case the Insurer shall have the right to assign an investigation to establish the circumstances and causes of losses. In this case a Claim report shall be executed by the Insurer within 3 (three) working days after receipt by the Insurer of final results of such investigation, but not later than in 90 (ninety) calendar days from the date the Insured's claim for payment of insurance indemnity.
 - 32.5.3. if internal affairs authorities initiated a criminal case regarding the Insured, related to an event that can be recognized as an insured event - until the end of criminal proceedings.

Section 4. General insurance conditions

33. Rights and obligations of the Parties

33.1. *The Insured shall have the right to*

- 33.1.1. to get acquainted with the terms and conditions of the Contract and the Rules;
- 33.1.2. receive insurance indemnity in case of insured event under the terms of this Contract and the Rules;
- 33.1.3. to amend the terms of this Contract and to early terminate this Contract under conditions stipulated by the Rules and this Contract;
- 33.1.4. submit a written application to the Insurer for issue of a duplicate Insurance contract, if it is lost during the validity period of the Contract. After issuing a duplicate the lost copy of the Contract shall be invalid and insurance indemnity shall not be paid under it;
- 33.1.5. to appeal in accordance with the effective laws of Ukraine the Insurer's refusal to pay insurance indemnity or the amount of insured indemnity paid.

33.2. *The Insured shall be obliged to*

- 33.2.1. at the conclusion of this Contract to provide the Insurer with all needed reliable information to assess the insurance risk and execute this Contract;
- 33.2.2. notify the Insurer of all contracts entered into before or concluded regarding the subject matter of this Contract;
- 33.2.3. to timely pay the insurance premium in amount and terms set by this Contract.
- 33.2.4. upon changes in the degree of risk or other significant circumstances concerning the subject matter hereof, upon detection of any circumstances that have led or may lead to the insured event occurrence, to notify the Insurer in writing within two (2) working days;
- 33.2.5. in case of amendments and additions to the contract of travel services - notify the Insurer in advance in writing;

- 33.2.6. in the case of total or partial indemnification of damages by third party or reduction of losses in any other way, immediately (but not later than in five (5) working days (excluding weekends and holidays) notify the Insurer in writing;
- 33.2.7. assist the Insurer in investigation of circumstances of event occurrence, which has features of an insured event;
- 33.2.8. during the period specified in this Contract, to inform the Insurer in writing of events occurrence that may be considered as insured events.
- 33.2.9. to keep confidential relationship with the Insurer, not allow disclosure of information being a trade secret to third party.

33.3. *The Insurer shall have the right to*

- 33.3.1. to verify the information provided by the Insured, to request additional documents essential for determination of the degree of risk, and to verify documents of the Insured with respect to issues relating to this Contract at any time of its validity period.
- 33.3.2. in case of increase in the degree of risk regarding the subject of Insurance contract, to require the Insured to make amendments to this Contract, including payment of additional insurance premium or to terminate this Contract after the Insured's refusal, under the terms hereof;
- 33.3.3. independently investigate the causes and circumstances of an insured event, request the Insured to provide information required for establishing the fact of occurrence and circumstances of an insured event or amount of insurance indemnity, including information being a trade secret.
- 33.3.4. request competent authorities to provide the respective documents and information to confirm occurrence and cause of an insured event and the amount of loss;
- 33.3.5. deny or delay payment of insurance indemnity in cases stipulated by the Rules and this Contract;
- 33.3.6. initiate amendments and additions to the terms of this Contract and to early terminate this Contract in the manner and under conditions stipulated by the terms and conditions of this Contract;
- 33.3.7. demand return of insurance indemnity paid to the Insured, if the Insured received indemnity for damages from third party or in event of circumstances stipulated by the current legislation of Ukraine, conditions of the Rules and this Contract which in whole or in part deprive the Insured of its right to receive insurance indemnity.

33.4. *The Insurer shall be obliged to:*

- 33.4.1. to familiarize the Insured with conditions of this Contract and the Rules;
- 33.4.2. make efforts to execute all required document for prompt payment of insurance indemnity to the Insured within 2 (two) working days after receipt of information about the insured event occurrence;
- 33.4.3. upon receiving notification from the Insured about the increase the degree of risk or other significant circumstances concerning the subject of Insurance contract, to make amendments to this Contract within five (5) working days or to terminate it with written notification of the Insured in the manner provided by this Contract;
- 33.4.4. to pay insurance indemnity within the period stipulated by the Insurance contract upon insured event occurrence.
- 33.4.5. to keep the information about the Insured and its property confidential, except as provided by the legislation of Ukraine.
- 33.4.6. provide written notice to the Insured in case of refusal to pay insurance indemnity, giving reasons for such decision.

