

GENERAL & SPECIAL
CONDITIONS



TRAVEL INSURANCE SCHENGEN

SOMMAIRE

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CONTRACT No. 90027

- CHANGEABLE Formula
- UNCHANGEABLE Formula
- SANITARY PROTECTION Option

WARNING

- ✓ The insurance premium cannot be refunded in any case.
- ✓ The contract can be changed only when "CHANGEABLE Formula" was purchased. Up to 3 changes before the contract start date and only if the visa is refused.

In case of legal problems with this contract, only the French version will be taken into consideration.

ADMINISTRATIVE MANAGEMENT OF THIS CONTRACT HAS BEEN ENTRUSTED TO ASSUREVER, A SARL (FRENCH LIMITED LIABILITY COMPANY) WITH CAPITAL OF 516,500 €, INSURANCE BROKER, REGISTERED WITH:

- THE TRADE AND COMPANIES REGISTER OF PARIS UNDER NUMBER 384 706 941,
- ORIAS (REGISTER OF INSURANCE INTERMEDIARIES) UNDER NUMBER: 07 028 567 (WWW.ORIAS.FR).

ASSUREVER IS LOCATED AT 26, RUE BENARD, 75014 PARIS, FRANCE.

ASSUREVER IS SUBJECT THE SUPERVISION OF THE FRENCH PRUDENTIAL CONTROL AUTHORITY (ACPR), LOCATED AT 4 PLACE DE BUDAPEST - CS 92459 - 75436 PARIS CEDEX 09, FRANCE.

THE COVERAGE PROVIDED BY YOUR CONTRACT, WITH THE EXCEPTION OF ASSISTANCE SERVICES, IS GOVERNED BY THE FRENCH INSURANCE CODE.

YOUR CONTRACT INCLUDES THE PRESENT GENERAL TERMS AND CONDITIONS, COMPLETED BY YOUR SUBSCRIPTION CERTIFICATE. AMONG THE COVERAGE DESCRIBED HEREAFTER, THE COVERAGE YOU HAVE PERSONALLY SELECTED IS INDICATED IN YOUR SUBSCRIPTION CERTIFICATE, ACCORDING TO THE FORMULA TO WHICH YOU HAVE SUBSCRIBED AND FOR WHICH YOU HAVE PAID THE CORRESPONDING PREMIUM.

PLEASE READ YOUR GENERAL TERMS AND CONDITIONS CAREFULLY. THESE INDICATE OUR RESPECTIVE RIGHTS AND OBLIGATIONS AND PROVIDE ANSWERS TO QUESTIONS YOU MAY HAVE.

IMPORTANT

To be entitled to assistance cover under this policy, it is **ESSENTIAL** that you first contact the public emergency services and then contact MUTUAIDE Services prior to any intervention or personal initiative in order to obtain an incident number which will be needed for us to bear the expenses of providing assistance.

Your contract: **90027**
MUTUAIDE Services 24/24, 7/7

When phoning from France: 01 55 98 51 51

When phoning from abroad: +33 1 55 98 51 51

CHART OF COVERAGE AMOUNTS (SPECIAL CONDITIONS)

SERVICES	AMOUNT INCLUDING TAX Maximum / person
Repatriation assistance <i>In the event of justified repatriation of the Insured person</i> <ul style="list-style-type: none">• Repatriation or medical transportation• Repatriation to your place of residence	<ul style="list-style-type: none">• Real costs• Real costs
Medical expenses <ul style="list-style-type: none">• Medical expenses and urgent hospitalization• Urgent dental work<ul style="list-style-type: none">↳ <i>Deductible for medical expenses</i>	<ul style="list-style-type: none">• €30,000 / person• €100 / person• €100 / person
Assistance in the event of death <ul style="list-style-type: none">• Assistance with formalities• Repatriation of the body• Funeral arrangements, casket costs and burial	<ul style="list-style-type: none">• Yes• Real costs• €1,000 / person

SANITARY PROTECTION OPTION

This guarantee comes in addition to one or the other of the formulas.

BENEFITS	AMOUNTS INCL. TAX maximum per person
Assistance Sanitary Protection	
<ul style="list-style-type: none"> • Pre-departure teleconsulting • Repatriation or sanity transport (including epidemic or pandemic) • Impossible return • Hotel expenses due to impossible return • Hotel expenses following quarantine • Medical expenses abroad including epidemic or pandemic ↳ <i>Excess</i> • Taking charge of a local telephone package • Psychological support following quarantine • Substitute suitcase • Home help • Delivery of household goods • Psychological support following repatriation 	<ul style="list-style-type: none"> • 1 call • Actual costs • €1,000 maximum per person and €50,000 maximum per group • Hotel costs €80 per night (maximum 14 nights) • Hotel costs €80 per night (maximum 14 nights) • €30,000 per person • €30 <i>per person</i> • Up to €30 • 6 consultations per event • €100 maximum per person and €350 maximum per family • 15 hours spread over 4 weeks • 1 delivery per week (maximum 2 weeks) • 6 interviews per event

EFFECTIVE DATE AND DURATION OF COVERAGE

GUARANTEE	DATE OF EFFECT	EXPIRY OF COVER
OTHER COVERAGE	The departure date	The last day of the trip

The validity period of all coverage corresponds to the travel dates indicated in the Special Conditions with a maximum period of 92 consecutive days.

