

## Product summary information

for travel insurance packages available for a separate premium for bank cards issued by Erste Bank Hungary Zrt.

This summary is a simplified informational document containing the key features of travel insurances available on the basis of the group travel insurance contract linked to bank cards issued by Erste Bank Hungary Zrt., which summary

- (1) does not contain all applicable terms and conditions, and
- (2) does not form part of the contractual terms and conditions pertaining to the insurance.

This summary serves the sole purpose of providing information on the key features of insurance coverage and the manner of reporting damages.

**Please also read the insurance terms and conditions carefully.** In the case of discrepancies between this summary and the travel insurance terms and conditions, the provisions of the latter shall prevail.

### Summary of the travel insurance contract provided by UNION Vienna Insurance Group Biztosító Zrt.

Applicable Insurance Terms and Conditions:	Travel Insurance Terms and Conditions for travel insurance packages available for a separate premium for bank cards issued by Erste Bank Hungary Zrt.
Policyholder:	<b>Erste Bank Hungary Zrt.</b> (registered office: 1138 Budapest, Népfürdő u. 24-26.)
Insurer:	<b>UNION Vienna Insurance Group Biztosító Zrt.</b> (registered office: 1082 Budapest, Baross u. 1; No. of supervisory permit: 05/1991, mailing address: 1461 Budapest, Pf. 131., Customer service tel. no.: (+36 1) 486 4343)
Insured:	<p>Natural person(s) over the age of 18 but under the age of 70, in respect of whose person or assets the insurance relationship is established. Unless otherwise provided for, Insured shall mean the Cardholder Insured as well as Other Insured. <b>Persons in service abroad, or those travelling abroad either for more than 30 days in the case of the Gold Travel Insurance Package or more than 60 days in the case of the Platinum Travel Insurance Package or for the purpose of taking a physical job or carrying out work (whether with a work permit or otherwise), and foreign nationals travelling to the country of their citizenship shall not be considered Insured. The Insured is not entitled to join the Group Insurance Policy as Policyholder.</b></p> <p><b>Cardholder Insured:</b> the exclusively Primary Cardholder natural person who at the time of the making of the declaration of affiliation meets the following criteria:</p> <ul style="list-style-type: none"> <li>– is over 18 and under 70 years of age,</li> <li>– through affiliation with the Group Insurance as Insured, accepts the terms and conditions of the Group Insurance and thereby grants consent that pursuant to the Group Insurance the Insurance Coverage be extended to them and/or Other Insured persons,</li> <li>– in the past has not been an Insured within the Group Insurance established on the basis of the Insurance Terms and Conditions or has at one point been an Insured within the Group Insurance established on the basis of these Insurance Terms and Conditions but this insurance relationship was not terminated due to termination by the Insured (with either termination within or longer than 30 days). Exception to the above is termination on account of the switching of packages by the Insured.</li> <li>– Additional cardholders cannot become Cardholder Insured persons.</li> </ul> <p><b>Other Insured person</b> may be</p> <p>in the case of application by the Cardholder and against a separate insurance premium paid by the Cardholder, a family member of the Cardholder. Pursuant to the Group Insurance Terms and Conditions, family members shall mean the registered partner or spouse of the Cardholder who are over the age of 18 but under the age of 70 and their biological, adopted or foster child(ren). A prerequisite of becoming an Other Insured person is that the above specified family relationship exist at the time of affiliation to the Group Insurance.</p> <p>The condition of the affiliation of an Other Insured person is that in the past, said person has not been an Insured within the Group Insurance established on the basis of these Insurance Terms and Conditions or has at one point been an Insured within the Group Insurance established on the basis of these Insurance Terms and Conditions but this insurance relationship was not terminated due to termination by the Insured (with either termination within or longer than 30 days). Exception to the above is termination on account of the switching of packages by the Insured.</p> <p>During their journey abroad, children under the age of 18 deemed to be Other Insured shall only qualify as Insured and be eligible for the Insurer's benefits if they are accompanied by at least one adult (over the age of 18) and any damages to their assets occur during their journey in the presence of such adult. At the Insurer's request, the Insured must provide solid evidence of the presence of an accompanying adult. Should the Insured fail to do so, the Insurer shall be exempt from the obligation to provide benefits.</p>
Beneficiary:	The person(s) entitled to the benefits specified in the insurance policy. The Insured is entitled to the benefits is said benefits become due during the Insured's lifetime. In the case of the Insured, a beneficiary may be designated through a written declaration made by the Insured (Beneficiary Designation Declaration) addressed and sent to the Bank before the occurrence of the Insured event, and such designation may be revoked or another beneficiary may be specified in the place of the designated beneficiary in the same manner before the occurrence of the Insured event. If no beneficiary is designated, the benefit amounts payable in the event of death shall be due to the Insured's heir/heirs.
