

Travel Insurance for holders of payment cards of Československá obchodní banka, a. s.

Insurance Product Information Document

Company: ČSOB Pojišťovna, a. s., člen holdingu ČSOB, Czech Republic

Product: Travel Insurance

This group insurance is governed by the Insurance Policy covering the Travel Insurance for the ČSOB payment cardholders (hereinafter also referred to as the "**Insurance Policy**") arranged and concluded between ČSOB Pojišťovna, a.s. a member of the ČSOB Group (hereinafter also referred to as "**ČSOB Pojišťovna**" or "**the Insurer**") and Československá obchodní banka, a.s. (hereinafter also referred to as "**ČSOB**" or "**the Policyholder**"), and by the related documentation contained in the General Insurance Terms and Conditions for the travel insurance GITC TI 2021 (hereinafter also abbreviated to "**GITC TI 2021**"). The Customer is informed about the contents of the Insurance Policy through the Information on the travel insurance for the ČSOB cardholder (hereinafter also referred to as "**Information for the Insured**").

What is this type of insurance?

Insurance for the case of sudden events that may occur before and during travel or when staying abroad.

This is a group (mass) insurance, where the parties to the Insurance Policy are: ČSOB Pojišťovna, as the Insurer, and ČSOB, as the Policyholder. The customer is the insured person.



What is insured?

TRAVEL INSURANCE

- ✓ medical expenses insurance;
- ✓ accident insurance;
- ✓ liability insurance;
- ✓ luggage insurance.

The following is also arranged (only in the Extra / Extra Family versions):

- ✓ trip interruption insurance;
- ✓ missed departure insurance;
- ✓ delayed luggage or delayed flight insurance;
- ✓ cancellation fee insurance.

The medical expense insurance includes both the basic and extended assistance services.

For more detailed information regarding the subject matter of insurance and the insured risks covered by the Insurance, please see GITC TI 2021, in the articles regulating the subject matter of insurance or in the Insurance Policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.

Insurance Benefits

- ✓ The upper limit of the insurance benefit is determined by the insurance amount or the limit of the insurance benefit. The limit of the insurance benefit is the upper limit of the sum of insurance benefits for all insured events occurring during one year of the insurance (if the insurance is arranged for a shorter period, during the term of the insurance).
- ✓ In the case of the "Family" versions the insurance amount or the limits of the insurance benefit are applicable to each insured person separately.
- ✓ It is possible to arrange deductible together with the insurance.

For detailed information regarding the indemnity, please see GITC TI 2021 specifically in articles governing the indemnity, or in the Insurance Policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.



What is not insured?

The insurance does not cover damage events:

- ✗ in relation to which the Entitled Person consciously states false or grossly distorted substantial details relating to the scope of the insured event, or conceals substantial details related to the insured event;
- ✗ caused intentionally by a person claiming the right to the insurance benefit, or on his or her initiative by a third party, unless the insurance contract is expressly agreed otherwise or unless stipulated otherwise by the law.

Insurance exclusions are included in GITC TI 2021, in articles regulating exclusions from the insurance and indemnity limitations, or in the insurance policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.



Are there any restrictions on cover?

- ! In some cases, the indemnity may be limited or reduced. These situations are stated in GITC TI 2021, in articles governing the insurance exclusions and indemnity limitations, or in the insurance policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.

Major insurance coverage exclusions that you might not expect include:

- ! The insurance does not apply to the non-insurable sports specified in the VPP CP 2021.
- ! In the case of pregnancy, medical expense insurance only covers medical treatment in the case of unexpected acute complications during the first 26 weeks of pregnancy (except for the risk pregnancy).
- ! Medical expense insurance and accident insurance does not apply to cases where treatment costs are related to an accident or disease that occurred or whose symptoms manifested before the Insured's departure for the journey. Only a stabilized chronic disease, i.e. one the symptoms of which did not occur for 12 months before departure and the health condition of the Insured did not indicate that it would be necessary to seek medical assistance during insurance, is an exception.
- ! The uninterrupted stay abroad for one trip is 120 days at most.



Where am I covered?

