

TRAVEL INSURANCE TERMS AND CONDITIONS NO. 761

Valid from 15.07.2013



1. DEFINITIONS

- 1.1. Insurer** – AB "Lietuvos draudimas" Estonian Branch.
- 1.2. Policyholder** – a person who has entered into an Insurance Contract with the Insurer.
- 1.3. Insured Person** – the Policyholder or a third party who is or is not specified by name, whose permanent residence is in the Republic of Estonia and the Insured Risk related to whom is insured.
- 1.4. Insured Risk** – a danger that is not dependent on the will of the Insured Person and may materialise in the future, against which the Insured Person is insured on the conditions specified in the insurance contract.
- 1.5. Travelling Companion of the Insured Person** – a person with whom the Insured Person has planned to go travelling and has booked a travel package.
- 1.6. Family Members of the Insured Person** – a spouse/partner and children of the Insured Person who form part of a common household.
- 1.7. Close Relatives of the Insured Person** – a grandchild, mother, father, grandparent, sister, brother, mother-in-law, father-in-law, daughter-in-law, son-in-law, other relative and/or relative by marriage for whom the Insured Person has an obligation to care.
- 1.8. Claims Handling Partner** – a person specified in the policy who shall arrange for the handing of an insurance event outside the Republic of Estonia, if necessary.
- 1.9. Insurable Interest** – the interest of the Insured Person to insure himself/herself against a specific Insured Risk.
- 1.10. Insured Object** – insurable proprietary interest, which is related to the life, health, assets or civil liability of a person.
- 1.11. Insurance Contract** – standard terms and conditions of insurance contracts prepared by the Insurer, comprising:
- General Terms and Conditions of Insurance Contracts;
 - Terms and Conditions of the insurance type;
 - Special conditions of the insurance type.
- 1.12. Insurable Value** – value of the insurable asset or proprietary risk.
- 1.13. Injured Third Party** – in case of civil liability insurance – a person to whom the Policyholder or Insured Person has caused damage.
- 1.14. Trip** – temporary stay of the Insured Person outside the Republic of Estonia, with the consecutive duration of up to one year. The origin and ending point of a Trip is understood as the crossing of the state border of the Republic of Estonia.
- 1.15. Transit Point of the Trip** – a place outside the Republic of Estonia (including a port, airport, train station or bus station), which is used by the Insured Person for continuing the Trip to the next Transit Point or to the destination or ending point of the Trip (including arrival in the Republic of Estonia). If one destination point of a Trip cannot be unambiguously determined (for example in case of tours), the points passed through during the Trip are deemed to be Transit Points.
- 1.16. Limit of Indemnity** – the maximum amount to be compensated per Insured Risk during the insurance period. The Limit of Indemnity applies to each Insured Person separately, except for the Limit of Indemnity for liability insurance and luggage insurance in case of

family travel insurance that is applicable to all family members jointly who are specified in the policy. In case of annual multi-Trip insurance, limits of indemnity apply to each Trip separately. Certain indemnities are subject to additional limits as specified in the terms and conditions.

- 1.17. Territory of Validity** – a territory specified in the policy where the insurance cover applies.
- 1.18. Means of Regular Transport** – means of public transport, that drive along a specific route according to the prescribed driving schedule, including taxi.
- 1.19. Chronic Disease** – health condition as at the time of entry into the insurance contract (even if it is not correctly diagnosed or its existence has not yet been confirmed by a qualified doctor) and/or due to which the Insured Person attended a consultation, treatment or consumed medicaments during the last six months until the date of entry into the insurance contract.
- 1.20. Medically Necessary Services** - mean the first emergency medical care at personal health care establishments (both out- and in-patient) abroad, which is provided because of the threat to health of the Insured and which cannot be postponed until the Insured returns to the country of which he/she is a citizen or in which he/she permanently resides or holds a permit to reside permanently.

2. ENTRY INTO FORCE, VALIDITY AND EXPIRY OF THE INSURANCE CONTRACT

- 2.1.** The insurance contract enters into force on the date specified in the insurance policy at 00:00 (according to the Estonian time) unless otherwise specified in the policy, but not earlier than after the payment of the entire insurance premium.
- 2.2.** The insurance contract may be a fixed-term or continuous contract. Unless otherwise specified in the insurance contract, the insurance contract is deemed to have a fixed term.
- 2.3.** The insurance contract enters into force when the Policyholder has paid the Insurer or a broker who sold the insurance the insurance premium by the deadline and in the amount specified in the invoice or policy.
- 2.4.** The insurance premium must be received as one instalment by the deadline specified in the invoice. If the insurance premium is not received by the agreed deadline, the insurance contract is not deemed to be entered into force and the Insurer is released from the obligation to perform the insurance contract.
- 2.5.** By paying the insurance premium, the Policyholder confirms that he/she agrees to enter into the contract under the conditions agreed upon, has examined and consented to the terms and conditions of insurance, and undertakes to comply with them.
- 2.6.** The Policyholder is required to introduce the conditions of the insurance contract to the Insured Person(s), who have granted their consent to enter into the contract with regard to him/her (them).
- 2.7.** The Insured Persons' failure to comply with the requirements specified in the insurance contract is deemed to be violation of the insurance contract by the Policyholder.
- 2.8.** The insurance cover is not valid in the Republic of Estonia or a foreign country where the Insured Person

permanently resides, except for travel interruption/cancellation insurance cover, which is valid from the commencement date specified in the policy if the travel interruption is caused by the events specified in clause 4.2. Permanent residence is a place where a person lives more than 180 days per year.

- 2.9.** If return to the Republic of Estonia delays due to the insured event, the insurance period shall be prolonged by two calendar days.
- 2.10.** The insurance contract shall expire upon expiry of the insurance period on the date specified in the insurance policy at 24:00 (according to the Estonian time), by agreement of the parties or in any other event specified in the legislation or insurance contract.
- 2.11.** If the Policyholder wants to cancel the insurance contract prior to its term and an insured event has not taken place, in a format which can be reproduced in writing application shall be submitted to the Insurer. For the unused insurance period, the insurance premium paid by the Policyholder shall be repaid.