Insured incidents:	<p>Immediate medical care provided to the Insured due to their illness or accident abroad.</p> <p>The Insured's death abroad.</p> <p>The death of the Insured's close relative or their entry into a life-threatening condition, forced entry into or a natural disaster affecting the Insured's home.</p> <p>Baggage and clothing carried by the Insured from Hungary being stolen or robbed abroad, as well as damage to or destruction of such baggage and clothing as a result of an accident, road accident or natural disaster involving an injury evidenced by a medical practitioner.</p> <p>Theft, loss or destruction of identity cards, driving licence, bank card and registration certificates accepted when crossing borders.</p> <p>During their outbound journey with an airline or shipping line or their agents, the Insured's receipt of their baggage with a delay after the scheduled time of arrival.</p>

Insured incidents:	Delays of more than 6 hours of the Insured's scheduled flight. Action taken on grounds of a misdemeanour or negligent offence against the Insured in connection with an accident caused by the motor vehicle driven by the Insured. Claims for damages against the Insured arising out of the bodily injury or death of a third party and that results from an accident caused by the Insured.
Insurance benefits:	The Insurer's benefits cover the risks arising abroad as detailed below (in the insurance terms and conditions and the table of benefits): medical services, travel assistance and insurance, accident insurance, baggage insurance, delayed baggage abroad, delayed flights, costs of sending a driver, legal assistance and legal expenses insurance in connection with accidents involving motor vehicles and personal liability insurance.
Travel insurance packages available:	We distinguish the following travel insurance packages available, which differ from one another in terms of range of benefits, sums Insured and limits: – Gold Travel Insurance Package, – Platinum Travel Insurance Package.
Inception date:	In the case of active retail bank card and retail credit card, at 0:00 on the day after application for insurance
Insurance cover:	The period of cover shall commence upon the Insured's departure from Hungary and last until their return. <b>The duration of a single stay abroad shall not exceed 30 consecutive days in the case of the Gold Travel Insurance Package or more than 60 consecutive days in the case of the Platinum Travel Insurance Package.</b> The cover includes all countries in the world except Hungary and, where the Insured is a foreign national, their country or countries of citizenship.
End of the insurance cover:	Insurance coverage is terminated on the following dates: – in the event of termination by the Cardholder within 30 calendar days from application, with retrospective effect to the start of the insurance cover; – in the event of termination by the Cardholder after 30 calendar days from application, on the day of the recording of such termination in the Bank's system; – if the Cardholder failed to pay the insurance premium to the Policyholder within 60 days after such an amount became due, at 24:00 on the 60th day; – in the event of the termination of the bank card and credit card agreement or in the event of the expiration of the bank card, if no new card has been issued, in the month of card expiration, at 24:00 on the last day of the month in respect of all Insured persons; – in case of the cancellation of bank card, in the month of the cancellation, at 24:00 on the last day of the month, respect of all insured persons, – in respect of given Insured, at 24:00 at the end of the year when the Insured becomes 70 years of age; – in respect of Other Insured under the age of 18, at 24:00 at the end of the year when the Insured becomes 18 years of age; – in the event of the death of a given Insured, on the day of the accident; – in the event of the death of the Cardholder, the insurance relationship of all Other Insured persons shall also terminate on the day of the death of the Cardholder; – in the month when the insurance contract between Erste Bank Hungary Zrt. and the Insurer is terminated, at 24:00 on the last day of the month.