- ✓ The place of the insurance is the territory of the entire world with the exception of:
 - Czech Republic;
 - Another country where the insured is a citizen of (this does not apply when the Insured is a participant in public health insurance in the Czech Republic).



What are my obligations?

In addition to the obligations stipulated by generally binding regulations, the parties to insurance are obliged to comply in particular with the following obligations specified in the GITC TI 2021, or in the Insurance Policy:

- When arranging the insurance, the Insured is obliged to provide all information in a truthful and complete manner. During the term of the insurance, he or she is obliged to notify the Insurer in writing without undue delay of any changes in the facts he or she has been asked for when arranging the insurance.
- To behave in such a way that the damage event does not occur, in particular, it must not violate the obligations aimed to avert or reduce the peril and also must not tolerate breaching of these obligations by third parties.
- If a damage event has already occurred, the Insured is obliged to take measures aimed at avoiding the increase of the damage. In addition, the Insured is obliged to provide sufficient evidence of the extent of the loss event, in particular by preserving damaged insured objects or their components, photographic or film material, video recordings and third party testimonies.
- The insured is also obliged to notify the Insurer without undue delay of the occurrence of the insured event through the Insurer's assistance service and the competent public authority if there is a suspicion of committing a criminal offense, an administrative offense or a misdemeanor in relation to the insured event. The insurance participant is obliged to give a true explanation of the origin and extent of the consequences of this event and to provide the necessary documents.

In the liability insurance the obligations of the Insured also include in particular:

- The Insured is obliged to notify the Insurer in writing without undue delay that there were proceedings of a public authority or arbitration initiated against him or her in respect of the damage event, to give the name of his or her legal counsel and notify the Insurer on the course and outcome of such proceedings.
- The Insured is obliged without a prior express written consent of the Insurer, not to recognize a debt to the injured party as a compensation for damage the Insured is responsible for in respect of the damage event.
- In the proceedings for compensation for damage from a damage event the Insured is obliged to proceed in line with the instructions of the Insurer, in particular the Insured must not, without the consent of the Insurer, agree to compensate for a liability under the statute of limitation and must not conclude a court settlement without the consent of the Insurer. The Insured is obliged to appeal against the decisions of the competent authorities concerning compensation for damage in time if he or she does not agree otherwise with the Insurer within the appeal time.



When and how do I pay?

The premium is negotiated as one-off premium. The premium is paid by the Policyholder, i.e. ČSOB.

The amount of the insurance fee is arranged between the policyholder (ČSOB) and the Insured and is specified in the ČSOB Fee Price List.

The insurance fee is charged once a year in advance for the following 12 months, no later than the last working day of the month in which the insurance was arranged, and always the last working day of the month on which the anniversary of the insurance falls. When changing the insurance version, the fee is charged in the full amount of the newly required insurance version, on the last working day of the month in which the change is agreed. The policyholder does not impose the insurance fee on the Insured for selected payment cards.

The length of the insurance period is 1 year. If the insurance is terminated or the insurance version is changed on a date earlier than the last day of the insurance period, the insurance fee paid or any part thereof will not be refunded.

More detailed information regarding the insurance premium and the insurance fee can be found in GITC TI 2021 in the articles regulating the insurance premium, in the Insurance Policy or the ČSOB Fee Price List. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.



When does the cover start and end?

The insurance begins on the day following the conclusion of the contract on issuing the card or the day following the filing of an application for insurance if it is arranged in addition to the already issued card.

Each individual insurance policy is arranged for a definite period of 1 year. If the cardholder does not inform the Policyholder at least 6 weeks before the expiry of the insurance term that the Insured has no interest in the continuation of the insurance, the insurance policy is extended under the same conditions for the same period, i.e. one year.

In certain marketing campaigns, the insurance coverage begins on the date on which the Policyholder notifies the Insured of the commencement of the insurance in question, provided that the Insured has not declined the insurance within the timeframe specified in the offer.

For more detailed information regarding the origin and termination of the insurance, please see GITC TI 2021, or the Insurance Policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.



How do I cancel my contract?

The Insurance Contract can only be terminated by the Policyholder that is the ČSOB.

