

Where to seek help if you have questions and in emergencies

If you have questions on insurance benefits...

...we will be glad to help. Please use our service times from 8.30 am to 7 pm on Mondays to Fridays and Saturdays from 9.00 am to 2.00 pm (excluding public holidays) for this purpose. You can reach our service centre via

Telephone +49 (0) 89 6 24 24 - 548
Telefax +49 (0) 89 6 24 24 - 244
E-Mail: service-reise@allianz.com

If you require help in an emergency...

...the Assistance is there to help you. Our 24-hour emergency service can offer you rapid and expert help round the clock anywhere in the world!

Telephone +49 (0) 89 6 24 24 - 548

Telefax +49 (0) 89 6 24 24 - 246

If you would like to report a claim to us...

...you can do that quickly, easily and at any time at **www.allianz-reiseversicherung.de/schadenmeldung**
(Alternatively also by post to our Claims Department):

AWP P&C S.A.
German branch office
Claims Department
Bahnhofstraße 16
D - 85609 Aschheim (bei München)

You can reach us by telephone or by fax under the service numbers referred to above.

Important in an emergency:

- Have the exact and complete address and telephone number of your current location ready.
- Note the names of the people to contact at official bodies, such as for example a doctor, hospital or the police.
- Describe the situation as exactly as possible and give us all the necessary information.

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Your benefits at a glance

Travel Service Insurance

Offers you immediate assistance in any foreign country in the world in the event of an emergency. A central telephone number is available 24 hours a day to provide assistance to insured persons.

Foreign Travel Health Insurance

Reimburses the costs of necessary medical aid in a foreign country should you fall ill or be injured in an accident requiring urgent attention whilst on a trip abroad:

- doctors' and hospital expenses;
- medicines.

The country in which the cardholder has his permanent residence does not count as abroad.

Transport Business Travel Accident Insurance

Provides compensation in the event of an insured accident during the trip that leads to permanent invalidity or the death of the insured person and that takes place whilst using transport within the country in which the insured person has his / her permanent place of residence.

Foreign Business Travel Accident Insurance

Provides compensation in the event of an insured accident during the trip that leads to permanent invalidity or the death of the insured person and that takes place outside the country in which the insured person has his / her permanent place of residence.

Traffic Law Legal Protection Insurance

Protects you financially in disputes in which you may be involved as a participant in public road traffic during a business trip. In cases covered by legal protection insurance, Allianz will reimburse you for the costs incurred up to the agreed amount of cover insured.

Business Trip Curtailment Insurance

Reimburses

- additional costs caused by the curtailment of the trip up to the amount referred to in the Contractual Data;
- the travel costs of a substitute employee to replace the insured person at the location.

Insurance companies' addresses

Risks associated with Travel Service Insurance, Foreign Travel Health Insurance, Transport Business Travel Accident Insurance, Foreign Business Travel Accident Insurance and Business Trip Curtailment Insurance borne by:

AWP P&C S.A.
German branch office
Bahnhofstraße 16
D - 85609 Aschheim (bei München)
CEO: Olaf Nink
Registry court: Munich HRB 4605

AWP P&C S.A.
plc under French law
Company's registered office: Saint-Ouen (France)
Commercial register: R.C.S. Bobigny 519 490 080
Board of management: Rémi Grenier (chairman), Dan Assouline, Fabio de Ferrari, Ulf Lange, Claudius Leibfritz, Lidia Luka-Lognoné, Mike Nelson, Sylvie Ouziel

Main business activity: The company is an insurance company and provides principally travel insurance.

Risks associated with Traffic Law Legal Protection Insurance borne by:

Allianz Versicherungs-Aktiengesellschaft
Chairman of the supervisory board: Dr. Klaus-Peter Röhler.
Board of management: Joachim Müller (chairman), Ana-Cristina Grohnert, Dr. Jörg Hipp, Burkhard Keese, Jens Lison, Jochen Haug, Frank Sommerfeld, Dr. Rolf Wiswesser.
Company's registered office: Munich
Registry court: Munich HRB 75727

Main business activity: the company is a damages and accident insurance company.

Allianz Rechtsschutz-Service GmbH, Königinstr. 28, 80802 Munich, chairman of the board: Philipp Albrecht Michael Eder, Registry court Munich, number HRB 108104, has been appointed to process claims in connection with Traffic Law Legal Protection Insurance. Claims are processed together with the credit card number through AWP P&C S.A., German branch office.
Address: Bahnhofstraße 16, Claims department, 85609 Aschheim (bei München).

This translation is for information purposes only. In the event of any conflict or inconsistency between the German and the English versions, the German original shall prevail.

Contractual Data

The Contractual Data refers to the insurance terms and conditions. Together with the insurance terms and conditions, they determine the exact scope of the insurance.

Standard Terms and Conditions of Insurance

Policyholder:

First Data Deutschland GmbH
Konrad-Adenauer-Allee 1
61118 Bad Vilbel

Insured persons (§ 1):

Insured person is the legitimate holder of a valid Mastercard® Business Card Gold (hereafter referred to as the credit card).

Area of validity (§ 2):

As part of Travel Service Insurance, cover is provided for all travel anywhere in the world outside the country in which the cardholder is permanently resident.

As part of Foreign Travel Health Insurance, cover is provided during all private and business travel outside the country in which the cardholder is permanently resident. Insurance cover is provided from the time that the trip begins for up to a maximum of 62 days per trip. No insurance cover is provided for expenses incurred by the insured person in his own country of residence, not even should these expenses relate to the consequences of illnesses and injuries that occurred during the foreign trip.

Should the permanent place of residence be temporarily located abroad for professional reasons (e.g. on account of work over a period of several years), no insurance cover will be provided for the country of residence concerned.

Transport Business Travel Accident Insurance covers all business trips in the country in which the cardholder has his permanent place of residence.

Foreign Business Travel Accident Insurance covers all business trips outside the country in which the cardholder has his permanent place of residence.

Traffic Law Legal Protection Insurance provides insurance cover on all business trips throughout the world.

No insurance cover is provided in the case of claims that occur within 50 kilometres (as the crow flies) of the insured person's place of residence.

Business Trip Curtailment Insurance provides insurance cover for all business trips anywhere in the world outside the country in which the cardholder has his permanent

place of residence. In the event of a temporary relocation of the main place of residence to another country for business reasons, no insurance cover is provided in the country where the temporary place of residence is located.

Insurance cover as part of Business Trip Curtailment Insurance is provided for events during foreign business trips lasting a maximum of 90 consecutive days. Should the duration of the trip exceed 90 days, insurance cover will end with effect from the 91st day, unless the insured event occurred earlier.

Beginning of insurance cover / end of insurance cover (§ 3):

1. For customers who are in possession of a valid credit card on 01.01.2016: The insurance cover of all insurance benefits starts on 01.01.2016.
2. For all customers who apply for a new credit card from the 01.01.2016: The insurance cover of all insurance benefits listed below starts on the date of the application for the credit card subject to the conclusion of a valid credit card contract.

All insurances apply to travel within the insured periods of time.

Required use of the card (§ 4):

As part of

- Travel Service Insurance
- Foreign Travel Health Insurance
- Foreign Business Travel Accident Insurance
- Traffic Law Legal Protection Insurance
- Business Trip Curtailment Insurance

insurance cover will apply irrespective of whether the credit card is used as a means of payment for the trip.

As part of the Transport Business Travel Accident Insurance, the insurance cover will apply dependent on whether the credit card is being used as a means of payment for the trip.

Special obligations (§ 6 no. 4):

The insured person must provide suitable evidence that the trip has in fact been a business trip.

Payment of compensation (§ 7):

Compensation will be paid to the insured person or his employer, depending on who incurred the expenses. In case of dispatch of a substitute employee the compensation is paid to the employer of the insured person. The insurer may defer payment as long as there are doubts regarding the eligibility of payment.

Travel Service Insurance

Amount of the undertaking to pay costs in the event of inpatient treatment (§ 2 no. 2 c):

€ 13,000.00

Amount of the bridging loan (§ 5 no. 1b):

€ 1,600.00

Assistance in the event of criminal prosecution proceedings (§ 5 no. 2):

AWP will pay court costs and the costs of a lawyer and interpreter up to an amount of € 2,600.00 and, should this be necessary, bail of up to € 13,000.00 in a criminal prosecution case.

Reimbursement of search, rescue and recovery costs following an accident (§ 6):

€ 2,600.00

Foreign Travel Health Insurance**Amount of costs reimbursed**

Costs of curative treatment with no upper limit.

Excess (§ 2 no. 4):

No excess.