34. *Sum Insured. Insurance Premium. Validity period and territory of the Contract*

- 34.1. Sum insured shall mean an amount of money within which the Insurer shall make insurance claim payments under the terms of insurance.
- 34.1.1. The sum insured amounts under each type of insurance shall be determined by agreement between the Insurer and the Insured during execution of an Insurance contract or when making amendments thereto.
- 34.1.2. A single sum insured shall be set for all services under each type of insurance based on limits of liability established by insurance programs.
- 34.1.3. The total amount of insurance claim payments under insured events for individual services of an insurance program shall not exceed the relevant limits and the total sum insured set by this Contract.
- 34.1.4. The Insurer shall not be liable or indemnify the portion of losses in excess of the sum insured (corresponding limit of liability) under provisions hereof.
- 34.2. The Insured shall pay insurance premium to the Insurer as payment for insurance.
- 34.2.1. The insurance premium shall be paid in amount and within the period specified in this Contract.
- 34.3. The Insurance contract shall become effective on the date specified in this Insurance contract as the inception date of the Contract, but not before receipt of the first insurance premium instalment on the Insurer's account, unless otherwise provided by this Contract.
- 34.3.1. Insurance contract shall be concluded for the period of trip, not exceeding one year. Liability of the Insurer shall commence only after crossing by the Insured (the Insured person) the border of a country of residence, except for travel insurance within Ukraine and financial risks insurance related to losses incurred due to cancellation of travel (Section 3 of this Contract), and shall be similarly terminated upon return of the Insured (the Insured person) to the country of residence.
- 34.3.2. The Insurance contract may establish a maximum number of days during which the Insurer shall be liable upon crossing the border by the Insured (the Insured person), namely: as a whole (total limit of stay abroad) and under one trip abroad (duration of one trip).
- 34.3.3. If at the end of the term of this Contract, return of the Insured (the Insured person) from abroad (or from a trip within Ukraine to its permanent residence) is not possible as a result of an accident or illness with appropriate medical conclusion, the Insurer's liability in this case shall be extended further for the period not exceeding 21 days from the date of expiry of this Contract. The Insurer shall not be liable for other cases that arose during this period.

35. *Reasons for refusal to pay insurance indemnity*

- 35.1. The reasons for refusing to pay insurance indemnity shall be:
- 35.1.1. intentional actions of the Insured (the Insured person) aimed at the insured event occurrence. The mentioned provision shall not apply to actions related to civil or official duty carried out in a state of necessary defence (not exceeding its limits) or defence of property, life and health. Qualification of such actions of the Insured (the Insured person) shall be determined in accordance with the effective law of Ukraine.
- 35.1.2. commitment by the Insured (the Insured person) of an intentional crime, which led to the insured event;
- 35.1.3. an event occurrence during war and war-like actions of any kind, civil unrest any anti-terroristic operations actions;
- 35.1.4. submission by the Insured (the Insured person) of deliberately false information about the subject matter of the Contract (insurance) or the circumstances of an insured event occurrence;
- 35.1.5. fraud or other acts of the Insured (the Insured person) aimed at obtaining illegal benefits from insurance;
- 35.1.6. late notification by the Insured (the Insured person) about an event occurrence with signs of the insured one, without valid reason or creating obstacles to the Insurer in investigation of circumstances of insured event, in determining of the loss nature and amount;
- 35.1.7. failure of the Insured to comply with obligations specified in this Contract;
- 35.1.8. failure of the Insured to provide documents specified hereunder and required for decision to pay indemnity out;
- 35.1.9. An event occurrence which are subject to Exclusions from insured events and insurance limitations indicated in p.21 of the Contract;
- 35.1.10. late payment of the insurance premium;
- 35.1.11. self-treatment or cases of treatment by a person who does not have appropriate medical education, medical treatment violation and failure to comply with doctor's recommendations;
- 35.1.12. use medications without doctor's prescription;

35.1.13. use of alcohol, narcotic or toxic substances.

35.2. The Contract shall not indemnify the expenses occurred as the result of:

35.2.1. intentional self-inflicted injuries of the Insured person, suicide, attempted suicide, mental disorders in a dangerous stage (excluding attempts to rescue a human life);

35.2.2. impact of ionizing radiation or nuclear fuel radiation, or any radioactive waste of its production or due to the impact of any radioactive, toxic or explosive materials of nuclear production or components of these substances;

35.2.3. any type of vehicle (road, water or air) driving by the Insured person without proper training and a driving licence existence or vehicle control transferring to a person without proper training and a driving licence existence or influenced with alcohol, narcotic, toxic or hypnotic substances, or tranquilizers.