For payment cards, the insurance can be terminated by a written request of the Insured to cancel the insurance addressed to the insurer, i.e. ČSOB. The insurance expires as of the date of the anniversary of the insurance mentioned in the contract on issuing the payment card or in the application for the insurance. Requests for cancellation of insurance or change to the insurance version must be submitted to ČSOB no later than 7 days before the end of the insurance period.

The insurance may also cease to exist in particular:

- By the expiry of the period for which it was agreed;
- By mutual agreement;
- By the insurance interest ceasing to exist;
- By the date of death of the Insured;
- By termination of the right to use the payment card;
- If no replacement payment card is issued in the case of loss or theft of the original payment card;
- The insurance may also be terminated by means of a unilateral notification by ČSOB, whereby the participation in the insurance ends on the last day of the calendar month in which the notification was delivered to the insured;
- In another way specified in the Insurance Contract or the Civil Code.

For more detailed information regarding the termination of the insurance, please see the GITC TI 2021, in the articles regulating the termination of the insurance, or in the Insurance Policy. The customer is informed about the contents of the Insurance Policy through the Information for the Insured.

INFORMATION ON TRAVEL INSURANCE FOR ČESKOSLOVENSKÁ OBCHODNÍ BANKA, a. s. PAYMENT CARDHOLDERS



issued on the basis of the Cardholders Insurance Policy (hereinafter also referred to as the "Insurance Policy") concluded between:

Československá obchodní banka, a. s., with its registered office: Radlická 333/150, 150 57 Praha 5

Company ID: 00001350, registered in the Commercial Register maintained by the Municipal Court in Prague, Section B XXXVI, File number 46 (hereinafter referred to as the "Policyholder")

and

ČSOB Pojišťovna, a. s., člen holdingu ČSOB, with its registered office: Masarykovo náměstí 1458, Zelené Předměstí, 530 02 Pardubice

Company ID: 45534306, registered in the Commercial Register maintained by the Regional Court in Hradec Králové, Section B, File number 567 (hereinafter referred to as the "Insurer")

Insurance policy versions **Classic/Classic Family** or **Extra/Extra Family** are governed by the insurance contract, the General Insurance Terms and Conditions for Travel Insurance VPP CP 2021 and the relevant provisions of generally binding legal regulations. Further information on the insurance policy can be found in the Information Product Document - Travel Insurance for the holders of Payment Card (hereinafter referred to as „IPID - CP for PK“).

The General Insurance Terms and Conditions for Travel Insurance VPP CP 2021 (hereinafter referred to as "VPP CP 2021") and IPID – CP to a Payment Card are available to the Insured on the websites Československá obchodní banka, a. s. www.csob.cz.

ARTICLE 1

Information about insurance policy and Insured

Agreed type of travel insurance:

CLASSIC

CLASSIC FAMILY

EXTRA

EXTRA FAMILY

Personal Insurance:

The payment card holder is insured at all times.

In the case of the "Family" insurance version being arranged in addition to the payment card holder, the insurance also covers 1 additional adult and up to 3 children up to and including the age of 21. Family members are understood as members of a close family, i.e. parents and children, grandparents and grandchildren, siblings, a husband or wife, a partner.

The payment card holder can be also a person younger than 21 years. In that case other family members are understood 2 additional adults (parents or grandparents) and up to 2 children up to and including the age of 21.

ARTICLE 2

Provisions of insurance terms and conditions the client might not expect

- All insurance policies have certain defined exclusions from the insurance, i.e. situations in which the insurance does not give the Entitled Person the right to indemnification or insurance benefit:
 - The insurance does not apply to the non-insurable sports specified in the General Insurance Terms and Conditions.
 - In the case of pregnancy, medical expense insurance only covers medical treatment in the case of unexpected acute complications during the first 26 weeks of pregnancy (except for the risk pregnancy).
 - Medical expense insurance and accident insurance does not apply to cases where treatment costs are related to an accident or disease that occurred or whose symptoms manifested before the Insured's departure for the journey. Only a stabilized chronic disease, i.e. one the symptoms of which did not occur for 12 months before departure and the health condition of the Insured did not indicate that it would be necessary to seek medical assistance during insurance, is an exception.
- The upper limit of the insurance benefit is determined by the insurance amount or the limit of the insurance benefit. The limit of the insurance benefit is the upper limit of the sum of insurance benefits for all insured events occurring during one year of the insurance (if the insurance is arranged for a shorter period, during the term of the insurance).