3. MEDICAL CARE INSURANCE

- 3.1.** The medical care insurance event is:
- 3.1.1.** unexpected severe illness of the Insured Person the symptoms of which appear first during the Trip (meaning that it has not been diagnosed by the doctor for the Insured Person immediately before the beginning of the Trip) and for the treatment of which the Insured Person needs urgent medical care in a foreign country;
- 3.1.2.** an accident that has happened to the Insured Person, meaning an unexpected event caused by an external influence and not dependent on the will of the Insured Person, for the treatment of health damage caused by which the Insured Person needs urgent medical care in a foreign country;
- 3.1.3.** death of the Insured Person in a foreign country.
- 3.2.** In case of a medical care insurance event, only the following expenses related to a disease that started during a Trip shall be compensated:
1. emergency and necessary ambulatory and/or hospital treatment costs in a foreign country;
 2. necessary and substantiated expenses of examinations determined by a doctor for identifying the disease or providing treatment in a foreign country;
 3. expenses of medicaments prescribed by a doctor in a foreign country;
 4. substantiated expenses for medical aids purchased on the basis of a doctor's prescription in a foreign country if such aids have been prior agreed upon with the Insurer;
 5. first aid dental expenses in a foreign country in the amount of up to EUR 200 per insurance period;
 6. expenses for unexpected complications of pregnancy in a foreign country in the amount of up to EUR 1500 if the complication occurred before the 28th pregnancy week and it appeared for the first time, as a result of which the Insured Person needs urgent medical first aid, except for the events specified in clause 8.1.11;
 7. necessary transport and accommodation expenses of an injured or ill person in a foreign country, which are necessary for receiving health care;
 8. unavoidable and substantiated transport and accommodation expenses of a physically injured or ill Insured Person (including those of a medical companion) necessary for repatriation to the Republic of Estonia if such expenses have been prior agreed upon with the Insurer;
 9. unavoidable and substantiated transport and accommodation expenses of one person accompanying the Insured Person (return Trip) in a foreign country in the amount of up to EUR 100 per day, but not more than for seven days, as prior agreed upon with the Insurer;
 10. repatriation of the Insured Person's children under the age of 16 years who have been left without adult supervision due to the acute illness, bodily injury or death of parents (foster parents, caregiver) in a foreign

country to the Republic of Estonia. The need for such expenses must be confirmed by the Insurer in a format which can be reproduced in writing.

11. upon death of the Insured Person, funeral expenses (except for funeral banquet, travel expenses of persons attending the funeral) or costs for transporting the body or ashes to the Republic of Estonia in the amount of up to EUR 10,000;
 12. medical treatment costs for exacerbation of a chronic disease in the amount of up to EUR 1500 provided the exacerbation of the disease was not medically predictable and travelling was not contraindicated
- 3.3.** The following damage and expenses shall not be compensated:
1. which exceed the limit of urgent medical care, including expenses for procedures or examinations the medical indication of which enables returning to the final destination of the Trip;
 2. which are related to prophylactic examination, vaccination or other preventing action;
 3. which are related to the procedures and medical services provided without the doctor's prescription;
 4. which are related to venereal diseases, AIDS or diseases caused by HIV. Upon the initial diagnosis, the necessary expenses are compensated until determination of the diagnosis in the amount of up to EUR 1000;
 5. which are related to oncological diseases. Upon the initial diagnosis, the necessary expenses are covered until determination of the diagnosis;
 6. which are related to beauty parlour, tattoo services, rehabilitation, cosmetic or plastic treatment or their consequences;
 7. which are related to the use of alternative treatment method or the consequences of its use;
 8. which are related to prosthesing, acquisition of prostheses, orthopaedic, hearing and visual aids, etc., except when those are related to an insurance event of medical care subject to compensation and those expenses have been prior agreed upon in a format which can be reproduced in writing with the Insurer;
 9. which are related to the purchase of medicaments which are necessary due to the current health condition of the patient or at the time of purchasing a policy it is known that those are required during the Trip;
 10. which are related to the purchase of medicaments not prescribed by the doctor;
 11. which is caused by a disease, disability that started before entry into the insurance contract, exacerbation of injury consequences or a disease, duration of treatment; which is caused by the fact that the Insured intentionally did not apply all measures to reduce the consequences of an insurance event and facilitate recovery;
 13. which is subject to compensation on the basis of the health insurance system, other health insurance contract or legislation;
 14. which is related to planned treatment (including dental treatment);
 15. treatment in an inpatient health care facility, medical transportation to Estonia, the transportation of the insured person's remains or funeral expenses if the Insurer's in a format which can be reproduced in writing consent was not received.
- 3.4.** Validity of an insurance contract upon doing sports and working
- 3.4.1.** If the Insured Person is engaged in the activities specified in the following list in a foreign country, the policy must bear a notation "Sport":
1. oaring, rowing;
 1. archery, crossbow shooting, clay pigeon shooting;
 2. golf;
 3. cross-country skiing, biathlon;
 4. swimming, water polo;
 5. fencing;
 6. dance sport, gymnastics;
 7. cycling;

8. track and field, orienteering;
 9. basketball, volleyball;
 10. bodybuilding;
 11. shooting;
 12. skating, roller-skating;
 13. floorball;
 14. tennis, badminton, squash, table tennis.
- 3.4.2. If the Insured Person is engaged in the activities specified in the following list in a foreign country, the policy must bear a notation "high-risk activity":
1. alpine skiing, amateur snowboarding or snowmobiling on tracks marked by winter sports centres; hobby diving to the depth of 10 m to 20 m, having undergone special training and holding a licence for this (if no licence exists, the insurance cover is not applicable); water sports for which a motor vehicle is used;
 2. participation in mountain hikes intended for tourists and lasting for over three consecutive days (up to the height of 3000 m), water hikes along waterfalls, rapids, rivers. The insurance cover is applicable provided the Trip takes place on trails prepared and marked for this purpose, where the local rescue service, Trip organiser or an appropriately licenced Trip attendant ensures supervision, safety and first aid, and if no special equipment is used during the Trip, and glaciers, gorges with a category, peaks or rapids are not passed through;
 3. training (not as an amateur) in the following areas of sports: equestrian sport, strength athletics (weightlifting or powerlifting), kart racing, football, ice hockey, basketball, handball, baseball, cycling, triathlon, judo, wrestling;
 4. participation in training camps and/or as a competitive athlete in league, championship, and international contests, Olympic games and other contests (except for chess and other unphysical fields);
 5. participation in sailing cruises lasting for up to three consecutive days;
 6. participation in military training and exercises provided those are not taking place in crisis areas and are organised for educational and training purposes;
- 3.4.3. If the Insured Person works in a foreign country as a builder, long-distance driver, or as a worker of metal, forestry, agriculture, (foodstuffs) industry and/or other manufacturing industry or in a similar area or profession requiring a similar physical effort, the policy must bear a notation "high-risk work".
- 3.4.4. The insurance cover of medical care does not apply in case of the following activities:
1. alpinism, ice, rock, wall and mountain climbing, speleology, rafting and other similar fields;
 2. doing winter sports outside the marked trails of winter sports centres;
 3. motorsport (ATV and rally racing, motorcycling, snowmobiling and other similar fields), including motorsports training, participation in testing motor vehicles;
 4. air sport, gliding, riding a hot air balloon, glider, hang glider, ultra-light aircraft or amateur-built aircraft, parachute and bungee jumps;
 5. underwater sports, including diving to the depth of over 20 m;
 7. extreme sports (down-hill cycling, free-ride cycling, bicycle and skateboard tricks, acrobatics, rugby, downhill racing, hell-ski, kite and wave surfing, etc.) ;
 8. doing karate, box (including Thai-boxing, kickboxing, etc.) or other combat sports;
 9. expeditions and Trips to mountains, jungles, deserts, wild areas without a professional companion;
 10. sailing on the high-seas (arriving at ports not more frequently than on three consecutive days);
 11. working as a miner, fisherman, seaman, policeman, deminer, security guard, rescuer, stuntman, members of ship or airplane crews;
 12. participation in any military activities (peacekeeping missions, active military service, border guard service) or working in any areas or professions where the Insured Person bears or uses a firearm to perform the duties;
13. staying in the crisis area as an observer, staff officer or for other similar reasons (medical staff in a catastrophe area, etc.)
 14. doing other sports comparable with the aforementioned ones, or engaging in hobbies or activities posing a higher than usual risk to get bodily injuries, become ill or die.