Subscription must be taken out at the latest on the eve of travel.

GENERAL TERMS APPLICABLE TO INSURANCE AND ASSISTANCE

The present insurance and assistance contract is a collective insurance package taken out by ASSUREVER, holder of the policy, which covers its clients. The object of the contract is the coverage, under the limits and conditions defined hereafter, of the Insured person indicated under the Special Conditions on the occasion and during his or her travel.

As with all insurance and assistance contracts, it entails rights but also obligations for us and for you. It is governed by the Insurance Code. These rights and obligations are presented in the pages that follow.

DEFINITIONS

Abroad

"Abroad" refers to any country worldwide with the exception of the country of origin.

Accident

A sudden and unforeseeable event affecting a physical person, unintentional on the part of the victim, and originating from the sudden action of an exterior cause and preventing him from travelling by his or her own means.

Assistance Company

COWEN Insurance Company Limited Company, Risk Insurer under the insurance and assistance contract n ° 90027 subscribed through the intermediary ASSUREVER, entrusts the execution of the assistance services, as provided for in the general provisions of this contract, to MUTUAIDE Services, whose head office is located at 126 rue de la piazza, CS 20010 - 93160 Noisy Le Grand CEDEX. Social capital €100,000. A company registered with the Trade and Companies Register of Bobigny under the number 480 118 587.

Attack

Any act of violence considered as a criminal or illegal attack, affecting individuals and/or property, in the country where you are staying, occurring with the object of seriously disturbing public order through intimidation and terror, and being the object of media attention. This "attack" must be registered by the French Ministry of Foreign Affairs.

Country of origin

Country of origin refers to your country of residence.

Deductible

Portion of the indemnity remaining at your expense.

Domicile

The place of residence of the Insured person must be located anywhere in the world, with the exception of the Schengen Area, DROM, Lichtenstein, San Marino, the principalities of Andorra and Monaco and the Vatican. Domicile refers to the main and usual place of residence of the Insured person, and indicated on his or her income tax form.

DROM

Guadeloupe, French Guyana, Martinique, Mayotte and Reunion Island.

Epidemic

Important number of sick persons in a given place, resulting from the same illness.

Family member

The spouse or common law or civil union spouse, ascendants or descendants, fathers in law or mothers in law, brothers, sisters, brothers in law or sisters in law, uncles, aunts, nephews and nieces of the Insured person or his or her spouse and legal guardian of the Insured person or his or her spouse.

France

"France" refers to metropolitan France, Corsica and DROM.

Illness

Pathological state duly acknowledged by a physician and formally preventing from leaving the place of residence and requiring medical attention and fully ceasing any professional activity.

Insured person

Physical person designated hereafter, under the term "you", and named under the Special Conditions and having paid his or her insurance premium.

These persons must not have reached the age of 85 on the day of subscribing the contract.

Insurer

COWEN Insurance Company Limited, Business Centre, 380, Level 2, Canon Road, Santa Venera, SVR 9033, Malta. Registered in Malta No. C 55905.

Loss

Random event that due to its nature requires coverage under the present contract.

Maximum per event

In the case where the coverage applies in favor of several insured parties who are victims of the same event and insured under the same Special Conditions, the insurer's coverage is limited in any event to the maximum amount indicated under this coverage regardless of the number of victims. As a result, the indemnities are reduced and paid in proportion to the number of victims.

Natural disasters

A phenomenon, such as an earthquake, a volcanic eruption, a tidal wave, a flood, a typhoon, a hurricane, a cyclone or a natural cataclysm, having been caused by the abnormal intensity of a natural agent, and recognized as such by public authorities.

Pandemic

Epidemic that develops over a vast territory, transcending borders.

Policyholder

ASSUREVER, 26 rue Bénard 75014 (France).

Social capital €516,500. A company registered with the Trade and Companies Register of Paris (France) under No. B 384 706 941, Insurance intermediary registered to the Orias under number 07 028 567 (www.orias.fr).

Quarantine

Isolation of a person, in case of suspicion of illness or proven illness, decided by a local competent authority, in order to avoid a risk of spreading the said illness in the context of an epidemic or pandemic.

Special Conditions

Document duly completed and signed by the Insured person in which are indicated his or her or her first and last name, address, travel dates, destination country, guarantee period, travel price including tax, signing date of this document, as well as the formula and corresponding insurance premium amount. Only subscriptions for which corresponding insurance premiums have been paid will be covered in case of incident.