ARTICLE 3
Description of the versions of the travel insurance

Insurance	CLASSIC / CLASSIC FAMILY	EXTRA / EXTRA FAMILY
Insured persons	Payment card holder / Payment card holder + 1 additional adult + 3 children up to and including the 21 years	Payment card holder / Payment card holder + 1 additional adult + 3 children up to and including the 21 years
Medical expenses insurance (ME)	CZK 5,000,000	CZK 100,000,000
Medical treatment, medication, hospitalization, transport to a medical facility, repatriation, transport of remains	up to the ME limit	up to the ME limit
Dental treatment – acute pain – Europe (i.e. treatment provided in Europe)	CZK 5,000	CZK 10,000
Dental treatment – acute pain – whole World (i.e. treatment provided outside Europe)	CZK 10,000	CZK 20,000
Intervention of a mountain service in the case of an insured event	up to the ME limit	up to the ME limit
Insurance of terrorism related risks	up to the ME limit	up to the ME limit
Extended assistance services (ABOVE STANDARD)	YES	YES
Costs of sending a family member (guardian)		
– fares there and back	max. CZK 50,000	max. CZK 100,000
– accommodation costs (total / 1 day)	max. CZK 30,000 / CZK 2,000	max. CZK 50,000 / CZK 3,000
Replacement documents in case of loss / theft – issuance costs	CZK 4,000	CZK 6,000
Accident insurance	YES	YES
Death due to an accident	CZK 100,000	CZK 300,000
Permanent disability due to an accident	CZK 100,000	CZK 300,000
Permanent consequences of an accident	10%	10%
Daily compensation	CZK 50	CZK 50
Daily Insurance Benefit Time Limit	29 days	29 days
One-off insurance benefit for hospitalization	CZK 1,000	CZK 2,000
Liability insurance	YES	YES
Damage to health		
Damage to property	CZK 2,000,000	CZK 20,000,000
Limit on damage to electronics / phones	CZK 3,000	CZK 10,000
Deductible for borrowed items (especially means of transport)	CZK 10,000	CZK 10,000
Luggage insurance	CZK 20,000	CZK 40,000
Damage, destruction or loss of luggage during transport	CZK 2,000	CZK 3,000
Trip interruption insurance	×	CZK 10,000 / person
Insurance for missed departure	×	CZK 10,000 / person
Delayed flight or delayed luggage insurance	×	CZK 5,000 / person
Insurance of cancellation fees (10% deductible)	×	CZK 50,000 / person
Territorial scope	World	World
Insurance of winter and risky sports	YES	YES
Continuous duration of stay abroad	120 days	120 days