4. TRAVEL INTERRUPTION INSURANCE

- 4.1.** Travel interruption means cancellation, interruption of a Trip and late arrival for it.
- 4.2.** Cancellation of a Trip means that a booked and purchased Trip does not take place, caused by the following event that took place immediately before the beginning of the Trip:
1. illness, accident or death of the Insured Person, his/her family member or the sole travel companion;
 2. life-threatening condition or death of a close relative of the Insured Person;
 3. deterioration of property of the Insured Person located in the Republic of Estonia, due to which the personal presence of the Insured Person is inevitably required;
 4. non-departure of a Means of Regular Transport due to a traffic accident, technical failure or weather conditions provided the Insured Person has made his/her best efforts that a Trip under the travel package could take place;
 5. a vehicle that is used to travel to the origin or Transit Point of the Trip gets into a traffic accident.
- 4.3.** The insurance cover for Trip interruption/cancellation takes effect on the third day after entry into force of the policy provided payment for the policy has been made in a timely manner.
- 4.4.** Cancellation of a Trip is also understood as premature return from the Trip due to a travel interruption insurance event if the Insured Person returned from the Trip at the latest within the first 24 hours at the first Transit Point.
- 4.5.** Travel interruption means the interruption of an already started Trip and the return to the Republic of Estonia for the following reasons:
1. unexpected and severe illness, serious bodily injury or death of the Insured Person, his/her family member or travel companion;
 2. life-threatening condition or death of a close relative of the Insured Person;
 3. traffic accident to a vehicle that is used for travelling or theft of the vehicle if the Trip cannot be continued for that reason;
 4. deterioration of the property of the Insured Person located in the Republic of Estonia, due to which the personal presence of the Insured Person is inevitably necessary.
- 4.6.** Late arrival for a Trip is a situation where the Insured Person arrives late at the origin, destination or Transit Point of the Trip for the following reasons:
1. the Means of Regular Transport by which the Insured Person has planned to travel does not depart or is late due to a traffic accident, severe weather conditions or unexpected technical failure;
 2. a vehicle that is used to drive to the origin, destination or Transit Point of the Trip has got into a traffic accident.
- 4.7.** Illness is unexpected deterioration of the Insured Person's health condition which starts during a Trip or the first symptoms of which appear during the Trip and for the treatment of which the Insured Person needs urgent medical assistance.
- 4.8.** Accident is an unexpected, sudden event that takes place during a Trip, being caused by external effect and which is not dependent on the will of the Insured Person, which results in bodily injury or death of the Insured Person. Also an event beyond control of the Insured Person for the treatment of health damage

caused by which the Insured Person needs urgent medical assistance and due to which continuance of the Trip is not recommended.

- 4.9.** Damage that is compensated on the basis of travel interruption insurance:
1. Upon cancellation of a Trip, the cost of a part of travel package that has been bought or irreversibly ordered and must be bought (rental of hotel rooms, air tickets, car rental, concert tickets, excursions) which the Insured Person or Policyholder may not reclaim from the Trip organiser or service provider related to the Trip.
 2. Upon interruption of a Trip, reasonable and substantiated additional expenses shall be compensated which are related to the transport and accommodation if the Insured Person prematurely returns to Estonia. If the Trip is interrupted within the first 24 hours, the cost of the unused part of the travel package shall be also compensated.
 3. Upon late arrival for a Trip, the additional costs of ticket exchange or the costs for using an alternative means of transport which are necessary for reaching the destination shall be compensated in the lowest price class that is available. In addition, reasonable and necessary additional accommodation expenses shall be compensated. If the beginning of a Trip is delayed due to an insurance event, the unavoidable accommodation expenses of the Insured Person shall be compensated if the Insured Person lives over 50 km from the origin point of the Trip.
 4. Upon a change in the schedule of regular flight by an air company after the tickets have been bought, overbooking of a plane or, upon congestion of planes at the airport, substantiated additional expenses for transport and accommodation which are necessary for reaching the destination point or Estonia shall be compensated.
 5. The indemnity or compensation, which the Insured Person has the right to receive from the tour operator, transport company or other service provider, shall be deducted from the amount of indemnity.
- 4.10.** Damage and expenses, which are caused by the following circumstances, shall not be compensated:
1. exacerbation of consequences of a disease which started or an injury which occurred before entry into an insurance contract or the beginning of an insurance cover of travel cancellation, or continuance of medical treatment;
 2. a chronic disease of the Insured Person or its exacerbation;
 3. pregnancy of the Insured Person or a complication caused by it, childbirth;
 4. a psychiatric or psycho-neurotic condition or disease of the Insured Person (including stress reaction, depression, anxiety disorder, etc.);
 5. deficient travel documentation (including, but not limited to, passport/ID card, visa, vaccination certificate, driving licence, etc.) or its deficient formalising;
 6. incorrectly planned travel schedule. If the travel package is not caused by a registered tour operator or travel company, the minimum time between connections must be at least two hours or correspond to the minimum time of connections prescribed in the booking systems. Upon disputes, a notation in the booking system of flight tickets shall be used for specifying the flight times and connection places;
 7. a change in the schedule of hydrofoils or domestic ferry traffic caused by weather conditions.