Spouse

Spouse refers to:

- The person linked to the Insured person by marriage and not legally separated,
- The person living together with the Insured person and under the same roof, with the same community of interests as a married couple,
- The co-signer with the Insured person of a Civilian Solidarity Pact.

Train ticket

Tickets for travel by rail.

Travel

Journey and/or stay, travel package, rental, cruise, travel ticket (including a flight on its own) reserved with the travel agency and for which dates, destination and cost are indicated under the Special Conditions.

TERRITORY OF COVERAGE

Coverage applies to countries in the Schengen Area, DROM, Lichtenstein, San Marino, and the Principalities of Andorra and Monaco and the Vatican.

Are excluded the countries listed by the Ministry of Foreign Affairs as being in a state of civil or foreign war, notorious political instability, subject to reprisals, restriction of free circulation of individuals and property, regardless of the reason, in particular for health or safety reasons, weather conditions, countries subject to acts of terrorism, having been subject to natural disasters or disintegration of the atomic nucleus as well as countries subject to any other event of force majeure.

WHAT MUST YOU DO WITH YOUR TRAVEL TICKETS?

When travel is organized and covered in application of the clauses of the contract, you agree either to allow us to use your travel ticket(s), either to reimburse us the amounts that you may obtain in reimbursement from the issuer of your travel ticket(s).

HOW TO USE OUR SERVICES?

Do you need assistance?

In case of emergency, you must contact emergency services for any problems requiring their skills. In order for us to intervene, we recommend that you prepare your call.

We will ask for the following information:

- Your first and last name(s),
- Your contract number: **90027**,
- Your precise location, address and phone number where you can be reached.

You must:

- Immediately contact the assistance center on the following phone number **01 55 98 51 51** (+ 33 1 55 98 51 51 when calling from abroad),
- Obtain our prior approval before taking any initiative or incurring any expenses,
- Conform to the solutions we recommend,

- Provide us with the items relative to the subscribed contract,
- Provide us with the original supporting documents for which reimbursement is requested.

What are the conditions pertaining to use of services and coverage?

- We reserve the right to request any supporting documents necessary (death certificate, certificate of residence, certificate as common law spouse, expense vouchers, etc.) in support of any assistance request.
- Any expenses incurred without our approval will not be reimbursed or ultimately covered.
- Any event occurring as a result of a pre-existing and diagnosed illness and/or injury and/or treated and having resulted in a continuous hospitalization, or a day hospitalization or outpatient treatment in the 6 months preceding the request for assistance, whether caused by the manifestation or aggravation of said state.
- In the case where the Assistance Company is led to intervene without the necessary means of verification, due to insufficient data or following erroneous data with regard to the data initially provided to the Assistance Company, the intervention costs incurred by the Assistance Company will be charged to the Subscriber and payable on receipt of the invoice, with the possibility for the Subscriber of obtaining reimbursement from the requester of the assistance if the latter is not the Insured person.

Cumulative coverage

If the risks covered by the present contract are covered by another insurance policy, you must inform us of the name of the insurer from which you have taken out another insurance policy (article L121-4 of the Insurance Code) as soon as you are informed of this and at the latest when filing the claim.

False statements

When they affect the object of the risk or diminish our opinion:

- Any withheld or intentionally false declaration in your part renders the contract null and void. Premiums paid are considered as definitely acquired by us and we are entitled to request any premiums due as stipulated under article L113-8 of the Insurance Code,
- Any omission or inaccurate declaration on your behalf for which your bad faith is not established entails cancellation of the contract 10 days following notification sent to you by registered letter with acknowledgement of receipt and/or reduction of indemnities in accordance with article L113-9 of the Insurance Code.

Deprivation of services and coverage due to fraudulent statements

In the event of Loss or simple request as part of the assistance services and/or the insurance coverage (as stipulated under the present Special Conditions), if you deliberately use as supporting data, documents that are inaccurate or if you use fraudulent means or making inaccurate or incomplete declarations, you will be deprived of your rights to assistance services and insurance coverage provided under the present General Conditions for which said declarations are required.

WHAT ARE THE LIMITS IN THE EVENT OF FORCE MAJEURE OR OTHER SIMILAR EVENTS?

We cannot replace local authorities in any way in the event of emergency.

We may not be held liable for non-execution or delays in our services as a result of force majeure or events such as:

- Civil or foreign war, notorious political instability, popular uprisings, riots, acts of terrorism, reprisals,
- Recommendations from the WHO or national or international authorities or restriction to free circulation of individuals and property, regardless of the reason, and in particular for health and safety reasons, weather conditions, limiting of prohibited air travel,
- Strikes, explosions, natural disasters, disintegration of atomic nucleus, or any other radiation from an energy source of a radioactive nature,
- Delays and/or inability to obtain administrative documents such as entrance or exit visas, passports, etc. required for your transport inside or outside the country where you are located or for your entry into the country recommended by our physicians for your hospitalization,
- Recourse to local public services or participants to which we are required to apply by virtue of local and/or international regulations,
- Inexistence or unavailability of technical or human means adapted to transport (including refusal of intervention).