Transport Business Travel Accident Insurance**Scope (§ 1 no.1 a):**

1. Assuming that the transport company or car hire company is paid in accordance with § 4 of the Standard Terms and Conditions of Insurance, insurance cover is provided:

- a) from entering to leaving the
 - public transport vehicle,
 - hire car (car, estate car),
 - hired motor caravan;
- b) as a passenger on direct or round trips by air in a propeller or jet aircraft or in a helicopter (not however as the pilot (also of a hobby aircraft) or as any other member of the crew of an aircraft) from the time of arriving at the airport area to the time of leaving, including the flight;
- c) from entering to leaving the airport, including the total airport area. Should public transport be used in order to reach and/or to leave the airport, the direct trip straight to or from the airport is also insured – the same applies to substitute transportation provided by the airline.
In the case of the trip to the airport, cover is only provided if it can be proved that the subsequent flight was paid for with the credit card(s) referred to in § 1 of the Standard Terms and Conditions of Insurance.
- d) during an overnight stay as a guest in a hotel building; and this assuming that the transport company / hotel accepts the credit card as a means of payment and the credit card is used to pay for transport and the hotel.

2. In the case of rental of a hire car or accommodation in a hotel, insurance cover is only provided if the traveller confirms by the signature in the car hire rental contract, in the hotel registration form or in some other written form in each individual case that payment was made by means of the credit card(s) referred to in § 4 of the Standard Terms and Conditions of Insurance or that a down payment was made by means of one of these credit cards.

Amount insured in the event of death (§ 3):

€ 80,000.00

Amount insured in the event of invalidity (§ 4):

Up to € 160,000.00

Limitations (§ 5 nos. 2 and 3):

No. 2: considered not to have been agreed.

No. 3: cumulative risk (maximum compensation paid to all the insured persons injured in an insured event covered through Mastercard® Business Card Gold): € 52,000,000.00.

Foreign Business Travel Accident Insurance**Scope (§ 1 Nr.1 b):**

Insurance cover is provided for accidents incurred by the insured person on a business trip in a foreign country.

In using public transport (including all-inclusive trips by air, rail, bus and ship) insurance cover begins as soon as the foreign business trip starts in the home country with the departure from home (or, as the case may be, on departure from the place of work) and ends on the return to the private home or place of work provided that in each case the most direct route is taken to the destination of the business trip or to the home location. For the rest, the terms of the above transport business travel accident insurance will apply.

Traffic Law Legal Protection Insurance**Amount insured (section 1.6 paragraph 6):**

€ 300,000.00 per insured event and year.

Loan to provide bail (section 1.6 paragraph 3 f):

Up to € 100,000.00

Excess (section 2.6):

No excess.

Business Trip Curtailment Insurance

Amount insured (§ 1):

- maximum of € 2,600.00 per insured event for additional costs due the trip being curtailed;
- travel costs of a substitute employee: return flight in Business Class or return trip 1st class by rail or by ship.

Excess (§ 6):

No excess.

Standard Terms and Conditions of Insurance (AVB)

(abbreviated to: AVB AB 14 KI FDD)

On behalf of the savings institutions ("Sparkassen")/banks that the policyholder has concluded in the area covered by the group insurance contract concluded with AWP P&C S.A., Bahnhofstraße 16, D - 85609 Aschheim (bei München), the policyholder has agreed comprehensive insurance cover for the insured persons referred to in the Contractual Data on the basis of the terms and conditions printed below. The premium for these insurance policies is paid by First Data Deutschland GmbH or your bank out of the annual card subscription fee. The following rules under §§ 1 to 11 apply to all insurances of the persons insured through this credit card.

§ 1 Who is insured?

The insured persons are those persons referred to in the Contractual Data or the group of individuals described there. The insured person is entitled to exercise the rights in the insurance contract directly. Should two or more credit contracts have been concluded, insurance benefits may only be claimed once. The insurance benefits are not accumulative.

§ 2 What is the area covered by the insurance?

The area of validity for the individual insured parties is set out in the Contractual Data.

§ 3 When does the insurance begin and end?

Unless anything to the contrary has been agreed in the Contractual Data and subject to the conclusion of a valid credit card contract, the insured person will be covered from the time the credit card is applied for and cover will end as soon as the termination of the credit card contract comes into force.

§ 4 Is insurance cover conditional on the use of a credit card as a means of payment?

The provisions referred to in the Contractual Data will apply.

§ 5 In which cases is no insurance cover provided?

1. The following situations are not insured
 - a) damage caused by strikes, nuclear energy, confiscation and other actions by sovereign authorities as well as damage incurred in areas covered by a travel warning issued by the German Foreign Office at the time this area was entered. Should an insured person actually be in the area concerned at the time the travel warning is issued, insurance cover will end 14 days after publication of the warning; insurance cover will continue in spite of the travel warning should the end of the trip be postponed for reasons for which the insured person is not responsible;
 - b) damage caused by war, civil war and warlike events. Insurance cover will still be provided however if the damage occurs within the first 14 days after the beginning of the events; insurance cover will however continue should the end of the trip be postponed for reasons for which the insured person is not responsible. Insurance cover will however not be provided under any circumstances should the insured person be in a country on whose territory war or civil war is already taking place or should an outbreak be foreseeable. Damage as a result of active participation in war, civil war or warlike events is not insured;
 - c) damage caused intentionally by the insured person;

- d) expeditions, unless anything else has been agreed;
 - e) damage caused indirectly or directly through the use of atomic, biological or chemical weapons materials.
2. Should the insured person not have a residence in the EU or the EEA, insurance cover will only be provided for travel within Europe or in Mediterranean coastal states.
 3. No insurance cover will be provided in the event of economic, trade or financial sanctions or an embargo imposed by the European Union or the Federal Republic of Germany that are directly applicable to the contractual parties and that are contrary to insurance cover. This will also apply in the event of economic, trade or financial sanctions or an embargo imposed by the United States of America unless this is contrary to European or German law. The remaining provisions of the contract are not affected.

§ 6 What must the insured person do under all circumstances in the event of a claim (Obligations)?

The insured person is required to:

1. keep damage as low as possible and avoid unnecessary costs;
2. notify AWP of the damage immediately;
3. describe the incident that caused the damage and the amount of damage, give AWP a truthful account of all relevant information and allow AWP to make a reasonable check on the cause and the amount of the claim lodged. The insured person is required to submit the originals of invoices and other documents as proof and, should this be necessary, release doctors – including doctors provided by the Assistance – from their confidentiality to the extent that knowledge of this information is necessary in order to assess the obligation to provide benefits and the scope of these benefits. AWP will not be required to provide benefits should it not be able to establish the amount and the scope of its obligation because the insured person refuses to release the doctor from his obligation to confidentiality and not enable AWP to determine its obligation in any other way;
4. provide suitable evidence of the nature of the trip in accordance with the Contractual Data;
5. provide suitable evidence of the start date of the trip.

§ 7 When does AWP pay compensation?

Provided AWP has established its obligation to pay and the amount of the benefit, compensation will be paid within two weeks. Payment will be made solely by transfer into a bank account.

§ 8 What happens should the insured person have claims for damages against third parties?

1. In accordance with the provisions of the law, claims for damages against third parties are transferred to AWP up to the amount of the payment made, provided that the insured person does not incur any disadvantage as a result.
2. Subject to this limitation, the insured person is required to confirm the transfer of rights in writing, should AWP request this.
3. Obligations by other insurers or social insurance institutions to pay benefits have priority over AWP's obligation to indemnify. AWP will be obliged to pay in advance provided claims are initially made against it through the submission of original invoices.

§ 9 When does the insured person lose entitlement to insurance benefits if obligations are infringed or should the claim have become time expired?

1. Should an obligation have been deliberately infringed, AWP is absolved from its obligation to pay benefits; in the event of a grossly negligent infringement, AWP is entitled to reduce the benefit in proportion to the seriousness of the insured person's infringement.

2. The insured person is required to prove that he was not guilty of gross negligence. Except in cases of fraudulent intent, AWP is required to pay benefits provided that the insured person can prove that the infringement of the obligation was the cause neither of the occurrence nor the discovery nor the degree of AWP's obligation to provide benefits.
3. The claim to insurance benefits will expire in three years calculated from the end of the year in which the claim occurred and the insured person learnt of the circumstances justifying the assertion of a claim or should have learnt in the absence of gross negligence.

§ 10 What is the stipulated form for the submission of declarations of intent?

1. Notices and declarations of intent by the insured person and the insurer must be in text form (e.g. by letter, fax or e-mail).
2. Insurance brokers are not authorised to accept such documents.

§ 11 Which court in Germany is responsible for the assertion of claims under the insurance contract? Which law is applicable?

1. At the insured person's option, the place of jurisdiction is Munich or the place in Germany in which the insured person has his permanent residence or his habitual place of abode at the time the suit is filed.
2. The contractual relationship is subject to German law unless this contradicts international law.

Travel Service Insurance

(abbreviated to: AVB RS 08 KI FDD)

Note:

Allianz Partners Deutschland GmbH, Bahnhofstr.16, 85609 Aschheim, (hereafter referred to as "the assistance") has been appointed to provide the services as part of Travel Service Insurance.

§ 1 Which services are provided by AWP?

1. AWP offers the insured person help and support in the following emergency cases during the trip and, subject to the conditions referred to, also pays the costs incurred. AWP reserves the right to check cover; as a matter of principle, services provided and undertakings to pay costs by the assistance and the appointment of service providers do not constitute an admission of AWP's obligation to pay compensation to the insured person under the insurance contract.
2. The insured person is required to make contact with the assistance immediately in order to use these services in an emergency.
3. Should the insured person be unable to claim the recovery of amounts advanced by AWP as compensation, he will be required to reimburse these amounts to AWP within a month of the end of the trip.