5. LUGGAGE INSURANCE

- 5.1.** Luggage is personal clothing and effects which the Insured Person carries along and has bought during a Trip.
- 5.2.** Valuable items in a luggage are understood as: electronic equipment (e.g. laptop computer, notebook, photo, video, multimedia equipment, phone, their

additional equipment and other items), ID documents (passport, ID card, driving licence). Requirements for storage of valuable items are set out in clause 5.6.5.

- 5.3.** Insurance events of luggage insurance are:
1. delay of the luggage that is under liability or supervision of a transport company in a foreign country by over four hour from the arrival of the Insured Person at the Transit or destination point, where the Insured Person stays at least 48 hours;
 2. theft or robbery of the luggage;
 3. loss of the luggage that is under supervision of a transport or accommodation company. The luggage is deemed to be lost if the transport or accommodation company has declared the luggage to be completely lost and has issued a certificate to this effect;
 4. damage or destruction of the luggage under supervision of a transport company or the luggage that got damaged due to the consequences of a traffic accident.
- 5.4.** The luggage that is under personal supervision of the Insured Person is not subject to the insurance cover of damage or destruction of the luggage.
- 5.5.** The following damage shall be compensated upon an insurance event of luggage insurance:
1. Upon delay of luggage, the substantiated direct expenses incurred for buying unavoidably necessary essentials (clothes, personal hygiene products, etc.) shall be compensated in the amount of up to EUR 35 per day, but not more than EUR 140 at a maximum per two insurance events during one Trip. Upon family insurance, EUR 70 is substantiated per day, in total of EUR 280 per policy at a maximum. Upon a loss caused by a delayed luggage, the deductible specified in the policy shall not apply.
 2. Upon loss or destruction of luggage, the replacement value of the luggage shall be compensated up to the Limit of Indemnity for luggage insurance specified in the policy, by taking into account depreciation of the luggage and applying the deductible specified in the policy. The replacement value is the amount of money that is necessary for obtaining a new item or an equivalent that is similar to the damaged item in Estonia, based on the value of the item at the time of damage. By agreement of the parties, the damaged item may be replaced by an equivalent.
 3. Upon determining insurance indemnity, depreciation 15 % of the cost of the item shall be calculated per calendar year. Depreciation is calculated for items with the age of over one year.
 4. The amount of indemnity of insurance payable for one item is at a maximum 50% of the insured sum of luggage insurance.
 5. Upon theft or robbery of an ID document, the direct expenses related to formalising documents in the Republic of Estonia or a foreign country shall be compensated in the amount of up to EUR 100. The deductible specified in the policy shall not apply.
 6. The Insured Person has the obligation to initially claim damage from a transport, accommodation or service company that is liable for occurrence of damage as soon as possible, but not later than within seven days after occurrence of damage.
 7. Upon a luggage insurance event, the Insurer shall compensate a difference between the direct luggage loss and the amount compensated by a transport or service company.
- 5.6.** Requirements for storage of luggage:
1. at accommodation places and means of transport, luggage must be stored in a locked space intended for that purpose; it is prohibited to keep luggage in a place that is accessible by third parties, in unattended motor vehicles, caravans or trailer. A motor vehicle where luggage is stored must be locked and be in a guarded parking lot;
 2. it is prohibited to leave personal luggage without supervision at public places (e.g. a catering establishment), tent, balcony of an accommodation

establishment, a visible place in a vehicle (e.g. car, caravan, trailer, watercraft);

3. at night time, from 22:00 to 6:00, it is prohibited to leave the luggage in a vehicle or trailer;
4. if the sports equipment (e.g. bicycles, snowboards, skis) are to be left unattended outside or in a commonly used place, they shall be locked to a prescribed base or other relevant fastening frame;
5. valuable items in the luggage must be under the continuous and immediate supervision of the Insured Person (in hand luggage while being on a plane). Valuable items may not be given to the common luggage compartment of the means of transport. At the accommodation place, the valuable items must be kept in a strongbox or, when it is not available, in a locked storage space. Valuable items may not be left without personal supervision in a motor vehicle.

5.7. Loss and expenses of luggage insurance shall not be compensated which are caused by the following circumstances:

1. incorrect use, customary use and depreciation of the luggage (e.g. scratches, damage of decorating details, etc.);
2. weather impact, except when the luggage is left in possession of a service company;
3. damage of items being in the luggage upon contact with corrosive or soiling substances, and injuries caused by sharp items;
4. theft or loss of an unattended item;
5. delay of luggage upon arrival in Estonia.

5.8. Luggage insurance cover does not apply to the following items:

1. items that by their nature or quantity imply that they have been acquired or they are transported for commercial purposes;
2. antique items, works of art, collections, musical instruments;
3. cash, bank cards, cash derivatives, securities, tickets, ID documents (except for passport or ID card);
4. drawings, directives, advertising and training materials;
5. tools, work equipment, goods, samples of goods or products;
6. glasses, sun glasses, contact lenses, prostheses and medical aids;
7. motor vehicles, trailers, caravans, boats, their spare parts, additional equipment and furnishing;
8. foodstuffs, beverages;
9. plants, animals;
10. items of glass, porcelain, ceramic or other fragile material.

5.9. Additional insurance for additional expenses related to rental of clothing and sports equipment in case of luggage delay:

- 5.9.1. I Insurance for additional expenses related to rental of clothing and sports equipment in case of luggage delay is a situation where the luggage given under supervision of an air company arrives late in a foreign country (luggage delay - see section 5.3.1 of these Terms and Conditions) or due to delay of the luggage given under supervision of an air company the Insured Person cannot catch its continuing flight provided the time between connections meets the requirements specified in clause 4.10.6.
- 5.9.2. If the policy includes a notation "Additional expenses related to rental of clothing and sports equipment in case of luggage delay", the expenses incurred in relation to luggage delay in a foreign country shall be compensated during one Trip, based on the purpose of the Trip the rental expenses for essential clothing, footwear and sports equipment in the amount of up to EUR 400.
- 5.9.3. Upon an insurance event of luggage delay, indemnity shall be paid once per insurance period and the deductible of luggage insurance specified in the policy shall apply.