EXCLUSIONS COMMON TO ALL COVERAGE

General exclusions of the contract are the exclusions common to all assistance services and insurance coverage described in the present General Conditions.

Are excluded:

- Civil or foreign wars, riots, popular uprisings,
- Voluntary participation of an Insured to riots or strikes, brawls or assault,
- The consequences of disintegration of atomic nucleus, or any other irradiation from an energy source of a radioactive nature,
- Excepting derogation thereof, an earthquake, a volcanic eruption, tidal wave, flood, typhoon, hurricane, cyclone or other natural disaster except in the case of provisions of law N 82-600 of 13 July 1982 concerning indemnities provided to victims of natural disasters (for insurance coverage),

- The consequences of the use of medication, drugs, narcotics and similar products not available by prescription, and the abuse of alcoholic beverages,
- Any intentional act on your part to sustain coverage under the contract.

EXPERTISE OF DAMAGES

In the event of disagreement between the parties, each party must select an expert. If these experts are not in agreement, a third expert is appointed by the Presiding Judge of the Court of the domicile of the Insured person's jurisdiction. This appointment is made on simple request of the most diligent party made at the earliest 15 days after sending the other party a notification by registered letter with acknowledgement of receipt.

Each party is responsible for paying the fees of its expert and if necessary, half of the fees of the third expert and costs relating to its appointment.

No action may be taken against the Insurer until the expert has settled the dispute.

EXCEPTIONAL CIRCUMSTANCES

Passenger transport operators (and airline companies in particular) may apply restrictions concerning transport of individuals suffering from certain pathologies or of pregnant women, restrictions applying from the beginning of the transport and susceptible to change without prior notice (in the case of airline companies: Medical examination, medical certificate, etc.). As a result, repatriation of these individuals is only possible subject to the absence of refusal on behalf of the carrier, and obviously, in the absence of unfavorable medical opinion (as stipulated and in accordance with the provisions indicated in the chapter on "TRANSPORT/REPATRIATION" with regard to the health of the Insured person or of the unborn child.

SUBROGATION

In accordance with provisions of article L.121-12 of the Insurance Code, the Insurer is subrogated to the rights and actions of the Insured person with regard to third parties, within the limit of the indemnities paid.

The Assistance Company is subrogated under the Insurance Code in the rights and actions of the Subscriber and the Insured person, against the party responsible for the Loss within the limits of the costs it has incurred.

Similarly, in the case where all or parts of the services provided in accordance with the coverage of the contract are totally or partially covered by an insurance contract, a health insurance agency, the Social Security or any other institution, the Assistance Company is subrogated to the rights and actions of the Insured person with regard to the above-mentioned institutions and contracts.

WHAT ARE THE LIMITATION PERIODS?

In accordance with provisions of articles L114-1 and following of the Insurance Code, all actions pertaining to an insurance contract are time-barred for two years following the occurrence of the originating event.

However, this deadline only applies:

1° In the case of incomplete, omitted, false or inaccurate declaration on the risk incurred, as of the day the Insurer is informed of it,

2° In the event of Loss, as of the day when the interested parties were informed of it, if they can provide evidence of their ignorance of the fact up to this date.

In the case where proceedings of the Insured person against the Insurer are caused by third party proceedings, the limitation period only applies as of the day this third party engaged in legal proceedings against the Insured person or received indemnities from the latter. The limitation period is extended to ten years in the case of insurance contracts against accidents to individuals, when the Beneficiaries are the rightful claimants of the Insured person who is deceased.

The limitation period is interrupted by any of the ordinary causes for interruption of the limitation period, and in particular by:

- Any writ of summons, including interim proceedings, court order or seizure against the party that one wishes to prevent from prescribing,
- Any unambiguous acknowledgement on behalf of the Insurer of the Insured person's right to coverage, or any acknowledgement of debt of the Insured person with regard to the Insurer,

As well as in the following other cases stipulated by article L114-2 of the Insurance Code:

- Any appointment of an expert following a Loss:
- Any sending of registered letter with acknowledgment of receipt:
 - From the Insurer to the Insured person for non-payment of the insurance premium,
 - From the Insured person to the Insurer for payment of the indemnity.

By way of derogation from article 2254 of the Civil Code, the parties to the insurance contract are not authorized, even under joint agreement, to change the duration of the limitation period, or to add to the causes for interruption or suspension of it.

CLAIMS - DISPUTES

In the event of claims relating to the present contract, the Insured person may contact ASSUREVER at the following address:

TSA 72218 - 18039 BOURGES CEDEX

Tel.: + 33 1 73 03 41 01

E-mail: reclamation@assurever.com

A reply will be sent to the Insured Person within two working days. If the time to handle the complaint must exceed two working days, a holding reply will be sent to the Insured Person within the same time limit. In this case, a substantive reply to the complaint will be provided to the Insured Person within a maximum of eight weeks from the original date of receipt of the complaint.