§ 2 What help does the assistance offer in the event of an illness or an accident during the trip?

1. Outpatient treatment
On request, the assistance will provide information on the possibilities of medical care and will suggest, wherever possible, a German or English-speaking doctor. The assistance will not however establish the contact to the doctor.
2. Inpatient treatment
Should the insured person receive inpatient treatment in a hospital, the assistance will provide the following services:

- a) Care
If required, AWP will establish contact through its panel doctor between the insured person's own doctor and the hospital doctors responsible for treatment; it will ensure that information is exchanged between the doctors concerned. If requested, AWP will inform the insured person's relatives.
 - b) Visits to the patient
Should the insured person be undergoing inpatient treatment lasting more than 10 days, the assistance will organise on request a visit by a relative of the insured person to the hospital and the return trip. AWP will pay travel costs but not costs of accommodation.
 - c) Undertaking to pay costs
In the event of inpatient treatment, AWP will give the insured person an undertaking to pay costs up to the amount agreed in the Contractual Data. This undertaking does not however imply acknowledgement of an obligation to pay benefits. AWP will settle all costs with the responsible institution in the name of the insured person. Should neither the health insurer nor any third party assume the costs advanced by AWP, the insured person will be required to reimburse these amounts to AWP within a month of the end of the trip.
3. Patient repatriation
As soon as the panel doctor appointed by the assistance, in consultation with the local doctors treating the insured person, believes that it is medically expedient and decides accordingly, the assistance will organise repatriation to the nearest suitable hospital to the insured person's place of residence using appropriate means of medical transportation (including ambulance aircraft). AWP will pay any additional costs compared with those of the return trip originally planned.
 4. Should it no longer be possible to look after children under the age of 15 travelling with the insured person on account of his death, severe accident injury or an unexpected grave illness, the assistance will organise the journey back to their place of residence as well as, if necessary, that of an accompanying adult and will also pay the costs. AWP will pay any additional costs compared with those of the return trip originally planned.

§ 3 What help does the assistance provide in procuring necessary pharmaceuticals during the trip?

The assistance, in consultation with the insured person's own doctor, will as far as possible organise the procurement of medically prescribed pharmaceuticals and their transportation to the insured person. The insured person will be reimbursed any costs that might be incurred in picking up these pharmaceuticals as well as clearing them through customs. The insured person will be required to reimburse the costs of these pharmaceuticals to AWP within a month of the end of the trip.

§ 4 Which services does the assistance provide in the event of the death of the insured person?

Should the insured person die during the trip, the assistance will, according to the relatives' wishes, arrange for burial abroad or the repatriation of the deceased person to a place of burial in the insured person's country of permanent residence and will pay the costs. This does not include the costs of buying a grave, gravestone or holding a funeral service.

§ 5 What services does the assistance offer in other emergencies?

1. Loss of means of payment for the trip and travel documents
 - a) should the insured person experience a financial emergency because of the loss of all means of payment for the trip, the assistance will establish contact with his bank at home. The assistance will help the insured person's bank in transferring the amount provided to the insured person.

- b) Should it not be possible to contact the insured person's bank within 24 hours, the assistance will provide him with a bridging loan up to the amount stipulated in the Contractual Data. This amount must be repaid to AWP within one month of the end of the trip.
 - c) The assistance will help to block the appropriate accounts should credit cards or cheque / (Maestro) debit cards be lost. The assistance is not however liable that the blocking is correctly carried out nor for any financial damage incurred.
 - d) Should travel documents be lost, the assistance will help the insured person in obtaining replacement documents. AWP will reimburse the official fees charged for issuing the lost travel documents.
2. Criminal prosecution proceedings
Should the insured person be arrested or threatened with arrest, AWP will provide help in procuring a lawyer and an interpreter. AWP will advance the court costs and the costs of a lawyer and interpreter and, if necessary, bail for a criminal offence, up to the relevant amount agreed in the Contractual Data.
The insured person is required to repay the costs advanced immediately on his return, at the latest however within a month of their payment by AWP.
3. SOS message for travellers
Should it be necessary to recall the insured person from the trip by radio on account of the death or illness of a close relative or as a consequence of serious damage to his financial position, the assistance will attempt to arrange an SOS call. AWP will pay the associated costs.

§ 6 What costs will AWP pay in the event of search, rescue and recovery measures?

AWP will pay compensation for the costs of search, rescue and recovery up to the amount agreed in the Contractual Data should the insured person have to be rescued or recovered following an accident.

§ 7 What telephone services does the assistance offer?

The assistance will provide the following telephone services:

1. Medical helpline
 - a) The assistance's medical service is available to the insured person around the clock.
 - b) The services of the "medical helpline" may be used during or prior to the trip (preventive consultation).
They include:
 - advice on vaccinations;
 - advice on tropical medicine;
 - advice on the nature and spread of illnesses in the holiday location;
 - suggestions on putting together a holiday first-aid kit for certain travel destinations;
 - general measures of preventive medicine and rules of behaviour whilst travelling;
 - recommendation of identical or similar medicines in foreign countries;
 - names of German or English-speaking doctors abroad.
2. Contacts with specialists
The assistance will establish contacts with specialists in foreign countries:
 - interpreters;
 - translators;
 - German and English-speaking lawyers;
 - German and English-speaking motor vehicle appraisers (only in Europe and Mediterranean countries outside Europe);
 - German or English-speaking doctors.
3. Interpreter service
Should language support be possible and necessary in an emergency, the assistance will provide the person in need with help by telephone through an interpreter.

4. Documents depot
At the insured person's request, the assistance will archive copies of important documents. Should the originals be lost or stolen, the assistance will send photocopies of the required documents. The relevant data sheet must be requested from the assistance for registration purposes.

Foreign Travel Health Insurance

(abbreviated to: AVB RK 14 KI FDD)

§ 1 What is insured?

1. The costs of treating acute illnesses and accidents occurring whilst travelling abroad are insured up to the amount agreed in the Contractual Data.
2. Countries in which the insured person has a permanent place of residence are not considered abroad.

§ 2 What costs will be reimbursed in the event of treatment abroad?

1. AWP reimburses the costs of necessary medical treatment abroad. This includes the costs of
 - a) outpatient treatment by a doctor;
 - b) curative treatments (including x-ray diagnostics), pharmaceuticals and bandages / dressings as well as physical-medical services (radiation, heat, light and other physical treatment) prescribed by a doctor for the insured person;
 - c) inpatient treatment in a hospital including non-deferrable operations.
Necessary treatment of acute complaints during pregnancy and non-deferrable medically indicated abortions as well as the delivery of premature babies up to the 36th week of a pregnancy and miscarriages are also covered. In the case of a premature birth (contrary to §1 AVB AB KI FDD), necessary costs of treating the newly-born child up to an amount of € 100,000.00 in a foreign country are also paid;
 - d) medically required transport of a sick person for inpatient treatment at the nearest hospital in a foreign country and return to the accommodation;
 - e) medically required transport of a sick person for outpatient treatment at the nearest hospital in a foreign country and return to the accommodation; compensation is limited to € 200.00 for each insurance claim;
 - f) medically required aids (e.g. crutches, rental of a wheelchair, leg-braces) up to € 250.00 per insurance claim unless anything different is agreed in the Contractual Data; medically required aids necessitated by an injury as a consequence of an accident up to an amount of € 1,000.00 per insurance claim unless anything different has been agreed in the Contractual Data;
 - g) dental treatment to alleviate pain including simple fillings and repairs to dentures and temporary solutions as well as provisional replacement of teeth following an accident up to an amount of € 250.00 unless anything different has been agreed in the Contractual Data;
 - h) the procurement of artificial limbs and heart pacemakers initially necessitated due to accidents or acute illnesses occurring during the trip and that serve the treatment of the consequences of an accident or illness.
2. AWP will reimburse the costs of curative treatment up to the day on which the medical finding is issued that no further treatment is required.
3. Lump-sum reimbursement of expenses
Should a third party pay the costs of medically required complete inpatient curative treatment abroad, unless the Contractual Data provides for anything different, AWP will pay a lump-sum reimbursement of expenses (telephone, TV, additional meals costs also for visitors etc.) up to a maximum amount of € 31.00 a day. The insured person cannot incur any financial disadvantage due to a division of costs with another

insurer since AWP will, if necessary, waive a contribution to costs by the other insurer or compensate the insured person for the disadvantage.

4. The insured person will pay the agreed excess in accordance with the Contractual Data.

§ 3 What additional services does AWP provide?

The assistance's medical service will support the insured person in finding medical treatment centres in the event of acute illnesses and accidents during the insured trip. Depending on the provisional telephone diagnosis, the nearest doctor or hospital offering the highest medical standard in the particular case will be recommended.