6. ACCIDENT INSURANCE

6.1. Events Insured:

- 6.1.1. Bodily Injury of the Insured Person as a result of the Accident abroad as specified in the "Table for the Computation of the Insurance Benefits Payable in Case of Injury/Disability" (Annex 1);
 - 6.1.2. disability of the Insured Person resulting from the Accident that has occurred abroad;
 - 6.1.3. death of the Insured Person resulting from the Accident that has occurred abroad.
- 6.2.** Non-insured events shall be events referred to in clause 8 of these Terms and Conditions and the events that have occurred:
- 6.2.1. due to nervous and mental diseases: apoplexy, epilepsy or other spasmodic strokes (the Coverage remains if the cause of such disorders or strokes is the Accident as defined in these rules);
 - 6.2.2. if the policy does not have a corresponding notation, which have occurred while the Insured Person (except as stated otherwise in the Insurance Contract):
 1. was performing physical work related to construction risks and the use of mechanical and electrical devices;
 2. was participating in official sports training or competitions/matches;
 3. was engaged in sports/activities that pose threat to life. For the purposes of this item, posing a threat to life shall mean martial arts, motor sport, aviation sport, parachute jumping, diving, mountain climbing, mountain skiing and other extreme sports, whether on individual basis, spending a pastime and/or any other time, or organised sessions, training or competition/match;
 - 6.2.3. health disorders arising from treatment (except cases whether the reason for the treatment was the Accident as defined in these rules);
 - 6.2.4. the Insured violated the safety at work regulations while working under an employment contract;
 - 6.2.5. congenital deficiencies of the body;
 - 6.2.6. damage to a functional unit of the system of organs, provided that prior to the Bodily Injury this area was affected by the disease or if traumas have occurred during one year, except cases of multiple traumas;
 - 6.2.7. an event the occurrence of which during the Insurance Period is not confirmed by the medical documentation and/or diagnostic examinations from / made in a foreign healthcare establishment;
 - 6.2.8. related to the treatment of a bodily injury, health disorders as a result of bodily injury and consequences thereof, which was required after the Insured has unreasonably delayed approaching a health care establishment even though recommended by the medical experts of the Insurer, as a result of which the Medically Necessary Services were not provided in due time;
 - 6.2.9. the court has recognised the Insured as the person who has disappeared or whose whereabouts are unknown;
 - 6.2.10. events not included in the "Table for the Computation of the Insurance Benefits Payable in Case of Injury/Disability" (Annex 1);
 - 6.2.11. non-property damage.
- 6.3.** Sum Insured
The Sum Insured shall be specified in the Insurance Policy.
- 6.4.** Responsibilities of the Insured in case of occurrence of the event:
- 6.4.1. immediately approach a healthcare establishment abroad and obtain the Medically Necessary Services;
 - 6.4.2. in case of accident, upon return from the Trip the Insured Person shall notify the Insurer within 30 calendar days in a format which can be reproduced in writing, except cases where this is impossible for valid reasons;
 - 6.4.3. to submit to the Insurer, dependent on the consequences of the accident, a medical diagnosis, health file prepared by the doctor and, upon a death event, the documents concerning the death of the Insured Person and its circumstances. Upon persistent

disability, a prerequisite for an indemnity application is the submission of the following documents to the Insurer:

1. indemnity application in writing;
2. appropriate decision by a doctor;
3. medical document describing the persistent and irrecoverable injury and its extent;
4. a decision of medical expertise concerning incapacity for work;
5. police certificate upon an offence or traffic accident;
6. occupational accident report upon an occupational accident.

6.5. Payment of the Benefit.

- 6.5.1. For the purposes of accident insurance, the size of the Benefit is determined according to the "Table for the Computation of the Insurance Benefits Payable in Case of Injury/Disability" (Annex 1).
- 6.5.2. The set period for the manifestation of disability shall be one year after the Accident. The level of disability/incapacity-for-work and/or the level of meeting the special needs shall be established and confirmed by the Disability and Incapacity-for-Work Determination Service under the Estonian Social Insurance Board. This must be notified to the Insurer and supported by documents not later than within three months from the determination of the relevant level for the Insured.
- 6.5.3. After the Insured is granted the fixed-term level of disability/incapacity-for-work and/or the level of meeting the special needs, the Insurer shall pay the Benefit in parts:
 1. the first part – 20% of the Sum Insured;
 2. where, upon expiry of the set term, the Insured is granted the relevant level of disability/incapacity-for-work and/or the level of meeting the special needs, the Insurer shall pay all the remaining part of the Benefit as provided for in item 6.5.1 of these Terms and Conditions;
 3. where no level is granted to the Insured on expiry of the first term, the remaining part of the Benefit shall not be paid.
- 6.5.4. If diseases or bad health have influenced the health disorders or consequences thereof arising from the Accident, the Benefit shall be reduced by 5%.
- 6.5.5. If the Insured dies within one year from the date of the Accident or from another cause or later than within one year irrespective of the cause and if a claim for the Benefit in case of the injury or disability has already been made, the payment shall be made based on the degree of injury/disability established according to the latest medical conclusions.
- 6.5.6. In case if the Benefits have already been paid for the Bodily Injury (traumas, disability) due to the same event that has caused the death of the Insured, such Benefits shall be deducted from the Sum Insured payable after the death.

6. LIABILITY INSURANCE OF PRIVATE PERSON

- 6.1. Civil liability is legal liability upon violation of an obligation or causing unlawful damage, whereupon civil law remedies are applied.
- 6.2. Civil liability insures personal or property damage unlawfully caused by the Insured Person or his/her child as a private person to a third party (injured party) concerning which the Insured Person has civil liability. For the purposes of these Terms and Conditions, a child is understood as the Insured Person's child who is under 14 years of age
- 6.3. Upon personal damage, substantiated medical treatment costs, damage arising from temporary and continuous incapacity for work, insurance pension and funeral expenses shall be compensated, taking into account the deductible specified in the policy.
 - 7.3.1. Medical treatment expense
 - 6.3.1.1. Medical treatment expenses comprise the substantiated expenses related to transportation to a medical

institution, treatment of health damage and purchase of medicaments.