If the reply is disputed, the Insured Person may contact the Head of Complaints of ASSUREVER or the Insurer's Head of Complaints at complaints@cowen-insurance.com.

The time limits for handling the complaint are the same as those set out above.

If there is no agreement following a reply by the Head of Complaints, the Insured Person may :

- seek the advice of the Mediator of the Maltese Federation of Insurance Companies, whose contact details will be provided by ASSUREVER on request
- use the platform of the European Commission (ODR) to resolve disputes, on <http://ec.europa.eu/consumers/odr/> and without prejudice to other rights to legal action.

CONTROL AUTHORITY

In the event of dispute concerning the present contract or if the Insured person is not satisfied with the processing of the dispute by the Insurer, it is entitled to refer the matter to the Maltese control authority, in this case Malta Financial Services Authority (MSFA):

Malta Financial Services Authority

Notabile Road
Attard BKR3000
Malta

Phone: (+356) 25485313

Email: consumerinfo@mfsa.com.mt

www.mfsa.com.mt/Consumer

A document describing the missions of MSFA is available on simple request from the Insurer.

PROTECTION OF PERSONAL DATA

As data controller, COWEN Insurance Company Limited implements a processing of your personal data for the subscription, conclusion, management and execution of this contract in accordance with the provisions of the applicable data protection regulations personal data and in accordance with its personal data protection policy

COWEN Insurance Company Limited collects and processes information about you in order to propose and execute insurance contracts, and to be able to process your claims.

The data is also used for operational purposes, such as fraud prevention and detection, as well as financial management. COWEN Insurance Company Limited implements due diligence obligations against money laundering and the financing of terrorism, asset freezing measures, the fight against the financing of terrorism and financial sanctions, including triggering alerts and declarations of suspicion.

The data collected is compulsory. In the absence of communication of these data, the management of your requests for assistance and insurance will be more difficult if not impossible to manage.

To this end, you are informed that your personal data is intended for COWEN Insurance Company Limited, the service providers of COWEN Insurance Company Limited, the staff of COWEN Insurance Company Limited, and all persons likely to intervene within the limits of their powers. respective, in order to manage your claim file, provide you with the guarantees that are due to you under your contract, make payments, and transmit this data in cases where the law requires or allows it.

Your phone calls may also be recorded, to help COWEN Insurance Company Limited monitor and improve its services.

COWEN Insurance Company Limited does not keep your data beyond the time necessary to achieve the objective pursued by their collection and in compliance with applicable laws and regulations, as well as recommendations and authorizations possibly required from the competent supervisory authorities .

By subscribing to this contract and by using its services, you acknowledge that COWEN Insurance Company Limited may use your personal data for the aforementioned purposes. In the event that you provide COWEN Insurance Company Limited with information on third parties, you agree to inform them of the use of their data as defined above.

As the person concerned by the processing, you are informed that you have a right of access, rectification, erasure and portability of your data, as well as a right to limit the processing. You also have the right to object to legitimate processing. You have the right to define directives concerning the fate of this data after death.

The exercise of your rights is carried out with the Data Protection Officer, by post accompanied by a photocopy of a signed identity document, at one or other of the following addresses:

- electronically: dpo@cowen-insurance.com
- by post: Data Protection Officer, COWEN Insurance Company Limited, 380, Level 2, Canon Road, Santa Venera, SVR 9033, MALTA

Finally, you are informed that you have the right to lodge a complaint with:

Office of the Information and Data Protection Commissioner
Airways House, Second Floor
High street
Sliema SLM 1549
MALTA

APPLICABLE LAW AND JURISDICTION

The present contract is governed by French law. The contracting parties hereby declare that they agree to submit to the jurisdiction of French Courts and waive all rights to legal proceedings in any other country.

PREVENTION OF MONEY LAUNDERING

The controls that we are legally required to perform for the prevention of money-laundering and financing of terrorism, in particular, relating to cross-border financial transactions, may lead us at any time to request from you various explanations or supporting documents, including concerning the purchase of insured property. In accordance with the amended French Data

Protection Act of 6 January 1978 and the Monetary and Finance Code, you benefit from a right of access to your personal data, by sending a letter to the French Data Protection Authority (CNIL).

CONTRACT

The insurance coverage and assistance services provided under the present document have been subscribed with COWEN Insurance Company Limited under number **AIVB2C90000**.

GENERAL INSURANCE PROVISIONS

No repatriation or early return will be carried out unless there it has been the object of a preliminary request made to the assistance call center and an agreement has been obtained from the latter.