35.2.4. driving a motorcycle (motorbike) or a scooter (moped) if its engine capacity exceeds 50 cubic centimetres;

35.2.5. higher disability group receiving by the Insured person during the validity period of the Contract if compare with the III disability group, which has been taken before the commencement date of the Contract;

35.2.6. wagering (bet) or any risking actions by the Insured person on the wagering (bet) conditions;

35.2.7. other cases stipulated by the Rules and effective law of Ukraine.

36. The procedure of the Contract termination and amendment

36.1. Validity of the Contract shall be terminated and null & void under the consent of the Parties, and also:

36.1.1. At expiration of the term of the Contract.

36.1.2. Upon the Insurer's full fulfilment of obligations under the Contract - after the date of final settlement between the Contract Parties.

36.1.3. Upon non-payment of the insurance premium by the Insured in the terms stipulated by the Contract.

36.1.4. In case of liquidation of the Insurer – legal entity or death of the Insured – private individual or loss of its capacity.

36.1.5. Upon liquidation of the Insurer in the manner specified by the effective law of Ukraine.

36.1.6. If the court has recognized the Contract as null & void.

36.1.7. In case of early termination of the Contract at the request of either Party – after the day, following the day indicated in the written notice of the fact of termination. The Parties shall be obliged to notify each other in writing about intention to terminate the Contract no later than in 30 calendar days before the date of termination of the Contract.

36.1.8. In other cases stipulated by the effective law of Ukraine.

36.1.9. The Contract may be terminated at the request of the Insured or the Insurer under the terms and conditions of this Contract.

36.1.10. In a case of early termination of this Contract on request of the Insured, the Insurer shall return to the Insured the insurance premium for the period remained until the expiry date of the Contract decreasing it by the expenses to maintain the case amounting to 40% of the Medical expenses insurance premium and 30% of the Travel accident and Travel cancellation insurance premiums as specified in calculation of the insurance rate and by actual insurance indemnities which have been made under this Contract. If the request of the Insured is caused by the Insurer's failure to comply with insurance terms and conditions, the Insurer shall return paid insurance premium to the Insured in full.

36.1.11. In a case of early termination of this Contract on request of the Insurer, the Insured shall be refunded with full amount of the insurance premium paid. If the request of the Insurer is caused by Insured's failure to comply with the insurance terms and conditions, the Insurer shall return to the Insured the insurance premium for the period remained until the expiry date of the Contract decreasing it by the expenses to maintain the case amounting to 40% of the Medical expenses insurance premium and 30% of the Travel accident and Travel cancellation insurance premiums as specified in calculation of the insurance rate and by actual insurance indemnities which have been made under this Contract.

36.1.12. The Parties agreed that there shall be no refunds in cash if the insurance premiums were paid in cashless form in a case of early termination.

36.1.13. Amendments to this Contract shall be made under consent of the Insured and the Insurer based on application of either Party within three (3) business days of receipt of the application by the other Party and shall be executed in the form of an additional agreement which becomes an integral part of the Contract upon signature by the Parties. If the Parties fail to agree on making amendments to the Contract within this period, the Party requiring these amendments shall be entitled to early terminate the Contract. The Contract shall be terminated upon 30 (thirtieth) day from the date of written notification of any of the Parties on implementation of the other Party of its right to terminate the Contract in compliance with p. 36.1.11. - 36.1.12.

37. Dispute settlement

37.1. Disputes arising hereunder shall be resolved through negotiations, and if no agreement is reached - in a court.

38. Miscellaneous.

38.1. Other relationships associated with insurance terms and conditions under this Contract, which are not regulated hereunder, shall be governed by the effective law of Ukraine.

38.2. By signing this Contract, in accordance with the Law of Ukraine "On personal data protection" dated June 01, 2010 No. 2297-VI, the Insured – private individual gives its irrevocable consent for processing of its personal data and personal data of the Beneficiary by the Insurer for the purpose of insurance operations and related financial and economic operations and for maintaining internal databases of the Insurer. The aforementioned processing may also be conducted by a third party, authorized by the Insurer under the effective law of Ukraine. The Insured certifies that it is acquainted with its rights granted in the Law of Ukraine "On personal data protection" No. 2297-VI dated June 01, 2010 and informed that after the conclusion of this Contract personal data of the Insured, the Insured person and the Beneficiary specified herein shall be included to the personal database of the Insurer.

38.3. With its signature the Insured confirms the fact of receipt from the Insurer, at conclusion of this Contract, all information in accordance with p. 2 of art. 12 of the Law of Ukraine "On financial services and state regulation of financial services" dated July 12, 2001 No. 2664-III (as amended and supplemented) in full. The Insured confirms that received information provides correct understanding of such financial services without forcing its purchase.