Benefit limit:	The upper limits and amounts pertaining to the various benefits is shown in the table of benefits. The various travel insurance packages differ from one another in terms of range of benefits, sums Insured and limits.
Performance deadline:	Where the Insured made use of medical assistance after giving notice to the Insurer or its agent, the foreign institution (person) providing medical services and care will invoice the Insurer or its agent directly. If, following the Insurer's approval, the Insured paid for medical care where it was provided, the Insurer will reimburse the Insured in Hungarian Forints for any legitimate and approved expenses upon the Insured's return to Hungary within 15 business days following receipt of all documents required by the Insurer for claims settlement. The Insurer will reimburse the Insured in Hungarian Forints for any legitimate and verified expenses arising in relation to other incidents occurring abroad within 15 business days following receipt of all documents required by the Insurer for claims settlement.
Limitation period:	<b>2 years from the occurrence of the Insured event.</b>
Exclusions:	<b>General exclusions: the Insurer shall not be obliged to provide any benefits where an incident is caused by any of the following circumstances:</b> – damage caused to third parties by the Insured and for which the Insured is liable, except for the damages specified in Chapter VI of the terms and conditions, – incidents directly or indirectly attributable to radiation that qualifies as ionising under law, or to nuclear energy, – incidents associated directly or indirectly with acts of war, civil war, combat, terrorism, uprising, rioting or public disorder, – liable damage resulting from the medical malpractice of the provider commissioned by the Insurer, – accidents resulting from sporting activities involving a high degree of risk (including but not exclusively): such as car and motor racing, including test tours and rally racing, as well as rock climbing and mountaineering, the navigation of aircraft, hang-gliding, gliding, parachuting, bungee jumping, caving, white water rafting, diving, hunting and other extreme sports, skiing and snowboarding outside of designated slopes. – losses incurred in the course of competitive sports activity or work-out. <b>The Insurer will not pay claims (grievance fees) arising out of the infringement of personality rights in connection with incidents. For medical and accident insurance and assistance, the Insurer does not cover the following expenses:</b> – expenses of care that could already be expected at the start of the cover, – expenses of treatment received as a consequence of a pre-existing health condition at the time of issuing this policy, except for critical lifesaving interventions, – expenses of services not required for diagnosis or treatment, or of care received for purposes other than acute diseases or other than accidental injuries, – expenses exceeding the care charges considered reasonable and standard in the place where the service is used, – additional expenses of hospital treatment or medical care required as a result of a failed repatriation, if such repatriation was possible from a health perspective but failed due to the Insured's decision, – expenses of repatriation required as a result of failed medical care (surgery, hospital treatment) if such care would have been necessary from a health perspective but failed due to the Insured's decision, – expenses incurred as a result of a deliberate failure to comply with medical instructions, – expenses of repatriation without the Insurer's consent,

<p>Exclusions:</p>	<ul style="list-style-type: none"> <li>– expenses of surgery that could be postponed without exceeding a reasonable level of risk,</li> <li>– expenses of hospital accommodation in one- or two-bed wards or to superior standards,</li> <li>– expenses of aftercare and rehabilitation,</li> <li>– expenses of dialysis,</li> <li>– expenses of psychiatric treatment and treatment resulting from diseases of a psychiatric nature,</li> <li>– physiotherapy, acupuncture, naturopathic and chiropractic treatments,</li> <li>– expenses of treatment or care provided by a family member,</li> <li>– medical or hospital care required as a result of being under the influence of alcohol (blood alcohol content above 0.8‰) or narcotics, or for reasons attributable to such influence,</li> <li>– vaccination expenses,</li> <li>– expenses of screening tests and examinations that could be postponed,</li> <li>– expenses of care required for sexually transmitted diseases,</li> <li>– expenses of care required for acquired immune deficiency syndrome (AIDS) or associated diseases,</li> <li>– cost of contact lenses,</li> <li>– expenses of medical treatment, medicine or medicinal products prescribed or administered before the period of cover commenced,</li> <li>– expenses of medical care required as a result of accident occurring in the course of physical work carried out on a professional basis (except for the driving of motor vehicles),</li> <li>– expenses of definitive dental care, mandibular orthopedic treatment, orthodontics, periodontal care, tartar removal, final root canal treatment, prosthetic treatment, crown, bridge,</li> <li>– expenses of plastic and cosmetic surgery,</li> <li>– expenses of interventions to facilitate conception,</li> <li>– expenses of treatment to induce weight loss.