ARTICLE 4
Basic scope of the insurance

- Medical expenses insurance** is arranged for the case of payment of necessary medical expenses incurred as a result of an accident or acute disease of the Insured. These expenses include costs for medical treatment, medication prescribed by a physician, stay in a medical facility, transportation of the Insured to the nearest medical facility for example. The Insurance also covers damage to life or health that was caused to the Insured in connection with a terrorist attack (with the exception of the situations listed in Article 8 of the VPP CP 2021).
- By way of derogation from the provisions of Article 12(3)(j) of the VPP CP 2021 it is agreed that the limit for dental treatment and related services, if they were provided as a result of an acute pain, is set 193/5000 for Classic / Classic Family versions in the amount of CZK 5,000 for Europe (i.e. treatment carried out in Europe) and CZK 10,000 for World (i.e. treatment carried out outside Europe) and for Extra / Extra Family versions at CZK 10,000 for Europe (i.e. treatment performed in Europe) and CZK 20,000 for the World (i.e. treatment performed outside Europe).
- The medical expense insurance includes both **the basic and extended assistance services**. For each version of travel insurance for payment cards, both basic and extended assistance services are arranged. The exact list of assistance services is provided in the VPP CP 2021, Part C.
- Accident insurance** is arranged for the event of accidental death, permanent consequences of an accident, injury treatment (daily compensation). In addition, the Insurer will provide one-off insurance benefit for hospitalization if the conditions specified in Article 18(D) of the VPP CP 2021 are met.
- Liability insurance** shall be arranged for a liability of the Insured, stipulated by legal regulations, for property damage caused by the Insured to any other person when travelling, to a thing or an animal as well as health damage to a person or death and non-material damage consisting of mental injuries in the event of injury or death.
- In accordance with the provisions of Article 69(7) of the VPP CP 2021, the liability insurance further stipulates that in the case of damage or destruction of electronics or telephones, the Insurer will provide insurance benefit for one insured event up to the limit specified in Article 3 of this Information. This insurance benefit limit does not apply in cases where the electronics or telephones are damaged or destroyed as a result of natural disasters caused by the Insured (e.g. fire, explosion).
- The Insurance also covers the payment of the deductible in the damage on a rented item that has been rented on the basis of a written contract between the insured and an entity authorised to do business in this field (so-called "official rental company"). Rented items mainly include motor vehicles, vessels, aircraft, flying devices for air sports, snowmobiles, and jet skis. In the event of an insured event, which is considered to be damage on or destruction of the rented item, the insured is entitled to payment of the indemnity for one insured event in the amount of the deductible paid by the insured, however not more than the limit specified in Article 3 of this Information for the Insured.
- Luggage insurance** offers financial compensation for damage, destruction or loss of luggage of the Insured due to natural phenomenon hazards (e.g. fire, earthquake, flood), theft, burglary or robbery.
- Trip interruption insurance** covers the cost of unnecessary travel services (e.g. tickets, facultative trips) if the Insured has to return back prematurely for serious reasons (such as acute disease or an injury).

10. **Insurance for missed departure** covers substitute transport cost if the Insured, for serious reasons (such as traffic constraint, lock-out or delay of public transport) misses the originally planned and paid means of transport.
11. **Delayed luggage insurance** will cover the cost of acquiring replacement personal belongings, especially clothing and hygiene, due to the delay of delivery of the luggage by at least 6 hours.
12. **Delayed flight insurance** will cover the cost of refreshment, accommodation or baggage storage if the flight is delayed by more than 6 hours.
13. **Insurance of cancellation fees** offers compensation in case of an obligation to pay the cancellation fee if the Insured has to cancel the trip before departure, for serious reasons (e.g. disease, accident, natural disaster). Insurance of cancellation fees is in accordance with Article 46 (5) VPP CP 2021 arranged in the extended variant.
14. In accordance with Article 46 (3) and (4) of GITC TI 2021, it is hereby agreed that the cancellation fee insurance can be arranged no later within 3 business days from the conclusion of the tour contract or the travel service contract. It is further agreed that the insurance also covers all tours / travel services contracted during the period of validity of the travel insurance covering the payment card. The insurance covers damages incurred before the start of the trip abroad. The commencement of the term of insurance is the date of payment for the tour or travel service, the end of the term of insurance is the date of commencement of the relevant tour.
15. In accordance with Article 3(1)(c) of the VPP CP 2021 **the territorial scope** of the travel insurance is **the World**, i.e. all countries of the world except for the Czech Republic. In accordance with Article 12(3)(b) of the VPP CP 2021 the medical expense insurance does not apply to insured events arising in the territory of the country (countries) the Insured is a citizen of; this does not apply when the insured foreign citizen is a participant in public health insurance in the Czech Republic. In accordance with Article 3 (3) of GITC TI 2021, it is agreed that the place of occurrence of the loss-incurring event under the travel interruption insurance, missed departure insurance, delayed flight and cancellation fee insurance may also be the territory of the Czech Republic. For the avoidance of doubt, the insurance does not cover tours / travel services provided only in the territory of the Czech Republic are not insured.
16. The insurance covers various types of travel (e.g. recreational, business administrative and manual, study). The insurance also covers Recreational, Winter and Risky Sports, which are further specified in Article 72(26, 27 and 44) of the VPP CP 2021. Excluded are so-called Non-Insurable Sports under Article 72(12) (e.g. automobile and motorcycle racing, motor-less and motor flying).
17. More detailed information on individual insurance policies, including the description of the exclusions, i.e. the situations in which the insurance does not give the Entitled Person the right to claim insurance benefits, are listed in the General Insurance Terms and Conditions for Travel Insurance VPP CP 2021.