- 6.3.1.2. Such expenses are substantiated which do not exceed the price of medical treatment that is in conformity with the legislation or the average level of the price in the market of relevant services.
- 6.3.1.3. The medical treatment expenses are compensated to the service provider or the person who actually incurred the expenses on the basis of an invoice accepted by the Insurer.
- 7.3.2. Funeral expenses
Damage arising from death comprises substantiated funeral expenses (except for funeral banquet) which shall be compensated on the basis of invoices in the amount of up to EUR 10 000 to the person who actually incurred the expenses.
- 7.4. Property damage
Reasonable and substantiated repair expenses shall be compensated which is the cost of restoration repairs of the damaged item and other direct expenses related to restoration including expenses related to the rescue of property, taking into account the deductible specified in the policy. If the property is damaged, the damage arising from destruction, i.e. the value of property immediately before the insurance event, shall be compensated, taking into account the deductible.
- 7.5. Legal assistance expenses
Legal assistance and court expenses which are related to liability insurance shall be additionally compensated, whereupon the Insured Person shall be compensated for court expenses that the Insured Person has been ordered to pay on the basis of an enforced court decision, also for the necessary and substantiated legal assistance expense that have been incurred by the Insured Person and prior approved by the Insurer, up to 10% of the amount of damage, but not more than EUR 6500, taking into account the deductible specified in the policy. The insure shall not compensate for court expenses which arise from the matter that the Insured Person does not agree to a decision of the Insurer.
- 7.6. If an event that has resulted in liability of the Insured Person gives rise to a claim of several injured parties and the total amount of such claims exceed the Limit of Indemnity, the Insurer shall satisfy the claims in proportion to the amount of claims within the Limit of Indemnity.
- 7.7. If several persons are liable for causing the same damage, only the Insured Person's share of liability of the total damage caused shall be compensated, but not more than the Limit of Indemnity.
- 7.8. Damages being in direct causal relationship with the same event are deemed to be one insurance event, irrespective of the time when damage occurs.
- 7.9. The following damage and expenses of liability insurance shall not be compensated:
 1. which are caused to himself/herself by persons who travel together;
 2. which are caused to the property that is possessed, leased, borrowed by or has otherwise been transferred to his/her use;
 3. for occurrence of which the Insured Person is liable as the owner or possessor of a building or apartment;
 4. which are caused by animals that are owned by the Insured Person or are under his/her care;
 5. which are caused by the use of land vehicle driving by the force of an engine;
 6. which are caused by the use of watercrafts or aircrafts ;
 7. which are caused by contamination of air, land surface or water;
 8. which are caused by the Insured Person upon performing work or occupational commitments, or during professional or economic activities;
 9. which are caused during a brawl;
 10. which lie in pure economic damage, i.e. damage that is not directly related to personal or property damage;

11. which are subject to compensation on the basis of other liability insurance contracts;
12. for which the Insured Person is liable on the basis of a contract or guarantee;
13. the error caused by which or other liability basis was known or should have been known to the Insured Person upon entry into the insurance contract;
14. which are caused during sports contests or preparatory training;
15. which are caused on purpose;
16. which are caused in relation to penalties, interests or fines for delay.

7. GENERAL EXCLUSIONS

- 7.1.** The following damage and expenses shall not be compensated:
1. which are caused by epidemic diseases, pollution of environment or natural catastrophe (e.g. earthquake, flood, etc.);
 2. which are caused by a revolt, civil war, civil unrest, terrorism or diversion;
 3. which are caused by a strike, interruption of work, insolvency; bankruptcy or contractual activities or liability of a third party (e.g. transport company, tour operator);
 4. which are caused by activities or omissions of authorities (e.g. airport security control, customs control, etc.);
 5. which are caused by suicide or an attempt of suicide of the Insured Person, participation in bets or brawls;
 6. which are caused by the matter that the Insured Person has knowingly put his/her life or health in danger or harmed himself/herself;
 7. which are caused by the Policyholder's or Insured Person's state of intoxication or consumption of psychotropic substances or consequences of their consumption;
 8. which are caused by driving a vehicle while being intoxicated by alcohol, based on the allowed limit of alcohol content stipulated by the legislation in a relevant country;
 9. which are related to the repairs, storage or transport of a means of transport (bringing back to the destination point of a Trip);
 10. which are related to mental disorders, including depression, stress reaction, phobias, diagnostics or treatment of psychiatric and psychoneurotic diseases;
 11. which are related to childbirth, a child born during a Trip, abortion, artificial insemination, treatment of infertility or avoidance of pregnancy, or their complications and consequences;
 12. if the Policyholder, or a person for whom the Policyholder is liable, submits to the Insurer incorrect data during damage handling;
 13. if the insurance contract is entered into after appearance of circumstances that caused a loss event;
 14. such as moral damage, unearned income, penalties, spent time, daily allowance or other indirect expenses;
 15. which are related to a motorcycle Trip;
 16. if damage is caused by another person.

8. OBLIGATIONS OF THE POLICYHOLDER AND INSURED PERSON UPON A LOSS EVENT

- 8.1.** The Policyholder is required to apply measures to limit any further damage, facilitate rectification, avoid any potential additional damage and ensure the rights of the Insurer.
- 8.2.** The Insured Person shall notify the Insurer of occurrence of a loss event as soon as possible in a format which can be reproduced in writing or website of the Insurer. The Insured Person may notify of an insurance event of medical assistance also to an insurance assistance partner.
- 8.3.** The Insured Person is required to submit an indemnity application in writing at the latest within one month after

the end of the Trip, together with the original documents and data on the circumstances of the event, amount of damage and parties;