REPATRIATION ASSISTANCE

TRANSPORT OF THE INSURED PERSON TO A MEDICAL CENTRE

The Assistance Company organizes and handles the transport of the Insured person to the most appropriate of best equipped medical hospital.

Depending on the seriousness and circumstances, he may be transported by first class rail, seated or in a sleeper compartment or sleeping car, ambulance or light sanitary vehicle, regular airline in a seat or on a stretcher, private sanitary plane.

Furthermore, in the case where you refuse to accept the decision considered by our physicians as the most appropriate, you expressly release us of any liability in particular in the event of your return using your own means, or in the event of aggravation of your state of health.

REPATRIATION OF THE INSURED PERSON TO HIS OR HER DOMICILE

The Assistance Company repatriates the Insured person to his or her domicile when his or her medical condition allows him to leave the hospital. The repatriation as well as the most appropriate means are decided and selected by the Assistance Company under the same conditions as indicated above.

MEDICAL EXPENSES

OBJET OF THE COVERAGE

Coverage provides for the reimbursement of medical expenses (medical care, hospitalization costs, pharmaceutical costs, fees and ambulance costs) following an Accident or Illness affecting the Insured person during a Trip, within the limits indicated in the above-mentioned Chart of coverage amounts.

These expenses must have been exclusively prescribed by a medical authority having the diplomas or qualifications required in the country where it practices and legally authorized for professional practice.

This coverage is limited to the reimbursement of real costs incurred by the Insured person.

In the case of Insured parties of French nationality residing in the European Economic Area, the coverage applies in addition to the reimbursements provided by French Social Security or any other equivalent body providing financial coverage or reimbursement.

SPECIAL MEASURES IN THE EVENT OF HOSPITALIZATION

In the case where the Accident or Illness incurred by the Insured person requires hospitalization, the Insured person (or its legal representative) must beforehand, except in the event of force majeure, contact the Assistance Company who will provide the complete address of the approved hospital that is closest to where the Insured person is located.

In the event the condition of the Insured person (or his or her legal representative) prevents him from making this contact prior to his or her hospitalization, he must contact the Assistance Company as soon as his or her condition allows it.

In the case of refusal on behalf of the hospital to accept direct payment of costs by the Assistance Company, the Insured person must make the advance payment for these expenses and will be reimbursed 100% of the real costs incurred, within the limit per person and dossier indicated in the above-mentioned Chart of coverage amounts.

INDICATIONS CONCERNING THE COVERAGE LIMITS

- Medical expenses excluding hospitalization: 100% of real costs per person and per dossier, within the limits indicated in the Chart of coverage amounts and current non-excessive and required expenses.
- Medical expenses with hospitalization: 100% of real costs per person and per dossier, within the limits indicated in the Chart of coverage amounts and current non-excessive and required expenses.
- Emergency dental care: 100% of real costs per person and per dossier, within the limits indicated in the Chart of coverage amounts and current non-excessive and required expenses, for costs incurred for emergency dental work (that may not

be time-delayed, due to the pathological condition of the Insured person) and provided for the following acts: Protective dressing, filling, root canal work or extraction.

ASSISTANCE IN THE EVENT OF DEATH

ASSISTANCE WITH FORMALITIES

The Assistance Company assists the Insured person with the following formalities:

- Contact with the funeral home;
- Indication of the formalities required in particular with regard to the local administration.

REPATRIATION OF THE BODY IN THE EVENT OF DEATH

In the event of death of the Insured person occurring during the trip, the Assistance Company handles and organizes transport of the Insured person's body up to his or her Place of Residence.

Funeral costs are covered within the limits indicated in the Chart of coverage amounts.

SPECIFIC EXCLUSIONS TO "REPATRIATION ASSISTANCE", "MEDICAL EXPENSES" AND "ASSISTANCE IN THE EVENT OF DEATH" COVERAGE

Exclusions common, to all coverage apply here. Furthermore, are excluded:

- Benign ailments or injuries that may be treated locally (for the Assistance coverage, repatriation only),
- Relapse of previously diagnosed illnesses with risk of sudden and non-consolidated worsening,
- Burial costs, embalment and funeral ceremony, unless these are required by local regulations,
- Costs incurred by the Insured person without the prior agreement of the Assistance Company,
- Costs incurred by the Insured person in the event of a Trip undertaken against medical advice,
- Trips undertaken with the intention of obtaining a diagnosis and/or treatment,
- Restaurant and hotel costs, road expenses, toll, gas, taxis or customs duties except in the cases provided for by the coverage,
- Events subject to sanction as criminal acts according to the legislation where the Insured person is located,
- The consequences of relapses of previously incurred accident or illness and the medical expenses resulting from the diagnosis or treatment of a pathological condition already identified before the effective date of the coverage,
- Costs relating to routine medical care (including childbirth expenses, before and after birth),
- Medical expenses required as a result of medical operations requested solely by the Insured person except in the event of medically required necessity,
- Treatments for infertility,
- Medical expenses required for back pain, lumbago, sciatica, disk hernia, parietal, intervertebral, femoral, scrotal, inguinal white line and umbilical hernias,
- Thermal, weight loss and anti-aging health cures,
- Mental, psychological, psychiatric illnesses, neurosis and nervous breakdowns that do not require hospitalization for more than 4 consecutive days,
- Health spas, physical therapy, cost of glasses and contact lenses, prosthesis of all kinds, routine examinations and tests or preventive health examinations, tests or treatments, control tests and examinations not resulting from a covered accident or illness,
- Costs incurred for organ transplant not required by a covered Accident or Illness,
- Costs incurred for plastic or reconstructive surgery and comfort treatment,
- Vaccination costs, acupuncture, physical therapy, chiropractor or osteopathy sessions not following a covered Accident or Illness,
- Costs and treatments not prescribed by a certified medical authority,
- Contraception means.