ARTICLE 5

Scope of Insurance Claims

1. Pursuant to the aforementioned insurance contract covers the holder of the payment card issued by Československá obchodní banka, a. s. and may cover his/her family members.
2. Family members are insured only if one of the Family versions, whereas the family members are not required to travel together with the cardholder. In addition to the payment card holder, the insurance also covers 1 additional adult and up to 3 children up to and including the age of 21 years. Family members are understood as members of a close family, i.e. parents and children, grandparents and grandchildren, siblings, a husband or wife, a partner.
3. The Insured (i.e. the cardholder card or his/her family members) are also the Entitled Persons.
4. The premium and limit of the insurance benefit / insurance amount are agreed upon according to the chosen version of the travel insurance. In the case of the Family versions the limits of the insurance benefit / insurance amount are applicable to each Insured separately.
5. The Policyholder and the Insurer agree that the insurance covers insured events (as per the above-mentioned version of travel insurance) that occur during a stay of the Insured abroad, whereas the uninterrupted length of stay does not exceed **120** days. The number of trips of the Insured abroad during the term of the insurance is not limited, however the first trip abroad shall be realized after the insurance is established and then it is realized during the insurance validity. The continuous duration of the Insured's stay abroad (120 days) may be automatically extended for reasons specified in Article 9 of VPP CP 2021. If the Insured changes the insurance version during their stay abroad, insurance claims will only be settled according to such a changed version starting from the next trip abroad.
6. If the Insured has more insurance policies on the basis of authorized possession of more cards, the insurance benefit can be provided after the insurance cover has been exhausted from one card and from other arranged insurance policies but only up to the amount of property damage that the Insured has incurred. In case of permanent consequences of an accident or accidental death the insurance amount will be paid in multiples, depending on the number of valid insurance policies (based on the number of payment cards with the relevant version of the insurance).
7. It is not permissible to arrange more types of travel insurance policies to one credit card.

ARTICLE 6

Establishment, change and termination of the insurance, insurance term

1. The insurance is established on the day following the day of the conclusion of the contract on issuing the card or the filing of an application for insurance in addition to the already issued card. In certain marketing campaigns, the insurance coverage begins on the date on which the Policyholder notifies the Insured of the commencement of the insurance in question, provided that the Insured has not declined the insurance within the timeframe specified in the offer. The insurance term is 1 year. If the cardholder does not inform the Policyholder at least 6 weeks before the expiry of the insurance term that the Insured has no interest in the continuation of the insurance, the insurance policy is extended under the same conditions for the same period, i.e. one year.
2. The insurance is valid with a payment card. Termination of the card validity if a new card is issued as a direct replacement or a substitute card (including emergency card) does not cause the insurance to terminate.
3. The insurance expires with immediate effect, in particular due to the expiry of the right to use a payment card (e.g. by termination of a contractual relationship regarding a card issuing) and the detection of fraudulent behavior by the Insured. The insurance will also expire if the Policyholder is notified of the loss or theft of the payment card and no substitute payment card is issued. In this case, the insurance expires on the last day of the insurance term.
4. If the insurance is terminated or the insurance version is changed on a date earlier than the last day of the insurance period, the insurance fee paid or any part thereof will not be refunded.
5. If the insurance version changes, the insurance fee is charged in the full amount of the changed insurance version on the last working day of the month during which the change was agreed.
6. The insurance may also be terminated by means of a unilateral notification by ČSOB, whereby the participation in the insurance ends on the last day of the calendar month in which the notification was delivered to the insured.

ARTICLE 7

General information regarding the insurance

1. **Premiums and fees**
 - The premium is agreed as a one-off and is payable on the day of the start date of the insurance. The premium is paid by the Policyholder, i. e. ČSOB. The Insured pays the ČSOB an insurance fee. The policyholder does not impose the insurance fee on the Insured for selected payment cards. No other fees will be charged. Further information is provided in the Insurance Product Information Document for the Travel Insurance or the Insurance Contract.