Provided that the insured person follows the recommendation made by the assistance, contrary to §§ 1 and 2 AVB RK 14 KI FDD, the following additional services will be provided:

1. payment of proven necessary telephone costs;
2. payment of proven transport costs to the recommended medical treatment centre;
3. accommodation for an accompanying relative in or close to the hospital provided that his/ her constant presence is required as part of the fully inpatient treatment of the insured person, up to a maximum amount of € 80.00 per day for up to eight days. or alternatively
4. payment of proven costs for trips by an accompanying relative to visit the insured person locally up to a maximum amount of € 25.00 per day limited to five days.

§ 4 What limitations on insurance cover should you be aware of?

1. Provided that nothing different has been agreed in the Contractual Data, no insurance cover is provided for
 - a) curative treatment and other medically prescribed measures that are a reason for the trip;
 - b) curative treatment and other medically prescribed measures, the necessity for which the insured person was or must have been aware of given circumstances known to him before undertaking the trip or at the time the insurance was concluded;
 - c) dental treatment beyond treatment to alleviate pain, repairs to dentures and temporary measures;
 - d) massage and wellness treatment, fango and lymph drainage not medically prescribed for the insured person, acupuncture treatment and the procurement of artificial limbs and medical aids not included under § 2 No. 1 f) or h) AVB RK KI FDD;
 - e) treatment of alcohol, drug and other addictions or of illnesses or accidents caused by the abuse of alcohol, drugs or medicines and for attempted or successful suicide and its consequences. Should the accident not occur in connection with the use of a motor vehicle by the insured person on public roads, alcohol abuse is not established until an examination by the police or by a doctor carried out during the accident on account of a suspected blood alcohol level of 1.1 per thousand;
 - f) childbirth after the 36th week of a pregnancy as well as abortions not medically indicated or deferrable and their consequences;
 - g) treatment or accommodation due to infirmity, the need for care or custody;
 - h) psychoanalytical and psychotherapeutic treatment and hypnosis;
 - i) treatment of injuries suffered as a result of active participation in competitive sporting events and the associated training should the purpose of participation be a source of income of any kind in order to secure a living (e.g. regular income, prize money, benefits from advertising or sponsorship contracts);
 - j) treatment by spouses, lifetime partners, parents or children. Proven expenses-in-kind will be reimbursed according to tariff.
2. AWP may reduce the benefit to an appropriate amount should the curative treatment or any other measure exceed what is medically necessary.

The fees and expenses charged may not exceed what is generally considered to be customary and reasonable in the country concerned. Otherwise, AWP may reduce reimbursement to the rates customary in the country.

§ 5 What must the insured person do under all circumstances in the event of a claim (obligations)?

The insured person is required

1. in the event of inpatient treatment in a hospital, to make contact with the assistance immediately before any extensive in or outpatient diagnostic or therapeutic measures are undertaken and before making any statements regarding payment; AWP will reimburse up to € 25.00 for proven costs incurred in making contact;
2. to consent to be transported or to travel back to the home country if in a fit state to be transported should the assistance approve a return depending on the type of illness and the patient's need for treatment;
3. to submit invoices to AWP, as originals or duplicates with an original stamp of receipt, for benefits granted by another insurer; these will become AWP's property.

Transport Business Travel Accident Insurance and Foreign Business Travel Accident Insurance

(Abbreviated to AVB DUV 14 KI FDD)

§ 1 What is insured? What is an accident?

1. a) Transport Business Travel Accident Insurance: AWP provides insurance benefits from the amount insured should an accident during a business trip within the agreed area of validity whilst using a means of transport or spending the night in a hotel in accordance with the Contractual Data lead to the death or permanent invalidity of the insured person.
b) Foreign Business Travel Accident Insurance: AWP provides insurance benefits from the amount insured should an accident during a business trip in a foreign country and in accordance with the Contractual Data lead to the death or permanent invalidity of the insured person.
2. An accident will have occurred
 - a) should the insured person involuntarily suffer damage to his/ her health as a result of a sudden external event impacting his/ her body;
 - b) should a limb be dislocated or muscles, tendons, ligaments or capsules be pulled or torn as a result of over-exertion.

In the event of frostbite, the benefits referred to under § 5 no. 2 will be granted.

§ 2 Under what circumstances is no insurance cover provided?

The following are not covered by the insurance:

1. accidents caused by mental disturbances or impaired consciousness, strokes, cramp attacks that affect the whole body as well as pathological disturbances as a result of psychic reactions; this also applies should the condition be due to the influence of alcohol or drugs;
2. accidents incurred by the insured person whilst intentionally committing a crime;
3. accidents incurred by the insured person as pilot of an aeroplane (also hobby aircraft) as well as any other member of the crew of an aircraft;
4. damage to health caused by healing measures and other surgical actions on the insured person's body carried out with his consent, radiation, infections and poisoning unless these are due to the accident;
5. internal bleeding and cerebral haemorrhage unless the accident suffered during the trip is the predominant cause;
6. pathological disturbances as a result of psychological reactions, irrespective of how they were caused.

§ 3 What benefits does AWP provide in the event of the insured person's death?

Should the accident lead to the insured person's death within a period of one year, AWP will pay the heirs the sum insured agreed in the Contractual Data.

§ 4 What benefits does AWP provide in the event of the insured person's permanent invalidity?

Should the accident lead to a permanent impairment of the insured person's mental or physical capacity (invalidity) he / she will be entitled to a claim from the amount insured for invalidity in accordance with the Contractual Data.

1. Invalidity must occur within a period of one year at the latest after the accident and also be medically established and claimed within a further period of three months.
2. The amount of compensation is governed by the degree of invalidity. Subject to the exclusion of evidence of greater or lesser invalidity, the following degrees of invalidity apply
 - a) in the event of the loss or incapacity

of an arm	70 %
of a hand	55 %
of a thumb	20 %
of a finger	10 %
of a leg	70 %
of a foot	40 %
of a toe	05 %
of an eye	50 %
of hearing in one ear	30 %
of the sense of smell or taste	10 %
 - b) in the event of the partial loss or an impairment of the functioning of one of these limbs or senses, the appropriate part of the percentage will be determined by a).
 - c) Should limbs or senses be affected by the accident but their loss or incapacity not be dealt with in a) or b), compensation will be governed by the extent to which normal physical capacity is impaired, solely in accordance with medical considerations.
 - d) Should the accident have affected several physical or mental functions, the degrees of invalidity governed by 2 a) to c) will be added together up to maximum compensation of 100 %.
3. Should the accident have affected a physical or mental function that was already permanently impaired beforehand, a deduction equivalent to this previous invalidity will be made.

This will be calculated in accordance with no. 2.
4. There will be no entitlement to invalidity benefit should death occur as a result of the accident within a year.
5. Should the insured person die for reasons unrelated to the accident within a year or more than a year after the accident and should he / she have been entitled to invalidity benefit, compensation will be paid in accordance with the degree of invalidity that would have been anticipated on the basis of the most recent medical finding made.

§ 5 What restrictions are benefits subject to?

1. Should illnesses or handicaps have also played a role in the damage to health caused by the accident or its consequences, compensation will be reduced in accordance with the share accounted for by this illness or infirmity, provided that this share is at least 25 %.
2. Unless anything different has been agreed in the Contractual Data, a maximum of 10 % of the relevant sum insured will be paid in the event of death or invalidity as a result of frostbite, see § 1 no. 2.
3. Should several persons covered by the insurance policies referred to in the Contractual Data have been injured as a result of the insured event and should the total amounts insured exceed the amount referred to in the Contractual Data, AWP's total compensation for all the insured persons collectively will be limited to this amount. The agreed sum insured for each individual person will be reduced in accordance with this relationship.

4. The sums insured referred to in § 3 and § 4 represent the maximum benefits for each cardholder, irrespective of whether the insurance cover is provided by one or more cards referred to in the Contractual Data.
5. The amounts insured in the transport business travel accident insurance and foreign business travel accident insurance represent the maximum benefits for both types of insurance. They are not cumulative in the event of several claims during the same business trip.

§ 6 What must be done after an accident has occurred (obligations)?

The insured person is required

1. to have himself examined by doctors appointed by AWP; AWP will pay the necessary costs of the examination including any loss of earnings incurred as a result;
2. to release the doctor treating the insured person or assessing his / her condition, other insurers and public authorities from the obligation to confidentiality.

§ 7 When does AWP pay insurance benefits on account of permanent invalidity?

1. As soon as AWP has received the documents that must be submitted to prove the cause and the consequences of the accident and on the conclusion of the healing procedures required in order to determine invalidity, it is required to state within three months whether and for what amount it recognises a claim.
2. Should AWP acknowledge the claim, the insurance benefit will be paid within two weeks.
3. Invalidity benefit can be claimed prior to the conclusion of treatment within a year of the accident solely up to the sum insured in the event of death.
4. The insured person and AWP are entitled to have the degree of invalidity re-assessed by a doctor every year for a maximum period of three years subsequent to the accident. This right must be exercised prior to the deadline. Should the final examination establish a higher invalidity benefit than AWP has already provided, the additional amount will earn interest at the rate of 5 % per annum.

Traffic Law Legal Protection Insurance

(Abbreviated to AVB VRS 14 KI FDD)

Note:

The insurer for this type of benefit is Allianz Versicherungs-AG.