- 8.4.** Upon an illness or accident, the Insured Person shall immediately contact a licenced doctor or medical institution, follow the doctor's instructions, obtain a medical certificate with a diagnosis concerning the treatment provided, including the time of treatment, the first visit and description of the treatment provided;
- 8.5.** The Policyholder is required to help the Insurer in filing a claim for recovery, by submitting the necessary data, documents, explanations, etc. necessary for exercising the claim for recovery;
- 8.6.** For organising hospital treatment or repatriation in a foreign country, it is required to contact the Insurer or claim handling partner by calling to the phone number specified in the insurance policy.
- 8.7.** The expenses of medical treatment of repatriation shall be compensated only upon prior approval by the Insurer or claim handling partner.
- 8.8.** Repatriation of the Insured Person to Estonia shall be organised by the Insurer or claim handling partner. Doctors accepted by the Claims Handling Partner or Insurer shall decide over the need for repatriation and the way how it will be carried out. If doctors consider repatriation to be necessary and the Insured Person rejects it, the Insurer does not have the obligation to compensate any further expenses. If the doctors accepted by the Insurer or Claims Handling Partner do not consider repatriation or premature return to be substantiated (among other things, when the Insured Person has not contacted a relevant doctor), the Insurer does not have the obligation to compensate.
- 8.9.** Upon death of the Insured Person in a foreign country, the Insurer or Claims Handling Partner arranges for burial or cremation of the deceased abroad or repatriation of the deceased to Estonia.
- 8.10.** The representatives of the Insurer or Claims Handling Partner must be provided with an access to the information concerning the loss event, including medical data.
- 8.11.** Upon loss event of travel interruption insurance, the tour operator, accommodation company, transport company or other service provider shall be immediately informed of the event that prevents from going on or continuing a Trip, in order to ensure that cancellation of the Trip would be accompanied by the smallest possible expenses and contractual penalties. Upon violating the notification obligation, the Insurer shall not compensate for any additional expenses arising from delay.
- 8.12.** The Insured Person undertakes to formulate and register a traffic accident, robbery, theft or other offence in a law enforcement agency.
- 8.13.** If a third party (e.g. tour operator, air company) is responsible for transport, the Insured Person must immediately contact the person that caused loss for compensation for the expenses and obtain from that person a written certificate which includes at least the reason for the event, its time and the amount of indemnity paid to the Insured Person.
- 8.14.** Upon loss event of luggage insurance when liability for loss is borne by a transport company or a person to whom the luggage has been given for storage, the Insured Person must contact the person who has caused damage at the latest within 5 days for compensation for the expenses and obtain from that person a written certificate which includes at least the reason for the event, its time and the amount of indemnity paid to the Insured Person.
- 8.15.** Upon an insurance event of liability insurance, the Insured Person shall obtain from the suffered person a claim for indemnity and an explanatory letter concerning the occurrence of the event and attach to them the documents and other certificates of appropriate institutions which confirm the occurrence of the insurance event.

- 8.16.** The Insured Person undertakes to additionally submit other information and documents that are necessary for determining the contractual liabilities of the Insurer.
- 8.17.** If the Insured Person fails to comply with one or more requirements specified in clauses 9.1-9.16, the Insurer has the right to reduce the insurance indemnity or refuse to pay it.

9. COMPENSATION FOR DAMAGE

- 9.1.** The Insurer shall perform its obligation under the insurance contract when the Insurer has completed the operations necessary for identifying the insurance event and determining the extent of performance by the Insurer.
- 9.2.** If the expenses and loss subject to compensation are larger than the sum insured, the insurance indemnity is deemed to be equal to the sum insured.
- 9.3.** If the expenses and loss subject to compensation are smaller than the sum insured, the insurance indemnity is deemed to be equal to the amount of loss.
- 9.4.** As regards luggage liability, the insurance indemnity shall be calculated by taking into account the deductible which is specified in the policy.
- 9.5.** Upon compensating for luggage insurance loss, the Insurer has the right to demand that the right to recovery of the remains of the destroyed property or replaced property, also the property that has unlawfully left possession of the entitled person be transferred to the Insurer. Until transfer of the aforementioned property or right to recovery thereof to the Insurer, the Insurer has the right to suspend the payment of insurance indemnity or reduce the insurance indemnity by the ordinary value (market value) of such property.
- 9.6.** If the Insurer gives compensation by way of paying money, the Insurer does not have the obligation to pay the insurance indemnity until the person entitled to receive insurance indemnity has notified in a format which can be reproduced in writing of the bank account number and the name of the account holder.
- 9.7.** Direct proprietary and documented damage shall be compensated which is caused by an insurance event. Upon undocumented damage, the Insurer has the right to reduce insurance indemnity or refuse to pay it.
- 9.8.** The Insurer is not required to perform the obligation to the Insured Person to a larger extent than the actual amount of loss.
- 9.9.** If any part of the claim against the Insured Person is not certified, the Insurer shall compensate for only the certified part.
- 9.10.** After occurrence of an insurance event, the Insurer has the right to demand from the Policyholder/Insured Person the information necessary for determining the obligation to perform the insurance contract and additionally also the documents certifying the event, including access to sensitive personal data.
- 9.11.** If the Policyholder or Insured Person has violated an obligation under the insurance contract (including the obligation to submit certificates), the Insurer has the right to refuse to pay insurance indemnity or reduce it if such violation had an impact on the creation of loss or the amount of loss or on determination of the performance obligation of the Insurer.
- 9.12.** If violation of the insurance contract becomes known to the Insurer after payment of insurance indemnity, the Insurer has the right to reclaim the paid insurance indemnity partially or fully, dependent on whether the Insurer would have refused to pay insurance indemnity or reduced it if the Insurer was aware of violation of the insurance contract.
- 9.13.** If the Insurer has compensated for a delayed, stolen or robbed item, the Policyholder is required to immediately inform the Insurer of receiving back, finding it or learning its whereabouts in a format which can be reproduced in writing. The Insurer has the right to demand transfer of the item.

TABLE FOR THE CALCULATION OF INSURANCE INDEMNITY IN CASES OF PERSONAL INJURY/DISABILITY

Item	Consequences of an insured event	Insurance indemnity (as a percentage of the sum insured)
1	<p>Central nervous system</p> <p>a) cerebral concussion (comatosis); b) cerebral haemorrhage (hematoma). Skull fractures: c) vault bones; d) foundation (base) bone. NOTE: The insurance benefit for a head concussion (1a) is paid if the in-patient treatment lasted for more than 24 hours</p>	<p>3% 6% 10% 15%</p>
2	<p>Facial bones</p> <p>a) fracture of the upper jaw (maxilla), zygomatic (os zygomaticum), lower jaw (mandibula); b) multiple mandibular fracture; c) nasal bone fracture; d) larynx, thyroid cartilage, hyoid bone fracture.</p>	<p>6% 7% 3% 4%</p>
3	<p>Traumatic dental damage (loss of the entire tooth and/or root)</p> <p>a) loss of 2 teeth; b) loss of 2-4 teeth; c) loss of more than 5 teeth.</p>	<p>2% 3% 6%</p>
4	<p>Chest</p> <p>a) sternal fracture; b) fracture of 2 ribs; c) fracture of 3-5 ribs; d) fracture of 6 ribs.</p>	<p>5% 3% 4% 6%</p>
5	<p>Spine</p> <p>a) fractures of the cervical spine, thoracic or lumbar vertebrae parts, hoops; b) vertebrae cross or crest growth fractures; c) sacral fracture; d) coccyx fracture.</p>	<p>12% 3% 10% 3%</p>
6	<p>Hand</p> <p>a) shoulder, clavicle fracture; b) shoulder blade joint (shoulder articular fossa) fracture; c) shoulder joint (bone fragment) fracture; d) humeral fracture; e) elbow joint fracture (fracture on the knuckle); f) forearm bone (one bone) fracture; g) forearm bone (one bone) fracture with dislocation; h) both forearm bones fracture; i) wrist bone fracture; j) metacarpal bone fracture; k) thumb (basic, middle phalanx) fracture; l) thumb (final phalanx) fracture; m) finger (basic, middle phalanx) fracture; n) finger (final phalanx) fracture.</p>	<p>5% 6% 4% 8% 5% 5% 7% 7% 3% 4% 4% 2% 2% 1%</p>
7	<p>Pelvis</p> <p>a) pelvic bone (ilium, pubis, ischium, pelvis bone) fracture; b) acetabular fracture; c) one joint rupture d) joint rupture and bone fracture; e) fracture of more than two bones.</p>	<p>5% 12% 7% 13% 8%</p>
8	<p>Thigh</p> <p>a) splitting of the femur bone fragments; b) femur bone crest fracture; c) femoral head and (or) neck fracture; d) femoral body fracture; e) femoral or tibial articular surface fracture.</p>	<p>4% 6% 12% 8% 10%</p>