</li> </ul> <p>Cover is not available for the expenses of the following carried out without the Insurer's prior consent:</p> <ul style="list-style-type: none"> <li>– patient visits,</li> <li>– early return,</li> <li>– extension of stay,</li> <li>– repatriation of remains.</li> </ul> <p>The following items are not covered by baggage insurance:</p> <ul style="list-style-type: none"> <li>– jewellery, watches, precious metals, objects of art, collections,</li> <li>– cash or non-cash payment instruments (e.g. bank or credit cards (except bank card of Policyholder), service vouchers, ski passes (except Platinum Travel Insurance Package the Insurer reimburse max. up to the limit by baggage insurance item as defined in the table of benefits any portion of the ski pass which remains unused due to a ski accident, accident or disease of the Insured involving hospital treatment), etc.),</li> <li>– savings books, stamps and other securities,</li> <li>– work equipment, musical instruments (except for the Platinum Travel Insurance Package where the musical instrument is covered up to the limit by baggage insurance item as defined in the table of benefits) sports equipment (except for the Platinum Travel Insurance Package where the sports equipment is covered up to the limit by baggage insurance item as defined in the table of benefits),</li> <li>– camcorders, cameras, computers, consumer electronics (e.g. CD players), mobile phones or any other technical appliances including their supplements and accessories, dispatched at the occasion of a flight or stolen from a motor vehicle,</li> <li>– contact lenses, glasses and sunglasses,</li> <li>– replacement of keys.</li> </ul> <p>The following incidents are not covered by baggage insurance:</p> <ul style="list-style-type: none"> <li>– baggage being lost, misplaced, left or dropped, or theft of items left unattended,</li> <li>– items stolen from the passenger compartment of a motor vehicle,</li> <li>– baggage that was locked in the boot of a motor vehicle secured with a hard case lock and was stolen between 10:00 p.m. and 6:00 a.m. (local time),</li> <li>– failure to immediately secure baggage at the accommodations while travelling by motor vehicle,</li> <li>– damage from theft incurred in the course of tenting or camping where tenting or camping takes place outside of officially designated areas,</li> <li>– damage to baggage covered by the carrier's liability insurance or any other insurance.</li> </ul> <p>The following cases shall be excluded from legal assistance:</p> <ul style="list-style-type: none"> <li>– the Insured caused damage with a motor vehicle driven without the permission of its owner or without a driving licence,</li> <li>– the Insured caused damage with a motor vehicle driven under the influence of alcohol with blood alcohol content above 0.8‰, narcotic drugs or psychotropic substances,</li> <li>– proceedings against the Insured are active on grounds of a wilful criminal act, hit-and-run, or failure to provide help,</li> <li>– the incident is covered by the Insured's legal assistance insurance or liability insurance policy issued previously.</li> </ul> <p>The Insurer will cover neither the amount of any fines or penalties imposed on the Insured, nor the expenses incurred from criminal investigation and court proceedings.</p> <p>In respect of personal liability insurance, the Insurer will not pay damages for claims arising out of any of the following either directly or indirectly:</p> <ul style="list-style-type: none"> <li>– material damage (damage to or loss or destruction of assets),</li> <li>– non-material damage,</li> <li>– damage the severity of which exceeds the Insured's statutory liability,</li> <li>– obligations undertaken in a contract or unilateral statement,</li> <li>– damage caused by the Insured by committing a crime,</li> <li>– damage caused by the Insured by pursuing an activity which requires an official licence and which the Insured pursued without such licence,</li> <li>– incidents wilfully caused by the Insured or damage caused by