1. Conditions governing benefits and scope of benefits

1.1 What is legal protection insurance intended to achieve?

You wish to safeguard your legal interests. We provide the benefits that this requires. The scope of the benefits we provide is described in the following terms and conditions and in the Contractual Data.

1.2 What type of legal protection is provided here?

The details of legal protection in traffic matters are to be found in the following regulations.

1.3 Who and what are insured?

(1) Insurance cover for motor vehicles and trailers

The insurance covers the insured person as owner, the person currently in possession of the vehicle, the lessee, the driver or a passenger in a motor vehicle and trailer.

A motor vehicle here refers to a motorised vehicle for use on land.

(2) Insurance cover for hire cars

The insured person also has cover as the lessee of every self-driven hire vehicle and trailer rented for temporary use.

(3) Insurance cover for other kinds of participation in public road traffic

As a participant in public road traffic, with the exception of legal protection in matters of contract and property law (see section 1.4 paragraph 2) – the insured person is also covered

- a) when driving someone else's vehicle,
- b) when the insured person is a passenger,
- c) as a pedestrian, jogger, skater or
- d) as a cyclist.

1.4 What is the scope of your insurance cover (types of benefit)?

As part of the area insured (section 1.3), your legal protection insurance comprises various benefits described in greater detail below:

(1) Legal protection in compensation claims

You have legal protection in pursuing claims for compensation provided that these are not due to a breach of contract.

(2) Legal protection in contractual and property law

You have legal protection in the field of contractual and property law when exercising your legal interests in matters of private law obligations and in rights to movable goods or to rights. No cover is provided should the case relate to legal protection in compensation claims (paragraph 1). Nor do you have legal protection in matters of contractual and property law as a participant in public road traffic in accordance with section 1.3 paragraph 3.

(3) Legal insurance in social matters

You have legal protection in securing your legal interests

- a) before German social courts as well as
- b) in appeal proceedings in an action relating to section a).

(4) Legal protection under administrative law in traffic matters

You have legal protection in securing your legal interests in matters relating to traffic law before administrative authorities and administrative courts.

(5) Legal protection in disciplinary matters and matters relating to professional conduct

You have legal protection for your defence in disciplinary matters and in matters relating to professional conduct.

(6) Legal protection in penal matters

You have legal protection for your defence when charged with offences against traffic law. Should it be established in law that you have committed the offence deliberately, you will be required to reimburse any costs we have paid in providing defence when charged with deliberately having committed an offence. No insurance cover will be provided in cases where you are accused of having committed a crime.

(7) Legal protection in matters of administrative offences

You have legal protection for your defence when charged with having committed an administrative offence.

(8) Legal protection in tax matters before the courts

You have legal protection in securing your legal interests in matters of taxes and public dues before German financial and administrative courts.

1.5 Under what circumstances are you entitled to insurance cover?

(1) Conditions

You are entitled to insurance cover provided the insured event occurred after insurance cover began and before it ended and the waiting period has expired.

(2) Insured event

- a) Legal protection in compensation claims

In the case of legal protection in compensation claims (see section 1.4 paragraph 1), you are entitled to insurance cover from the time that the incident giving rise to the claim occurred.

- b) [Deleted]

- c) Insurance cover in all other cases

Here you are entitled to insurance cover from the time that you or someone else has committed or is alleged to have committed an offence against legal obligations or provisions of the law.

(3) Relevant point in time in the case of insured events covering a certain period of time

Should an insured event extend over a certain period of time, the insured event occurs at the beginning of this period of time.

(4) Relevant point in time in the event of several insured events

Should several insured events be the reason for your securing your legal interests, the first of these events is relevant. In your favour however, insured events that occurred more than a year prior to the beginning of cover will not be considered.

(5) Waiting time and its implications

The types of benefit referred to in section 1.4 paragraphs 2 to 5 are subject to a waiting period, unless the exercise of legal interests relates to a purchase or leasing contract for a newly manufactured motor vehicle.

The waiting period is three months. This means that insurance cover is only provided if the insured event occurred more than three months after the insurance began.

(6) Preconditions for and scope of your claim to insurance cover against us in the event of a change of insurer

- a) Conditions

Contrary to paragraph 2 c) and section 2.1 b) to d), should you change your insurer you have insurance cover provided the following conditions are met:

- aa) Time of the insured event

The insured event

- occurred during the time that we provided cover (this also applies if the declaration of intent or legal act that initiated the insured event occurred during the term of the contract with the previous insurer) or

- occurred during the term of the contract with the previous insurer but the claim is first lodged later than three years after the end of the previous insurance (the report of the claim to the previous insurer may not have been delayed deliberately or due to gross negligence)

- bb) Insurance cover for this risk with the previous insurer when the insurance was transferred to us without interruption. Moreover, you must have been insured against this risk with your previous insurer and there must have been no interruption on changing to us.

- b) Scope of insurance cover provided

Provided that the pre-conditions a) aa) and bb) are fulfilled, we provide you with the same insurance cover as you had with your previous insurer up to a maximum of the amount in this contract.

1.6 What benefits do we provide on the occurrence of an insured event?

As part of the terms of this contract, we provide and procure services for the exercise of your legal interests and will pay the costs referred to in paragraphs 1 to 3.

(1) Scope of benefits within the Federal Republic of Germany

- a) The lawyer's fee

We assume the following costs:

- The fee of the lawyer to represent your interests. Our benefits are limited to the fee stipulated in law of a lawyer practicing at the location of the responsible court. The fee stipulated in law is governed by the German Law on Lawyers' fees ("RVG").
 - Should you live more than 100 kilometres as the crow flies away from the responsible court and your interests are represented in court, we pay the additional legal fees up to the remuneration stipulated in law of a lawyer who only corresponds in writing with the lawyer at the location of the responsible court (a so-called correspondence lawyer). This only applies in the first instance. We do not pay these additional costs however in cases of legal protection in penal matters and administrative offences nor disciplinary matters and matters relating to professional conduct.
 - Should your legal interest be satisfactorily dealt with by the provision of verbal or written advice or of information (consultancy) or with the preparation of an appraisal, we pay a fee of up to € 500 per insured event provided that the Law on Lawyers' Fees does not stipulate a fee of a particular amount.
- b) Costs of a tax adviser
All the rules that apply to the lawyer also apply to members of the tax consultancy profession involved in legal protection in tax matters.
- c) [Deleted]
- d) Costs of out-of-court mediation proceedings
- aa) Mediation is a voluntary procedure to resolve disputes out of court in which the parties reach a solution to the conflict amongst themselves with the aid of moderation by a neutral third party, the mediator. We will arrange for the services of a qualified mediator to conduct the mediation proceedings in Germany should this be required.
- bb) Legal protection in mediation cases extends to the agreed types of benefit to the extent insured in the legal protection contract.
- cc) In mediation proceedings in which you and the other side have agreed on the mediator, assuming that we are able to consent to the choice of the mediator on the grounds of his qualifications, we will pay the part of the costs of the mediator you are required to pay up to the amount of the fee that would have been incurred had the case been heard by a responsible court in the first instance. Should non-insured persons also be involved in the mediation proceedings, we assume the costs of insured persons in proportion to those of non-insured persons. Should we not consent to the choice of the mediator, we are required to arrange for a mediator acceptable to us with whom you can conclude the mediation contract.

(2) Scope of benefits outside the Federal Republic of Germany

- a) The lawyer's fee
Should an insured event occur in a foreign country, you may choose either a lawyer in that country or a lawyer in Germany. Should you choose a lawyer in a foreign country, we will assume the following costs:
- We pay the fee of a foreign lawyer practicing at the location of the responsible court.
 - Should you live more than 100 kilometres as the crow flies from the responsible foreign court and should a foreign lawyer be acting on your behalf, we assume the additional costs of a lawyer practicing in your regional court district. We will then pay this lawyer up to the fee provided for in law of a lawyer who only corresponds in writing with the lawyer at the location of the responsible court (a so-called correspondence lawyer). This only applies in the first instance.
 - Should your legal interest be satisfactorily dealt with by the provision of verbal or written advice or of information (consultancy) or with the preparation of an appraisal, we pay a fee of up to € 500 per insured event. Should you choose a lawyer in Germany, we pay the following costs:

- We pay his fee as if the litigation was taking place at the location of his legal practice in Germany. This fee is limited to the amount provided for in law.
- Should your legal interest be satisfactorily dealt with by the provision of verbal or written advice or of information (consultancy) or with the preparation of an appraisal, we pay a fee of up to € 500 per insured event provided that the Law on Lawyers' Fees does not stipulate a fee of a particular amount.

Are you involved in an insured event due to a traffic accident in another European country and do you wish to submit claims as a result?

Then the case must first be agreed with the domestic body appointed to manage claims or with the benefits centre. Not until this process has failed to produce a satisfactory solution will we also pay for the costs of litigation in a foreign country. We pay the additional costs of a domestic lawyer for all of his work in dealing with the body appointed to manage claims or with the benefits centre up to the fee stipulated in law of 1.3 (in accordance with no. 2300 in the list of fees in the Law on Lawyers' Fees (RVG)).