SANITARY PROTECTION

SANITARY PROTECTION is valid only if you have additionally subscribed one or the other of the formulas and have paid the corresponding premium.

The subscription should be made simultaneously with the registration of the trip and the subscription of one or the other of the formulas.

PRE-DEPARTURE TELECONSULTING

For any request of useful information required for the organization and smooth running of your trip, you can contact us before your departure 24 hours a day; 7 days a week.

The information concerns the following areas.

Sanitary information: Health, Hygiene, Vaccination, Precautions, Main Hospital Centers, Advice to women, Time difference, Pets on a trip.

Our doctors are also available for any information you may need in the event of travel during an epidemic or pandemic context.

The information is communicated by telephone and is not subject to written confirmation or the sending of documents. Information and information services are provided between 8:00 a.m. and 7:00 p.m. and within the time limits normally necessary to satisfy the request.

However, whatever the time of your call, we can take note of your requests as well as your contact details so that we can contact you back with the requested information.

REPATRIATION OR SANITARY TRANSPORT

You are injured or suffer from an illness, including an epidemic or pandemic, while travelling on a covered trip. We organize and pay for your repatriation to your home or to a hospital near you.

Only medical requirements will be taken into account in determining the date of repatriation, the choice of transport or the place of hospitalization.

The decision to repatriate is taken by our medical advisor, after consulting the occasional attending physician and possibly the family physician.

During your repatriation, and on the prescription of our medical advisor, we organize and pay for the transport of an accompanying person to accompany you.

Any refusal of the solution proposed by our medical team will result in the cancellation of the personal assistance guarantee.

IMPOSSIBLE RETURN

Your flight has been cancelled as a result of measures taken by the local government or airlines to restrict the movement of people in the event of an epidemic or pandemic.

If you are obliged to extend your stay, we will organize and pay for the hotel costs (room and breakfast) and those of your beneficiary family members or an insured accompanying person, up to the amount shown in the Table of Benefits.

We organize and pay for your repatriation home, up to the limit indicated in the Table of Benefits.

HOTEL EXPENSES FOLLOWING QUARANTINE

If you are obliged to extend your stay following your quarantine, we will organize and pay the hotel costs (room and breakfast) and those of your beneficiary family members or an insured accompanying person, up to the amount indicated in the Table of Benefits.

MEDICAL EXPENSES (ABROAD)

Where medical expenses in the event of illness related to an epidemic or pandemic have been incurred with our prior agreement, we will reimburse you for that part of these expenses that are not covered by any insurance organizations to which you are affiliated.

We will only intervene once the reimbursements have been made by the above-mentioned insurance organizations, after deduction of an excess, the amount of which is indicated in the Table of Benefits, and subject to communication of the original proofs of reimbursement from your insurance organization.

This reimbursement covers the costs defined below, provided that they relate to treatment received by you outside your country of residence following an illness or accident that occurred outside your country of residence.

In this case, we will reimburse the amount of the expenses incurred up to the maximum amount stated in the Table of Benefits.

In the event that the insurance organization to which you pay your contribution does not cover the medical expenses incurred, we will reimburse the costs incurred up to the amount indicated in the Table of Benefits, subject to the provision by you of the original invoices for medical expenses and the certificate of non-reimbursement from the insurance organization.

This service stops from the day we carry out your repatriation.

Type of medical expenses giving right to additional reimbursement:

- medical fees,
- charges for medication prescribed by a doctor or surgeon,
- ambulance or taxi charges ordered by a doctor for transport to the nearest hospital, and this only if the insurance bodies refuse to pay,

- hospitalisation fees where you are deemed unfit to travel by our doctors after obtaining information from the local doctor. Additional reimbursement of hospital fees will cease from the date on which we are able to organise your transportation,
- a dental emergency with the limit specified in the Table of Cover.