activities of risk to the human environment,</li> <li>– damage caused in connection with the Insured's professional or business activities,</li> <li>– damage resulting from liability for any real property, vessel or aircraft owned, possessed, leased or let by the Insured,</li> <li>– damage resulting from liability for the possession, maintenance, use as well as loading and unloading of motor vehicles and other engine-driven means of road transport, vessels or aircraft,</li> <li>– damage resulting from liability for the transmission of infectious diseases by the Insured,</li> <li>– damage resulting from liability for sexual abuse, physical violence or psychological pressure,</li> <li>– damage resulting from liability for the use, sale, production, distribution, transportation or possession of substances which the relevant authority has classified as narcotics,</li> <li>– claims for damages brought against the Insured by a family member, travelling companion (a person travelling together with the Insured during the coverage period, who was at the scene when the Insured event occurred), or a family member of a travelling companion,</li> </ul>
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Reasons for exemption:	<p>The Insurer will be exempted from the payment of accident insurance benefits in the following cases:</p> <ul style="list-style-type: none"> <li>– the death of the Insured has been caused by the wilful conduct of the beneficiary,</li> <li>– the Insured is proven to have caused the accident in an unlawful, wilful or grossly negligent manner,</li> <li>– the Insured fails to meet its obligations of reporting or mitigating damage, notification or cooperation under these terms and conditions, or fails to do so within the relevant time limit, preventing significant circumstances from being established, except in matters of urgency,</li> <li>– in the event of an accident resulting from the Insured's self-exposure to danger (except in an attempt to save human life), suicide, self-mutilation and attempts thereof (regardless of the Insured's mental health),</li> <li>– any accident occurring in the course of or resulting from a violent uprising, public disturbance, or participation in civil disobedience or civil disorder,</li> <li>– any accident to the Insured while being the perpetrator of or an accomplice in a criminal act,</li> <li>– accidents resulting from sporting activities involving a high degree of risk (including but not exclusively) such as car and motor racing, including test tours and rally racing, as well as rock climbing and mountaineering, the navigation of aircraft, hang-gliding, gliding, parachuting, bungee jumping, caving, white water rafting, diving, hunting and other extreme sports, skiing and snow-boarding outside of designated slopes,</li> <li>– losses incurred in the course of competitive sports activity or work-out.</li> </ul> <p>The accident shall be considered to have been caused by wilful negligence if it occurred</p> <ul style="list-style-type: none"> <li>– while the Insured was under the influence of alcohol (with blood alcohol content above 0.8‰) or narcotics, and was directly attributable to such influence,</li> <li>– while the Insured was driving a motor vehicle without a driving licence or under the influence of alcohol.</li> </ul> <p>The Insurer will be exempted from payment for damage to baggage in the following cases:</p> <ul style="list-style-type: none"> <li>– the damage was caused in an unlawful, wilful or grossly negligent manner by the Insured or a relative residing in the same household with them,</li> <li>– the Insured failed to meet their obligations to prevent and mitigate damage,</li> <li>– the Insured provides false data in connection with the incident,</li> <li>– the Insured fails to meet their obligations of reporting damage and notification, and thus prevents significant circumstances from being established,</li> <li>– the Insured failed to report the damage from a criminal act to the competent police authority or other authority, transportation authority or hotel immediately but at the latest within 24 hours of the damage being detected.</li> </ul> <p>Cover for delayed baggage is not available in the following cases:</p> <ul style="list-style-type: none"> <li>– the Insured's baggage is delayed on their return to Hungary,</li> <li>– the baggage is delayed because of a strike staged by the carrier's employees or other organised action that was already underway or had been officially announced before commencement of the journey,</li> <li>– the baggage is delayed because of a check or inspection carried out by customs or other authorities.