- b) Costs of the appraiser in a foreign country
We pay the customary fee of an expert appraiser practicing in the foreign country should you wish to pursue claims due to damage to a vehicle or a trailer incurred in a foreign country.
- c) Travel costs
We pay your costs incurred in travelling to a foreign court should you be required to appear there as the accused or as a party in the case and should you only be able to avoid legal disadvantages by appearing personally. We will pay the costs incurred up to the rates claimed by German lawyers for business trips.
- d) Translation costs
We ensure that documents that are necessary in order to secure your legal interests in a foreign country are translated. We also pay the costs incurred in having the translation carried out.
- e) Costs of an interpreter
We pay the customary costs of an interpreter in connection with providing defence in penal proceedings in a foreign country.
- f) Insured professional groups in addition to lawyers
Should you defend your legal interests in a foreign country, all the rules that apply to lawyers also apply as appropriate to authorised representatives in legal and other professions practicing in the country.

(3) Additional services

- a) Costs of proceedings before an administrative court
We assume the costs of proceedings before administrative authorities. These costs also include
- reimbursement of the expense of witnesses and expert appraisers summoned by the administrative authority and
 - the costs of enforcement through administrative processes.
- b) Costs of expert appraisers
We assume the customary fee of a publicly appointed technical appraiser or technical appraisal organisation having legal capacity (for example: German TÜV or Dekra)
- in providing defence in traffic law cases involving the penal and administrative law and
 - in securing your legal interests with regard to purchase and repair contracts for motor vehicles and trailers.
- c) Court costs
We pay
- the costs of the court including reimbursement of the expense of

witnesses and expert appraisers summoned by the court and

- the costs of the bailiff.

d) Arbitration proceedings

We pay the fees in arbitration proceedings up to the amount of the fees incurred in a referral to a responsible court in the first instance. The costs of mediation proceedings on the other hand are governed solely by paragraph (1) d).

e) Costs of the opponent in litigation

We pay the legal and court fees of your opponent in litigation should a judgement by the court order you to pay these costs of the proceedings.

f) Bail

In order to provide a temporary respite from criminal prosecution measures, we will pay bail on your behalf, if required to do so. The bail is provided in the form of an interest-free loan up to the amount agreed in the Contractual Data.

(4) Foreign currency

Should you have paid the costs in paragraphs (1) to (3) in a foreign currency, we will reimburse you these costs in Euro. We use the exchange rate on the day that you paid the costs as the basis for this calculation.

(5) Pre-condition for the assumption of costs

You may demand that we pay the costs we are required to bear as soon as you have proved that you are required to pay this amount or have already fulfilled this obligation.

(6) Agreed amount insured as a ceiling

In every insurance case, we pay as a maximum the amount insured agreed in the Contractual Data. We combine payments due to several insured events, the timing and cause of which is related.

1.7 What are your rights in the selection and appointment of a lawyer?

(1) Selection of a lawyer

You may choose the lawyer. We will choose the lawyer

- a) should you demand this,
- b) or should you not appoint a lawyer and we believe that the immediate appointment of a lawyer is necessary.

(2) Appointment of a lawyer

We will appoint a lawyer in your name should you not have appointed one. We are not responsible for the lawyer's work.

The following exclusions apply in addition to the exclusions and limitations on benefits in section 1 (conditions governing benefits and their scope):

2. Exclusions of benefits and limitations on benefits

2.1 What exclusions due to timing are there?

No insurance cover is provided

- a) if the insured event occurs during a waiting period (see section 1.5 paragraph 5);
- b) if a declaration of intent given or a legal transaction carried out before the beginning of insurance cover has given rise to the infringement referred to in section 1.5 paragraph 2 c);
- c) should you report an insured event to us and at this time no longer have been insured with us for more than three years.

2.2 Which exclusions apply with regard to the contents?

(1) Exclusion of certain risks

No insurance cover is provided for the defence of legal interests that are causally related to

- a) war, hostile actions, riots, domestic disturbances, a strike, lockout or an earthquake;
- b) nuclear and genetic damage;
- c) [Deleted].

(2) Exclusion of certain legal subjects

No insurance cover is provided in defending legal interests

- a) in order to resist claims for compensation; defence against claims for compensation based on a breach of contract is however not excluded;
- b) - j) [Deleted];
- k) derived from the legal protection insurance contract against us as insurer or claims against management companies acting on our behalf;
- l) - n) [Deleted].

(3) Exclusion in the case of involvement of third parties

No insurance cover is provided for the defence of legal interests

- a) if claims or liabilities are transferred to you or were passed to you after an insured event has already occurred;
- b) if you pursue someone else's claims in your name or if you are to be responsible for someone else's liabilities.

(4) Exclusion of certain procedures

No insurance cover is provided for the defence of legal interests

- a) in proceedings before constitutional courts;
- b) in proceedings before international or supranational courts of law;
- c) that are due to insolvency proceedings that have been or are to be initiated with regard to your assets;
- d) [Deleted];
- e) in proceedings on administrative offences and administrative proceedings related to stopping or parking offences.

2.3 What costs may not be reimbursed?

No insurance cover is provided in the following cases:

- a) Costs that you have assumed without legally being required to do so.
- b) Costs incurred as a result of an amicable settlement that are disproportionate with regard to the result you sought relative to the result you actually achieved. (Example: you are demanding compensation of € 10,000.00. In a settlement with your opponent, you obtain € 8,000.00 (=80 % of the result sought. In this case we assume 20 % of the costs incurred, namely the costs for the part that you were unable to enforce). This relates to the total costs of the dispute. The exclusion will not apply should such a division of costs be stipulated by law.
- c) Costs relating to the undisputed or non-insured part of insured events that are only partially covered by the insurance. The share of non-insured costs in such cases is calculated
 - in disciplinary matters and cases relating to professional conduct and legal protection in matters of criminal law and administrative offences, in accordance with the weight and significance of the individual charges in the overall context (particularly the share of the penalty or fine imposed);
 - in all other cases, in accordance with the relationship of the non-insured part of the amount at issue (within the meaning of the law on fees and costs) to the total amount at issue.
- d) The costs of compulsory enforcement measures that occur due to the fourth or every additional compulsory enforcement measure per executory title.
- e) The costs of compulsory enforcement measures that are initiated later than five years after an executory title has become law.
- f) Costs that some other person would have been required to assume had this legal protection insurance not have existed.

- g) The costs of measures of any kind to enforce a sentence after a financial penalty or fine of less than € 250.00 has come into force.

2.4 What happens if you deliberately induce an insured event?

No insurance cover to secure legal interests is provided in cases in insured events that you have deliberately and illegally induced, unless it relates to an administrative offence. Should such a connection not be established until later, you will be required to repay us the benefits provided.

2.5 When are we entitled to reject legal protection due to the lack of prospects of success or malice (casting vote)?

(1) Cases in which legal protection may be rejected

We may reject legal protection if, in our opinion,

- a) in one of the cases referred to in section 1.4 paragraphs 1 to 5, the exercise of legal interests has insufficient prospects of success or
- b) the exercise of legal interest only serves a malicious purpose. Malice is present when the probable costs incurred bear no relationship whatsoever to the result sought. In this case, we are unable to pay because this would negatively impinge the legitimate interests of the insurance community. We are required to inform you in writing of our refusal immediately and to provide reasons.

(2) Your rights after legal protection has been rejected

Should we refuse to pay compensation in accordance with paragraph (1) and should you not accept this judgement, you may request the lawyer acting on your behalf, or still to be appointed, to prepare a reasoned opinion at our expense as to

- whether there is a reasonable prospect of success and
- whether the enforcement of your legal interest is reasonably proportionate to the success sought.

Unless this decision deviates considerably from the actual factual and legal situation, the decision is binding on both you and us.

(3) Our rights after legal protection has been rejected

We can set you a deadline of at least one month within which you must inform your lawyer fully and truthfully of the facts of the case and provide proof in order that he can submit an opinion in accordance with paragraph (2). Insurance cover will ultimately be forfeited should you fail to comply with these obligations. This is however conditional on our having informed you of the legal consequences resulting from the expiry of the deadline.

2.6 What excess is applicable?

We deduct the agreed excess in accordance with the Contractual Data from the costs we are required to pay.

3. Your particular obligations

3.1 Obligations prior to the occurrence of the insured event

What particular obligations do you have when using a motor vehicle?

The following conditions must be fulfilled if we are to take on an insured event on your behalf:

- the driver must be in possession of the stipulated driving licence at the time the insured event occurs and
- the driver must be entitled to drive the vehicle and
- the vehicle must be registered or have a valid insurance symbol (so-called number plate).

3.2 Obligations after the occurrence of the insured event

3.2.1 What are you required to do if an insured event occurs and you wish to claim insurance cover?

(1) Reporting the insured event

Should such an insured event occur and should you require insurance cover, you must report the insured event without delay, if necessary verbally or by telephone ("without delay" does not necessarily mean "immediately" but "without a culpable delay as soon as possible").

(2) Your obligations to cooperate in pursuing a claim to legal protection

You must

- inform us completely and truthfully of all the circumstances relating to the insured event;
- provide evidence and
- provide us with documents when requested to do so.