INSURER

"Insurance Company "BROKBUSINESS"

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tel./fax (044) 246-67-22

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USREOU 20344874



Annex No.1

THE MAIN PROGRAMS

| Program | Expenses to be indemnified by the Insurer | Limits and restrictions |
|---------|--|---|
| A1 | Medical aid | Within the sum insured |
| | Medical transportation | EUR/USD 300 |
| | Emergency dental care | EUR/USD 150 |
| B1 | Expenses under A1 program | Within the above limits |
| | Medical repatriation/posthumous repatriation | EUR/USD 10 000 |
| C1 | Expenses under B1 program | Within the above limits |
| | Expenses for visit of a close relative (if the Insured person stays in a hospital for more than 10 days) | Travel of one person in economy class. EUR/USD 400 in aggregate; Accommodation in a hotel for up to five (5) days with payment up to EUR/USD 50 per night of stay |
| | Early return in a case of death of the Insured person's closest relatives | Travel in economy class, EUR/USD 400 |
| | Early return of the Insured person's children under 16 years | Travel in economy class, EUR/USD 400 |

Travel Insurance Program D1 (For those travelling for work and/or study)

| Program | Expenses to be indemnified by the Insurer | Limits and limitations |
|---|--|------------------------|
| D1 | Medical care | Within the sum insured |
| | Medical transportation | Within the sum insured |
| | Medical repatriation/posthumous repatriation | Within the sum insured |
| | Emergency dental care | EUR 150 |
| Sum insured is EUR 30,000 | | |
| Special Terms and Condition of the Program: | 1. Period of insurance – from 1 month to 1 year | |
| | 2. The territory of the Contract – Europe, the countries of the Schengen Agreement | |
| | 3. Age of the Insured Persons – From 14 to 64 years (inclusive) | |
| | 4. Purpose of the trip – Work, study | |

Medical expenses insurance F1 (outside the territory of Ukraine)

| Program | Expenses to be indemnified by the Insurer | Limits and restrictions |
|---|--|--|
| F1 | Medical aid | Within the 1% of the sum insured limit |
| | Medical repatriation/posthumous repatriation | EUR/USD 3000 |
| The sum insured amounted to EUR /USD 30 000 | | |
| Other conditions of the Program | 1. The program provides insurance for traveling abroad only on terms of obtaining Multivisa or visa for a period of 1 year | |
| | 2. The Contract is valid only up to the first insured event | |
| | 3. Territory covered – Europe, Schengen countries | |
| | 4. Age of the Insured persons shall be from 17 to 50 | |
| | 5. Purpose of travel: Tourism, holiday; Work, education; Official/Business trip. | |

Travel cancellation insurance. Insurance risks under financial risks insurance program incurred due to travel cancellation

Insurance risks

1. Death of the Insured (the Insured person) or a member of its family, parents, mother, full siblings
2. Sudden health disorder: emergency surgery, stay in a hospital for more than 5 (five) calendar days inclusive, injuries of severe complexity of the Insured (the Insured person) or a member of its family, during the validity period of the Contract, if there is a medical prescription prohibiting travel and need for treatment (if there is no other capable direct relatives - in case of need to nurse injured family members of the Insured (the Insured person), infectious diseases that require isolated treatment (quarantine appointment);
3. Damage, destruction of property of the Insured (the Insured person) during the validity period of the Contract due to fire, explosion, natural disasters, illegal actions of third party in event if settlement of consequences of such damage requires the immediate presence of the Insured (the Insured person) at the place of an event and / or objectively impede the implementation of previously planned travel,
4. The need for participation of the Insured (the Insured person) in court and presence at hearings, if the Insured (the Insured person) is a defendant, witness or if presence is necessary under a court order, under condition that the fact of such hearing in the period of planned trip which objectively prevent its implementation, was not known to the Insured (the Insured person),
5. Official announcement of the country (region, city) of residence or the country of temporary stay (the place of booked travel: region, city) as a disaster zone, and in case of carriers strike, national unrest, epidemics, terrorist acts,
6. Cancel of airline flight due to closure of airspace over the territory of the country of temporary stay due to natural disasters and environmental influences,
7. Non-receipt of the Insured (the Insured person) of visa to the country of temporary stay in case of timely submission of full documentation, required to obtain a visa and which meets the requirements of the consulate (embassy) of the country of temporary stay, subject to absence of previous visa refusal to a country, where trip for all Insured persons is planned;
8. Being late for the flight due to an accident, traffic accidents or breakdown of a public transport (except taxis) on which the Insured (the Insured person) was going to the airport or railway station, and in case of late arrival of flight from another city;
9. Bankruptcy of a tour operator (provided that the tour operator is a resident of Ukraine) during the validity period of the Contract.

INSURER

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