- By way of derogation from Article 6(3) of the VPP CP 2021, the insurance premium is payable on the basis of an agreement between the policyholder and the insurer.
 - The tax aspects of the insurance are regulated by the generally binding legal regulations of the Czech Republic, in particular Act No. 586/1992 Coll., On Income Taxes, as amended.
 - The validity of the information provided by the Insurer in this document is not limited from the point of time in advance.
2. **Information on the Insurance Contract and the insurance**
- The insurance policy is linked to the ČSOB payment card.
 - The insurance is arranged for a term of insurance of one year; it may be automatically renewed upon the payment of the fee for the next period.
 - Legal acts relating to the insurance must be made in the Czech language.
3. **Practical instructions and information for withdrawal from the Insurance Contract**
- The Insured is not a party to the insurance. The Insured is therefore not the Policyholder and has no right to withdraw from the Insurance Contract or to terminate the Insurance Contract.
 - The Insured may terminate the insurance by a written request concerning the cancellation of the insurance addressed to the Policyholder (ČSOB), in person at the ČSOB branch or via telephone at 495 300 300.
 - The insurance further expires on the date of the anniversary of the insurance mentioned in the contract on issuing the payment card or in the application for the insurance.
 - The provisions of Section 2786 of the Civil Code for a change in the amount of premiums shall not apply.
4. **Conflict settlement**
- The insurance and the relationship between the Insured, the Policyholder and the Insurer are governed by the Czech legal order.
 - The court settlement of disputes arising from the insurance is determined by the competent courts of law in the Czech Republic.
 - Complaints can be sent to the Insurer's address below. The Insurer shall notify the complainant without undue delay of the acceptance of the complaint as well as of the manner and time of settlement. Subsequently, the Insurer shall inform the complainant on the complaint settlement in writing. The complainant has the option to refer a potential complaint to the Czech National Bank as the supervision authority for the financial market including the insurance industry.
 - The actions of the Insurer are governed by the Code of Conduct issued by the Czech Association of Insurance Companies (available at <https://cap.cz>).
 - If the prospective buyer, policyholder, insured, or beneficiary is a consumer, he/she is entitled to:
 - Out-of-court settlement of a consumer dispute. The materially competent authority for the out-of-court settlement of any consumer disputes arising out of insurance types other than life insurance is the Czech Trade Inspection Authority (<https://coi.cz>) or the Office of the Ombudsman of the Czech Insurance Association registered institute (<https://ombudsmancap.cz>) or the Association of Czech Consumers (<https://konzument.cz>) or the Consumer Ombudsman (<https://onlinemediator.cz>).
 - Alternative resolution of dispute relating to a contractual obligation arising from an online Insurance Policy through the online dispute resolution platform operated by the European Commission and available at <https://ec.europa.eu/consumers/odr>.
- The e-mail address for communication with ČSOB Pojišťovna, a.s., member of the ČSOB Group, which concludes Insurance Policies as the Insurer, is: info@csobpoj.cz.
5. **Violation of obligations**
- Violation of the obligations stated in the insurance contract, insurance terms and conditions or in law may lead to a reduction or non-provision of the insurance benefits, refusal of the insurance benefits, withdrawal from the insurance contract or termination of insurance (even without notice) and in the case of liability insurance the obligation to pay what the Insurer paid for the Insured to the damaged party. In the case of a violation of obligations related to the investigation of a loss or insurance event by the insurance participant, the Insurer may be entitled to reimbursement of the costs incurred by the Insurer for the investigation of the loss or insurance event.
 - Violation of the policyholder's obligations to pay premiums in a due and timely manner may cause the policyholder to be liable to pay the accessories of the receivable for the outstanding premium, especially interest on arrears and costs associated with its application (e.g. costs of sent reminders to pay premiums, etc.).
6. **Additional information**
- The report on the Insurer's solvency and financial situation can be found on the Insurer's website (in the "Who we are, Mandatory disclosures" section) at the Internet address <https://www.csobpoj.cz/o-spolecnosti/kdo-jsme>.
 - Group (mass) travel insurance cannot be arranged separately with the Insurer. In similar variants, it is possible to arrange individual travel insurance with the Insurer separately. More detailed information on the travel insurance arranged separately is available at www.csobpoj.cz, or at any branch of the Insurer.