(3) Additional obligations to cooperate

- a) Wherever possible and reasonable from your point of view, you must consult with us on measures giving rise to costs that have to be taken (example: appointing a lawyer, initiating legal action or submitting an appeal).
- b) Should an insured event occur, you must wherever possible ensure that damage is either avoided or reduced.

That means that you must keep the costs of litigation (for example: lawyer's fees, court costs and the costs of the other side) as low as possible. You may seek information from us or from your lawyer on this subject. You must comply with our instructions wherever this is reasonable from your point of view. You must also obtain instructions from us should the circumstances permit this.

3.2.2 What must you be aware of when you have appointed a lawyer?

You must do the following after having appointed a lawyer:

- a) With regard to the lawyer
 - aa) you must brief him completely and truthfully;
 - bb) present the evidence to him;
 - cc) provide any possible information and
 - dd) procure necessary documents;
- b) You must keep us informed on the status of the case when requested to do so.

3.2.3 What rules govern the knowledge and conduct of your lawyer?

In fulfilling your obligations, the knowledge and conduct of the lawyer you have appointed derives ultimately from you. This applies should the lawyer take over handling the insured event in relations with us.

3.3 Legal consequences of an infringement of obligations

What are the legal consequences of an infringement of obligations?

The legal consequences of an infringement of the obligations referred to in sections 3.1 and 3.2 are governed by part B section 3. Given the conditions referred to there, we may be wholly or partially exempt from the obligation to provide benefits and also have a right to terminate.

4. Ranking of benefits in the event of several insurance contracts

What is the ranking of benefits should you also be entitled to claim under another insurance policy?

Should you be entitled to claim benefits under an insurance policy with another insurer

following an insured event, this claim has precedence over our obligation to provide benefits (subsidiarity). You are however free as regards the insurer to whom you report the insured event. Should you report the insured event to us, we will make an advance payment of benefits to the extent of our obligations. You must inform us should you be entitled to claims from another insurer. See section 7.2 for further details.

5. Additional rules concerning the implementation of the contract

5.1 Are you permitted to cede the claim under an insurance contract to a third party?

Claims to benefits under a legal protection policy may only be ceded subject to our written approval.

6. Legal consequences of an infringement of obligations

6.1 Negative implications for our obligation to provide benefits

Should you deliberately infringe the obligation, this may entail our entitlement to refuse wholly or partially to provide benefits. In detail, the following applies:

- Should you deliberately infringe the obligation, we are not required to provide benefits.
- Should the obligation have been infringed as a result of gross negligence, we are entitled to reduce our benefits. The deduction is governed by the degree of negligence.
- It can also entail the complete loss of benefits. If you are able to prove that gross negligence was not involved, no deduction will be made.
- Even in cases of deliberate intent and gross negligence, we will be required to provide benefits if you are able to prove that the infringement of the obligation was not the cause of the insured event or for it being established
- was not the cause of the establishment or the extent of our obligation to pay benefits.
- This will not apply if you were guilty of fraud in infringing the obligation.

7. Obligation to provide information should you also be able to claim under a different insurance policy

What information are you required to provide should you also be able to claim under a different insurance policy?

7.1 Your obligation to provide information

You are required to inform us immediately should you be able to claim benefits under an insurance policy with a different insurer following an insured event. This information must provide the name of the insurer and the amount insured. This information will not be required should the other insurance company be part of the Allianz Group.

7.2 Legal consequences of an infringement of the obligation to provide information

The legal consequences of an infringement of this obligation to provide information are governed by section 3. Subject to the conditions referred to in section 3, we may be wholly or partially exempt from our obligations to pay benefits and may also be entitled to terminate the contract.

8. Transfer to us of your claims against a third party

When are your claims to compensation against a third party transferred to us and what obligations do you have to be aware of?

8.1 Transfer of claims to compensation

Should you be entitled to compensation from a third party, this claim will be transferred to us up to the amount that we have paid as compensation. The transfer cannot be asserted to your disadvantage. Should your claim to compensation relate to a person with whom you were living in the same household at the time the damage occurred, we will only be able to recover the claim transferred to us from this person if the person has caused the damage deliberately.

8.2 Your obligations in connection with claims to compensation

You must safeguard a right to compensation or a right to secure this claim subject to the applicable form and deadlines. That means for example that you may not dispose of the claim or a right to secure the claim through cession, waiver, judgement or a settlement. Nor may you prevent the realisation of the claim by simply remaining inactive. After the claim has passed to us, you must also support us in enforcing the claim to the extent required.

8.3 Consequences of infringements of obligations

Contrary to section 3, the following will apply in the event of an infringement of the obligation as described in paragraph 2:

Should you deliberately infringe the obligations referred to, we will not be required to provide compensation to the extent that we are unable to obtain compensation from the third party due to your infringement of obligations. We will be entitled to reduce our benefit should the above obligations have been infringed due to your gross negligence and we are therefore unable to demand compensation from a third party. The reduction will be governed by the degree of your negligence. It can under certain circumstances entail the complete loss of benefits. No deduction will be made if you are able to prove that no gross negligence was committed.

Business Trip Curtailment Insurance

(Abbreviated to AVB RAU 14 KI FDD)

§ 1 What is the object of the insurance?

1. Organisation of the return trip
The assistance will organise the return trip on request should the insured person be able to terminate the trip unexpectedly for a reason covered by the insurance.
2. Reimbursement of costs. AWP will reimburse the following costs incurred up to the amount insured agreed in the Contractual Data:
 - a) in the event of the unscheduled termination of the trip for an insured reason, the proven additional costs of the return trip, given the nature and the quality of the insured trip, provided that the departure and return trips were booked together and are insured;
 - b) the travel costs of a substitute employee (return trip in business class or 1st class by rail or ship) should the insured person on site have to be replaced by a substitute employee for pressing operational reasons. This is conditional on the point of departure of the substitute employee being identical with the point of departure of the insured person.
3. The insured person is required to make contact with the assistance immediately should the trip not be completed as planned. The insured person is required to contribute to providing information and to prove that the continuation of the trip as planned was either impossible or intolerable.

§ 2 Subject to what conditions does AWP provide its benefits?

1. Insurance cover is provided if carrying out the tour as planned is intolerable because the insured person is affected by one of the following events during the time that insurance cover is provided:
 - the death of a person at risk;
 - serious injury in an accident of a person at risk necessitating a stay in hospital of at least 14 days;
 - damage to property caused by fire, explosion, storm, lightning, flooding, earthquake, a burst water pipe, or a deliberate crime by a third party provided that the material damage is considerable and should the insured person's presence be required in order to provide clarification; damage will be deemed considerable provided that the amount exceeds € 2,600.00;
 - an unexpected outbreak of war, domestic disturbances, earthquake, quarantine, epidemics, fire or acts of nature at the place of arrival.
2. Persons at risk are the insured person's close relatives. These are the spouse, parents or parents-in-law, children or children-in-law of the insured person;
3. Insurance cover for the travel costs of the substitute employee in accordance with § 1 no. 2 AVB RAU 14 FDD is also provided should the planned continuation of the trip be intolerable due to the insured person's detention in a foreign hospital for longer than two weeks as a result of an unanticipated serious illness or injury or should his / her repatriation to Germany be necessary for medical reasons and ordered by the doctors. An unexpected serious illness will be present should, from a stable state of wellbeing and ability to travel, definite symptoms of an illness appear making the planned ending or the continuation of the trip impossible and providing grounds for cancellation.

§ 3 What limitations on insurance cover have to be considered?

No insurance cover will be provided

1. for risks referred to in § 5 of the Standard Terms and Conditions of Insurance (AVB AB);
2. for fees, e.g. processing or service fees, that the travel organiser only imposes as a consequence of the cancellation as well as for fees or the loss of rights of use in the case of time-sharing procurement;
3. for events that were anticipated at the time the booking was made;
4. should, according to the circumstances of the case, the illness be a psychological reaction to an act of terror, an aircraft disaster, a natural catastrophe or due as a result of fears of domestic disturbances, hostile events or acts of terror.

§ 4 What is the insured person required to do in the event of a claim (obligations) and what help does AWP offer? What other obligations must the insured person comply with?

The insured person is required

1. to submit the insurance certificate and the booking documents to AWP as well as invoices;
2. to prove additional costs of the return trip by means of original documents.
3. to prove serious injury as a result of an accident or unanticipated serious illness by means of a medical certificate together with information on the diagnosis and treatment dates and proof of psychological illnesses by a certificate from a doctor specialised in psychiatry;
4. to provide evidence of all other insured events by means of the originals of suitable documents (§ 6 AVB AB).

§ 5 What benefits does AWP provide should events that are not insured occur?

In the event of an unplanned return trip due to an emergency not included in the insured events in accordance with AVB RAU, the assistance will provide help in re-booking the return trip.

The insured person must however pay the costs of re-booking and of the return trip.

§ 6 What excess does the insured person have to pay?

The insured person pays the excess agreed in the Contractual Data.