</li> </ul> <p>In the event of a delayed flight, the Insurer will not pay damages for claims where</p> <ul style="list-style-type: none"> <li>– a charter flight is used,</li> <li>– within 6 hours, an appropriate means of alternative transport was available or a connecting flight arrived,</li> <li>– the Insured failed to check in on time, except where the Insured was delayed by an unexpected strike,</li> <li>– the delay is caused by a strike or walkout that was already underway or had been announced before commencement of the journey,</li> <li>– the delay is due to an order by a civil aviation authority for the withdrawal of the aircraft from service, on which notification was given before commencement of the journey.</li> </ul> <p>For legal expenses insurance, the Insurer will be exempt from its payment obligation in the following cases:</p> <ul style="list-style-type: none"> <li>– the Insured is proven to have breached its obligation to mitigate damage in an unlawful, wilful or grossly negligent manner,</li> <li>– the Insured fails to meet its obligations of reporting damage and notification, preventing significant circumstances from being established.</li> </ul>
Method of reporting Insured events:	<p><b>Incidents</b> occurring abroad requiring medical assistance or relating to legal assistance must be reported to the Insurer's agent Europ Assistance Magyarország Kft. on its 24/7 Hungarian helpline <b>(+36-1) 458-4465 within 48 hours</b> of the incident occurring.</p> <p>Incidents occurring abroad and requiring subsequent claims settlement will be settled at the Insurer: UNION Vienna Insurance Group Biztosító Zrt. 1134 Budapest, Váci út 33. phone: (+36-1) 486 4343.</p>
Termination of insurance:	The insurance for the Insured may be terminated through a <b>written notice of termination (except in matters of urgency)</b> revoking the declaration of affiliation, addressed to the Policyholder (by post or in person at a bank branch).
Insurance premium:	<p>The Insured shall have an annual premium payment obligation to the Policyholder. The insurance premium is determined on the basis of the Insurer's premium rates, which depends on the travel insurance package selected by the Insured and whether the travel insurance in question applies to the child of the Cardholder Insured under the age of 18.</p> <p>Annual premium of insurance packages:</p> <ul style="list-style-type: none"> <li>– Gold Travel Insurance Package: HUF 4,990/person/year</li> <li>– Platinum Travel Insurance Package: HUF 9,900/person/year</li> </ul> <p>The children of the Cardholder Insured under the age of 18 are entitled to a 50% premium discount in respect of the annual premium provided the children have not reached the age of 18 on the day of application or on the record date of the day of application.</p>
Due date of premium payment:	<p>Following the application of travel insurance, the Bank debits the Cardholder's balance with the annual insurance premium of the Insured person(s) on the following dates:</p> <p>In respect of retail bank cards:</p> <ul style="list-style-type: none"> <li>– if the insurance was applied for before the 15th of the month, the amount of the annual premium is debited – in respect of all Insured – on the 15th of the given month,</li> <li>– if the insurance was applied for after the 15th of the month, the amount of the annual premium is debited – in respect of all Insured – on the 15th of the following month.</li> </ul> <p>In respect of retail bank cards, on the first credit card record date following application.</p>
The Insurer's supervisory authority:	Magyar Nemzeti Bank (National Bank of Hungary), registered office: 1054 Budapest, Szabadság tér 9, mailing address: Magyar Nemzeti Bank, 1850 Budapest, telephone no.: (+36-80) 203-776
Legal remedy:	<p>Reporting Complaints</p> <p>Please report any complaints concerning the Insurer's service to the Insurer:</p> <ol style="list-style-type: none"> <li>in writing: UNION Vienna Insurance Group Biztosító Zrt. 1461 Budapest, Pf. 131.</li> <li>by phone: (+36-1) 486 4343</li> <li>via e-mail: <a href="mailto:ugyfelszolgalat@union.hu">ugyfelszolgalat@union.hu</a></li> <li>in person: customer service of UNION Vienna Insurance Group Biztosító Zrt.: 1134 Budapest, Váci út 33.</li> </ol>