EXPANSION OF SERVICES: ADVANCE PAYMENT FOR HOSPITALISATION (ABROAD)

Where you are hospitalised we will advance the hospital fees within the limit specified in the Table of Cover. This advance will be made subject to all of the following conditions:

- where you are deemed unfit to travel by MUTUAIDE ASSISTANCE doctors after obtaining information from the local doctor.
- for treatment prescribed with the agreement of MUTUAIDE ASSISTANCE doctors,
- you or any person authorized by you must make a formal commitment by signing a specific document provided by MUTUAIDE ASSISTANCE during the implementation of this benefit:
 - to take steps to cover the costs with the insurance organizations within 15 days from the date of dispatch by MUTUAIDE ASSISTANCE of the elements necessary for these steps,
 - to reimburse this advance to MUTUAIDE ASSISTANCE no later than a week after receipt of our invoice.

We will only be responsible for the costs not covered by the insurance companies, up to the amount of the "medical expenses" benefit. You must provide us with the certificate of non-reimbursement from these insurance organizations within one week of receiving it.

In order to preserve our future rights, we reserve the right to ask you or your beneficiaries for a letter committing you to take the necessary steps with the social organizations and to reimburse us the sums collected.

If you have not taken the necessary steps to obtain cover from the insurance organizations within the time limit, or if you fail to present the Insurer within the time limit with the certificate of non-coverage issued by these insurance organizations, you will not be able to take advantage of the "medical expenses" benefit under any circumstances and will have to reimburse all the hospitalization costs advanced by the Insurer, who will, if necessary, initiate any useful recovery procedure, the cost of which will be borne by you.

TAKING CHARGE OF A LOCAL TELEPHONE PACKAGE

If you are quarantined during a guaranteed trip outside your country of residence, we cover the cost of a local telephone package, within the limit indicated in the Table of Guarantees.

ON-SITE PSYCHOLOGICAL SUPPORT DURING QUARANTINE

In the event of significant trauma following an event linked to an epidemic or a pandemic, we can put you, at your request, in telephone contact with a psychologist, within the limit indicated in the Table of Benefits. The contents of this exchange are entirely confidential and do not replace the psychotherapeutic work carried out in private practice. Under no circumstances, due to the physical absence of the caller, can this service replace psychotherapy.

SUBSTITUTE SUITECASE

If you no longer have enough usable personal effects at your disposal due to your quarantine or hospitalization following an epidemic or a pandemic, we will provide the necessary fund for basic necessities up to the amount indicated in the Table of Benefits, upon presentation of proof.

DOMESTIC ASSISTANCE

Following your repatriation by our care after an illness linked to an epidemic or pandemic, you cannot assume your usual household chores, we will provide a household helper, within the limit indicated in the Table of Benefits.

DELIVERY OF HOUSEHOLD GOODS

Following your repatriation by us after an illness linked to an epidemic or pandemic and you are unable to leave your home, we organize and fund a home delivery service for your household goods, within the limits of local shopping facilities and within the limit set out in the Table of Guarantees.

PSYCHOLOGICAL SUPPORT WHEN YOU RETURN HOME AFTER REPATRIATION

In the case of a significant trauma following an event related to an epidemic or pandemic, we can organize a telephone consultation with a psychologist upon your return home, upon your request and within the limit indicated in the Table of Benefits. This consultation is entirely confidential and does not replace the psychotherapeutic work carried out in private practice. Under no circumstances, due to the physical absence of the caller, can this service replace psychotherapy.

WHAT WE EXCLUDE

The following circumstances are excluded :

- travel undertaken for the purpose of medical tests and/or treatment,
- medical expenses incurred in your country of residence,
- the consequences of drunkenness, suicide or attempted suicide ,
- voluntary self-injuries of the beneficiary/insured,
- minor conditions that can be treated on the spot and which do not prevent you from continuing your travel or your stay
- states of pregnancy, unless an unforeseen complication, and in all cases , states of pregnancy beyond the 36th week, voluntary termination of pregnancy, the aftermath of childbirth
- convalescences and illnesses in the course of treatment, not yet consolidated and with a risk of sudden aggravation
- pre-existing illnesses and/or injuries diagnosed and/or treated and for which you have been hospitalised for a continuous period during the 6 months preceding the start of your trip
- events related to medical treatment or surgery that are not of an unforeseen, fortuitous or accidental nature,
- medical devices and prostheses (dentures, hearing aids etc.),
- thermal treatments and the resultant costs,
- stays in rest houses and the resultant costs,
- rehabilitation, physiotherapy or chiropractic and the resultant expenses,
- intentional hospitalisation.

In case of legal problems with this contract, only the French version will be taken into consideration.

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SARL (French limited liability company) with a share capital of €516,500 -
company registration number RCS Paris B 384.706.941
Insurance brokerage and management company
Professional civil liability financial and insurance guarantee provided
In accordance with Articles L 530-1 and L 530-2 of the Insurance Code

COWEN | INS The insurance cover and assistance specified in this document are underwritten by COWEN Insurance Company Limited, under the number AIVB2C90000.

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