Additional provisions applicable to all forms of insurance

How to make a complaint:

Our aim is to offer first-class benefits. It is also important to us to deal with your concerns. Please let us know directly should you not be satisfied with our products or services. You can send us your complaints on contractual matters or concerning claims by every method of communication. You can reach us by telephone at +49.89.6 24 24-460, by e-mail at service-reise@allianz.com or by post at AWP P&C S.A., Complaints Management, Bahnhofstraße 16, D - 85609 Aschheim (bei München). You will find more detailed information on our complaints procedure under www.allianz-reiseversicherung.de/beschwerde. We do not participate in dispute resolution proceedings before a consumer arbitration board.

You can also address complaints on all types of insurance to the responsible German regulatory agency: Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin), Graurheindorfer Straße 108, D-53117 Bonn (www.bafin.de).

The contractual relationship is subject to German law unless this contradicts international law. The policyholder or persons insured may pursue claims arising from the insurance contract with the court responsible for the insurer's head office or branch office. Should the policyholder or insured person be a natural person, claims may also be pursued before the court in the area in which the policyholder or insured person has his permanent residence or, in the absence of a permanent residence, has his habitual place of abode at the time the complaint is lodged.

General information in the event of a claim

What must be done in the event of a claim?

The insured person is required to keep the damage as low as possible and to provide evidence. Be sure therefore under all circumstances to keep appropriate evidence on how the damage occurred (e.g. confirmation of damage, attest) and on the extent of the damage (e.g. invoices, supporting documents).

How should you behave in the event of illness, injury or other emergencies during the trip (Travel Service Insurance)?

Please contact the assistance immediately in order that everything necessary can be undertaken.

How should you behave in the event of illness, injury or other emergencies during the trip (Foreign Travel Health Insurance)?

In the event of serious injuries or illnesses, particularly before admission to hospital, please contact the assistance immediately in order that adequate treatment can be ensured.

Please submit **original invoices** and/ or **prescriptions** for the reimbursement of out-of-pocket expenses incurred locally.

Important:

The invoices must show the name of the person treated, the nature of the illness, the dates on which treatment took place and the individual medical services provided together with the appropriate costs. Prescriptions must contain information on the pharmaceuticals provided, the prices and the pharmacy's stamp.

What must you be aware of in the event of claims under the Transport Business Travel Accident Insurance and the Foreign Business Travel Accident Insurance?

Please note the names and addresses of witnesses who observed the accident. Make sure you receive a copy of the police report should the police be involved in investigations. Notify AWP and submit these documents and information together with your claim report.

What must you be aware of in making claims under Traffic Law Legal Protection Insurance?

Should you be threatened with a legal dispute or should it be clear that you wish to or must pursue your interests in the courts, please report this immediately and solely to AWP P&C S.A. In emergencies please use the emergency service number of the assistance provided. They will forward you case to the responsible claims department immediately. Please ensure that you comply with the following in making the claim:

- Describe the circumstances and the details of the legal dispute precisely and truthfully.
- Be sure to admit any misconduct on your part.
- Agree your approach with the experts of the Allianz legal protection service.
- Do not miss any deadlines for the submission of legal remedies. You alone are responsible for compliance with these deadlines.

What do you have to be aware of should you be unable to end your business trip as planned (Business Trip Curtailment Insurance)?

Should it be unreasonable or impossible to terminate the trip as planned due to an insured event (see § 2 AVB RAU 14 KI FDD), please submit the following documents in order to be reimbursed the costs in accordance with § 1, no. 2 AVB RAU 14 KI FDD:

- Confirmation of the trip showing the service booked, those taking part and the cost of the trip.
- Proof of the additional costs of the return trip. Proof of the claim, e.g. certificate from a doctor at the place where the claim occurred (showing date of birth, beginning of the illness and of treatment and the medical findings) or confirmation by the police of an accident involving injuries etc.

Data Protection

In accordance with Art. 13 of the General Data Protection Regulation (GDPR), we are informing you about the processing of your personal data by AWP P&C S.A., Niederlassung für Deutschland (Germany Branch), and about your rights under the data protection law.

1. Who is responsible for processing your personal data?

Responsibility for processing your personal data rests with

AWP P&C S.A.
Niederlassung für Deutschland
(Germany Branch)
Bahnhofstrasse 16
D-85609 Aschheim (bei München)

The Data Protection Officer can be contacted by standard mail at the aforementioned address, using the suffix "Data Protection Officer", or by email at datenschutz-azpde@allianz.com.

2. For what purpose is your data processed, and on what legal basis does this take place?

a) What applies to all categories of personal data?

We process your personal data in compliance with the EU General Data Protection Regulation (GDPR), the German Federal Data Protection Act (BDSG), the provisions of the German Insurance Contract Act (VVG) relevant to data protection law, as well as all other applicable laws.

When you submit an application for insurance cover, we will require the information provided by you in this regard, in order to conclude the contract and to estimate the risk assumed by us. If the insurance contract comes into existence, we will process this data for the implementation of the contractual relationship, such as for invoicing purposes. We require information about the damage/loss in order to be able to assess if an insured event has occurred and determine the extent of this damage/loss.

It is not possible to conclude and implement the insurance contract without processing your personal data.

Art. 6 section 1 b) GDPR constitutes the legal basis for the processing of personal data for pre-contractual and contractual purposes.

We will also process your data for the purposes of the legitimate interests pursued by us or by third parties (Art. 6 section 1 f) GDPR). This can particularly be the case:

- for ensuring IT security and IT operation,
- for marketing our own insurance products, and for conducting marketing and opinion polls,
- for the prevention and investigation of criminal activities; in particular we use data analyses for the detection of facts that could indicate insurance fraud.

We also process your personal data in order to fulfil other statutory obligations, such as regulatory stipulations, as well as retention obligations imposed by commercial and tax law regulations. The legal basis of the data processing in this case, is provided by the relevant statutory regulations in conjunction with Art. 6 para. 1 c) GDPR.

If we intend to process your data for any purpose other than those described above, we will notify you in advance within the framework of the statutory regulations.

b) What applies to special categories of personal data, especially health-related data?

There are special safeguards on the processing of special categories of personal data, of which health-related data is one. As a rule, processing is possible only if you have consented, or if one of the legally defined situations exist (Art. 9 section 2 GDPR).

aa) Processing of your special categories of personal data

In many cases, in order to examine the benefit entitlement, we require personal data belonging to a special category. This includes health-related data, for example. If, in connection with a specific insurance claim, you provide us with such data together with a request to examine the case and process the claim, you are explicitly permitting us to process your health-related data as necessary in order to process the insurance claim. We will remind you again separately of this fact by way of the claims form.

The consent may be withdrawn at any time, taking effect for the future. However, please be informed that it may no longer be possible to examine our duty to indemnify as a result of the insured event. If the insurance claim has already been processed, it may be the case that the data cannot be deleted for statutory retention periods, for example.

bb) Requesting health-related data from third parties in order to examine the duty to indemnify

In order to examine our duty to indemnify, it may be necessary for us to check information concerning your state of health, as provided by you in substantiating claims, or which is evident from documents submitted (e.g. invoices, prescriptions, reports) or statements, e.g. from a doctor or other member of a healthcare profession.

For this purpose, we will require your consent, including a confidentiality waiver covering us and all agencies subject to a duty of confidentiality, and which are required to provide information to enable the duty to indemnify to be examined.

We will notify you in each specific case about what persons or institutions require information for what purpose. You may then decide in each case whether you consent to us collecting and using your medical information, and whether to release the named persons or institutions and their employees from their duty of non-disclosure, and if you agree to the communication of your medical data to us, or if you want to personally provide the necessary documentation.

3. To what recipients will we communicate your data?

Recipients of your personal data may include: selected external service providers (e.g. assistance service providers, benefit processors, transport service providers, technical service providers, etc.), other insurers or re-insurers.

In addition, we may also communicate your personal data to other recipients, such as public authorities for the fulfilment of statutory duties of notification (e.g. finance authorities or criminal investigation agencies).

4. For how long will we store your data?

We will store your data for the period during which claims may be made against our company (statutory retention period from 3 to 30 years). We will also store your data if we are under a legal obligation to do so, e.g. according to the provisions of the German Commercial Code, the German Fiscal Code or the German Money Laundering Act. The relevant retention periods amount to 10 full years in these cases.

5. What are your rights?

You have the right to be informed about all of the information stored by us, and to demand that incorrect data be corrected. Under certain conditions, you also have the right to deletion of data, the right to object to processing, the right to restriction of processing and the right to data portability.

Right of objection

You may object to the processing of your data for direct marketing purposes. If we process your data in order to protect legitimate interests, you may object to this processing for reasons pertaining to your particular situation.

If you have any objections concerning the handling of your data, you may contact the aforementioned Data Protection Officer in this regard. You are also entitled to raise objections with a data protection supervisory authority.

Allianz  **Travel**



Olaf Nink, CEO

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D - 85609 Aschheim (bei München)
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Registry court: Munich HRB 4605

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Board of management: Rémi Grenier (chairman),
Dan Assouline, Fabio de Ferrari, Ulf Lange,
Claudius Leibfritz, Lidia Luka-Lognoné,
Mike Nelson, Sylvie Ouziel