Item	Consequences of an insured event	Insurance indemnity (as a percentage of the sum insured)
9	Knee joint a) traumatic lesion of meniscus integrity (rupture or tear), approved during the surgery or magnetic resonance imaging test;	5%
	b) patella fracture.	6%
10	Shin a) fibula fracture;	5%
	b) tibial fracture;	7%
	c) tibia and fibula fracture.	10%
11	Ankle joint a) one ankle fracture;	4%
	b) Achilles tendon rupture.	5%
12	Foot a) foot bone fracture;	4%
	b) hucklebone (calcaneus) fracture, astragalus (talus) fracture;	7%
	c) toe (final phalanx or middle phalanx) fracture;	2%
	d) toe (phalanx Framework) fracture;	3%
	e) big toe (phalanx or middle phalanx) fracture;	4%
	f) big toe (final phalanx) fracture.	2%
13	Other traumatic effects, insured events a) shoulder, elbow, knee joint dislocations;	3%
	b) ligament, tendon ruptures (if immobilisation with a splint or a plaster cast was applied);	3%
	c) haemarthrosis (if joint puncture was performed);	2%
	d) bone splits;	2%
	e) II° burns of no less than 1% of the body surface area;	3%
	f) II° burns of no less than 5% of the body surface area;	5%
	g) III° burns up to 2% of the body surface area;	4%
	h) III° burns of no less than 2% of the body surface area;	6%
	i) extensive I° burns which caused the non-burn disease;	5%
	j) III° frostbite;	5%
	k) traumatic internal organ damage, when the injured organ had to be operated on;	6%
	l) soft tissue ruptures of more than 3 cm when the tissues had to be sutured;	6%
	m) insured events (illness with tick-borne encephalitis, tetanus, rabies, electric shock injury (during the discharges of electric networks, equipment, atmospheric electrical discharges)), if the insurance indemnity has not been paid under the other items in this table.	3%
14	Disability a) disability for children under 18 years old;	65%
	b) disability group for persons over 18 years until the retirement age: – 45 – 55%;	50%
	– 30 – 40%;	65%
	– 0 – 25%;	100%
	c) disability group for persons of retirement age: – low;	50%
– medium;	65%	
– high.	100%	
15	Death	100%

Remarks:

1. If surgery was performed for bone fracture reconstruction or reinforcement, the insurance benefit is increased by a further 10% of the sum insured. The maximum insurance indemnity amount may not exceed the sum insured.
2. If several multiple bone fractures occurred during an insured event, the insurance indemnities are summed up to the Sum insured.
3. Events not covered by this table are considered as non-insured events.

SPECIAL CONDITIONS NO. 1 OF TRAVEL INSURANCE TERMS AND CONDITIONS NO. 761

Valid from 1 of May, 2014

1. ADDITIONAL RISKS OF TRAVEL INTERRUPTION

- 1.1.** Event cancellation, ie as well as the cancellation of the trip due to the cancellation of an organised meeting (i.e. conference, seminar, trade fair), sporting event, concert, theatrical play (i.e. drama or ballet performance, opera, operetta) or; travel interruption arising from a change of the travel schedule due to a natural disaster (e.g. an earthquake, landslide, volcano eruption, tsunami, flood) or the malfunctioning of the transport specified in the travel package;
- 1.2.** Travel disruption arising from work interruption or strike of a transportation company (including work interruption or strike a company servicing the transportation company) or the insolvency of the provider of a service contained in the travel package. The aforementioned does not include travel disruption caused by the insolvency of the touroperator or travel agency.
- 1.3.** Prerequisite for additional risks the validity of:
 1. trip cancellation insurance is in force according to the Travel insurance terms and conditions No.761 point 4;
 2. there is the mark of additional risk cover;
 3. additional risk insurance coverage is must be purchased no later than two calendar days after the initial ticket / travel packages for the initial payment or a prepayment.
- 1.4.** Insurance event is not considered to be a situation where the trip was booked after appearance of circumstances that caused a loss event
- 1.5.** Damage that compensated on the basic of additional risk of travel cancelation is according Travel insurance terms and conditions No.761 clauses 4.9.1 and 4.9.5.
- 1.6.** Valid are all exclusions described in the Travel insurance terms and conditions No. 761 and General terms and conditions of insurance contracts, except the risks exclusions which are described in Special conditions No. 1 for Travel insurance terms and conditions no. 761 in sections 1.1 and 1.2.

2. WAIVING THE TRIP ADDITIONAL COVER

- 2.1.** "Waiving the trip additional cover" means a situation where the insured cancels his booking for whatever reason.
- 2.2.** Prerequisite for the validity of:
 1. trip cancellation insurance is in force;
 2. there is the mark "Waiving the trip additional cover";
 3. additional insurance coverage is must be purchased no later than two calendar days after the initial ticket / travel packages for the initial payment or a prepayment;
 4. 100% of the total cost of the trip is insured.
- 2.3.** Will reimburse 70% of the total tour package cost which the tour operator or travel-related service provider does not return, up to the policy limit of the trip cancellation benefit, provided that they fulfil all the conditions set out in clause 2.2
- 2.4.** The insurance indemnity is not paid if the cancellation occurred less than 72 hours prior to travel.
- 3.** A maximum of two cases of additional trip cancellation insurance claims will be reimbursed in case of travel insurance effective for one year