

Policyholder's name: _____

As a policyholder / insured, I hereby present an offer for the conclusion of a health insurance underwritten by UNION Vienna Insurance Group Biztosító Zrt. pursuant to the relevant laws governing for insurance policies:

1. The policyholder and/or insured takes note that:

- the inception date may not precede the date of signature of the offer,
- with the acceptance of the offer, the insurer shall book the amount paid upon the making of the offer as premium payment, and if the offer is rejected by the insurer the same amount shall be transferred back to the policyholder without interest payment,
- if within 15 days of the receipt of the insurance policy the policyholder should withdraw from the contract, the insurer shall have the right to deduct its expenses from the premium paid. The value of such expenses is identified as one month's premium payable under the contract, subject to a ceiling of HUF 15,000. If the insurance is concluded subject to a medical examination, the insurer shall also have the right to deduct the cost of such examination from the repayable premium,
- the disclosure of false data may cause the invalidity of the policy,
- upon the unilateral termination of the contract by the policyholder, the insurer may charge costs,
- notices or stipulations made verbally are only valid if confirmed in writing by the insurer's competent body,
- the insurer will provide the services specified in the policy for the insured risks if the insured event materialises, in exchange for the payment of the premium,
- name and address of the entity entrusted with loss settlement: Advance Medical Hungary Kft., 1085 Budapest, Baross utca 22.,
- the insurance policy is governed by the prevailing rules on taxation (in particular Act CXVII of 1995 on Personal Income Tax, Act XCII of 2003 on the Rules of Taxation, Act LXXXI of 1996 on Corporate Tax and Dividend Tax, Act LXVI of 1998 on Healthcare Contributions, Act LXXX of 1997 on Social Security, as well as other legislation not listed herein),
- your data will be processed by the insurer, including special data, and in the course of data management the insurer shall proceed in accordance with the provisions of Act CXII of 2011 on Informational Self-Determination and Freedom of Information, as well as Act XLVII of 1997 on the Handling and Protection of Health Data and the Related Personal Data,
- the insurer is entitled to handle business secrets of customers that are related to their insurance policies, - the insurer may employ external organisations for performing its functions and allow access for such organisations to the transmitted data at their request,
- data are processed electronically,
- Advance Medical Hungary Kft. cooperates in the expert activity related to the health condition of the insureds with a telephone survey; in the course of the survey, it manages the data related to the insurance contract, and keeps the audio material archived for 5 years following the expiry of the insurance contract,
- the services related to the insurance are organised by Advance Medical Hungary Kft., who shall keep the audio material and other written documentation related to the service archived for 5 years following the expiry of the contract,
- the data handled by the insurer are archived by Iron Mountain Kft.,
- data may be forwarded to reinsurance companies located in third countries who are in a contractual relationship with UNION Vienna Insurance Group Biztosító Zrt.,
- the insurer handles all data obtained by it as confidential insurance information and only discloses such data to third parties subject to written consent. The non-disclosure obligation does not apply to the itemised cases specified in Art. Sections 135 - 143 and 147 of LXXXVIII of 2014. Act on Insurance Activity and in case of requests made by the bodies defined therein, - where medical examination is a condition precedent for the establishment of the insurance contract, the insured shall have the right to learn about the results of such examination at the medical service provider pursuant to Act CLIV of 1997 on Health.

2. The policyholder / insured declares that:

- his/her replies issued to the insurer's enquiries are truthful,
- he/she has received information on the key data of the insurer and on the offered insurance product prior to the conclusion of the insurance policy, and has received the policy terms and conditions as well as the specific terms and conditions governing for the policy (along with the annexes listed in the offer), and has been separately informed about the events warranting exemption or exclusion from the services, as well as on the terms of contract that differ from usual contractual practices, and on the consequences of the termination of the contract, and on other insurance services.

In the event of any issues arising in respect of concluded contracts, please contact the Customer Service of UNION Vienna Insurance Group Biztosító Zrt. The Customer Service of UNION Vienna Insurance Group Biztosító Zrt. can be reached at the following phone number: (+36-1) 486-4343. Should any problem related to your contract fail to reach resolution, please refer to our General Directorate with your complaint: 1461 Budapest, Pf. 131. Telephone: (+36-1) 486-4200. The resolution of complaints does not substitute litigation. The insurer's supervisory authority is: National Bank of Hungary, 1535 Budapest 114., Pf. 777.

Signed in _____, ____ / _____ / _____ _____
Signature of policyholder/insured

In accordance with Section 6 of Act XLVIII of 2008 on Commercial Advertising Activities (hereinafter "the Commercial Advertising Activities Act"), the policyholder/insured consents to the insurer sending him/her commercial advertising materials via direct marketing, in particular by e-mail or by any other equivalent individual communication method, and keeping record of his/her name, address, e-mail address and mobile phone number for this purpose.

The insurer shall keep record of the data for the aforementioned purpose in accordance with the requirements of the Commercial Advertising Activities Act, until the withdrawal of the declaration of consent. You may withdraw your consent any time, without restrictions or without providing your reasons, free of charge, by sending a notice to this effect by mail (address: 1461 Budapest, Pf. 131.) or electronically (e-mail: dm@unionbiztosito.hu) to the insurer. The policyholder/insured declares that this declaration is based on voluntary data supply, and that it was made after receiving adequate information on the purpose and content of data management.

Signed in _____, ____ / _____ / _____ _____
Signature of policyholder/insured