ARTICLE 8

Instructions for the Insured

For the trip abroad, take the assistance card, or this information document. You can find the Assistance Card on the website of Československá obchodní banka, a. s. www.csob.cz. On this website you will also find the insurance terms and conditions relating to your insurance.

Insurance information

In case of any informative questions pertaining to the insurance, e.g. insurance version, insurance benefit limit, etc., contact the Insurer on the ČSOB Pojišťovna infoline **+420 466 100 777**, or at the e-mail address: **info@csobpoj.cz**.

How to report the damage event to the Insurer

1. In case of occurrence of a damage event **abroad**, please contact the assistance service (see the contact details on the Assistance Card), which will provide you with the necessary information and in case of accident or disease you will be recommended a medical facility at the place of your stay. Where in the world you are, the assistance service IS available 24 hours a day, 365 days a year with a Czech-speaking operator. If you only call the assistance service voice recorder, refer to your initials and phone number where the help desk can call you back.
2. in the case of a damage event occurring **within the territory of the Czech Republic**, or if you report a loss event only after returning from vacation (i.e. it was not necessary to use the assistance service abroad), contact the Insurer immediately on the information line, using one of the listed contacts.

Assistance Services:

ČSOB Pojišťovna Assistance

phone: **+420 466 100 777**

e-mail: **asistence@csobpoj.cz**

Information line:

ČSOB Pojišťovna, a. s.

phone: **+420 466 100 777**

e-mail: **pojistneudalosti@csobpoj.cz**

address: **ČSOB Pojišťovna, a. s., člen holdingu ČSOB, Masarykovo náměstí 1458, 530 02 Pardubice**

Basic advice and procedures in the case of a damage event

Tip: Damage under travel insurance can be reported easily online. Just fill in the online form on the website of ČSOB Pojišťovna at HYPERLINK „<http://www.csobpoj.cz>“ www.csobpoj.cz, section “Damage report”.

- **Both in the case of a telephone and a written report of the damage event, please send to the Insurer:**
 - Thoroughly filled in Damage Event Notice form.
 - Proof of payment.
 - In the case of treatment by a doctor or hospital stay abroad, the MEDICAL REPORT describing the course of the illness or injury is required.
 - Copies of other documents required to settle the damage event.
- **In the case of a disease or injury**
 - Make sure to ask the doctor abroad to issue the MEDICAL REPORT.
 - Keep medical reports and all bills for reimbursement.
- **In the case of liability for damage**
 - If it is a small damage, you can pay it on site. The proof of payment and photographic documentation must be submitted to the Insurer upon return from the holiday.
 - In the event of more serious damage, contact the assistance service, do not admit your liability without a consent of your insurance company, do not repay the damage caused even partially, do not sign any document the contents of which you do not understand.
 - Inform the victim that you have a liability insurance, or you can give them the contact details of the Insurer.
 - Try to secure written statements from the victim and potential witnesses.
 - Document the circumstances of the damage (photo documentation).
- **In the case of luggage damage**
 - Please immediately report the theft of the luggage to the police at the place of the insured event and request a police report.
 - Document the circumstances of the damage.
- **In case of trip interruption / missed departure / flight delay / delay of luggage**
 - Secure a document proving the price of unused travel services / cause of missed departure / document proving the flight delay time or luggage delay.
- **When canceling a trip or travel service purchased**
 - Immediately withdraw from a travel or travel service contract in writing.
 - Get documents proving the reason for withdrawal from the specified contract (such as medical report, police protocol).

All forms, e.g. Damage Event Notice, can be found on the website of Československá obchodní banka, a. s. – www.csob.cz or on the ČSOB Pojišťovna website – www.csobpoj.cz.

CESTOVNÍ POJIŠTĚNÍ KE KARTĚ

Mám
 Nemám

Jméno a příjmení držitele karty:

Rodné číslo:

Znalost RČ držitele platební karty nám usnadní a urychlí postup při vyřizování Vaší škodné události.

 Pomoc v ČR i zahraničí
Informace
+420 466 100 777 