Legal remedy:	<p>Any changes to the above contact information occurring after the issue of the policy will be published by the Insurer on his website.</p> <p>Other forums for the enforcement of rights</p> <p>In the case of disagreement with the response to their complaint submitted to the Insurer, with complaints concerning inquiries into the violation of consumer protection provisions under Act CXXXIX of 2013 on the National Bank of Hungary, the consumer may turn to the National Bank of Hungary (mailing address: National Bank of Hungary, 1534 Budapest BKKP P.O.B. 777; telephone no.: (+36-80) 203-776; online: felugyelet.mnb.hu; email: ugyfelszolgalat@mnb.hu).</p> <p>With complaints concerning the issuance, validity, legal effects and termination of the policy, as well as breaches of contract and their legal effects, contact the Financial Arbitration Board (mailing address: H-1525 Budapest BKKP P.O.B. 172; telephone no.: (+36-80) 203-776; email: ugyfelszolgalat@mnb.hu), or may turn to the court in line with the rules of civil procedure.</p> <p>Claims arising from or in relation to the insurance contract may also be enforced directly through judicial avenues. The resolution of complaints does not substitute litigation.</p>
Confidential insurance information:	<p>The Insurer has the right to process customer data, including special data, legitimately brought to its knowledge in accordance with the provisions of Act CXII of 2011 on the Right of Informational Self-Determination and on Freedom of Information (hereinafter "the Information Act") and Act LXXXVIII of 2014 on the Insurance Business (hereinafter "the Insurance Act").</p> <p>The Insurer may process data relating to the customer's health in connection with the conclusion, recording of the insurance contract and the performance of the insurance benefit, or for other purposes defined by the Insurance Act, only subject to the written consent of the data subject pursuant to Act XLVII of 1997 on the Processing and Protection of Healthcare Data and Associated Personal Data.</p> <p>The non-disclosure obligation of the Insurer shall not apply to the following:</p> <ol style="list-style-type: none"> <li>a) the Supervisory Authority acting in an official capacity,</li> <li>b) after the ordering of the investigation, with the investigating authority and the prosecutor's office,</li> <li>c) courts of law in connection with criminal or civil litigations or non-litigated cases, courts acting during the judicial review of public administration resolutions, experts appointed by the court, and the independent court bailiff acting in a case of judicial enforcement, the major lender acting in the debt settlement proceeding of natural persons, the family insolvency proceeding service, family receivers, courts,</li> <li>d) public notaries and the experts appointed by them in connection with probate cases,</li> <li>e) the tax authority in connection with tax matters where the Insurer is required by law to disclose specific information to the tax authority upon request and/or to disclose data concerning any payment made under an insurance contract that is subject to tax liability,</li> <li>f) the National Security Service when acting in an official capacity,</li> <li>g) the Hungarian Competition Authority acting in an official capacity,</li> <li>h) guardianship authorities acting in an official capacity,</li> <li>i) the health authority referred to in Article 108(2) of Act CLIV of 1997 on Healthcare,</li> <li>j) the agencies authorised to use secret service means and to conduct covert investigations, if the conditions set forth in legislation are met;</li> <li>k) providers of reinsurance and the risk-bearing Insurer in the case of co-insurance,</li> <li>l) the office maintaining central policy records with respect to data transferred pursuant to the Insurance Act,</li> <li>m) the receiving Insurer with respect to insurance policies received under an insurance portfolio transfer according to the provisions of the relevant agreement,</li> <li>n) the body operating the Claims Security Account and the Claims Security Fund, the National Office, the Correspondence Centre, the Information Centre, the Claims Organisation and the claims agent, as well as the claims representative with respect to the information required for the settlement and enforcement of compensation claims and to the transfer of such information between one another, and the party responsible for the claim if, by exercising his/her right to self-determination, he/she requires access to data of repairs of the other vehicle from a claims settlement report taken in connection with a road accident,</li> <li>o) persons performing outsourced activities, in respect of data necessary for performing such outsourced activities, and the auditor in respect of the data required for carrying out his/her tasks,</li> <li>p) third-country insurance companies, insurance intermediaries in respect of their branch offices, if they are able to satisfy the requirements prescribed by Hungarian law in connection with the management of each data item and the country in which the third-country insurance company is established has legal regulations on data protection that conform to the requirements stipulated by Hungarian law,</li> <li>q) the Commissioner for Fundamental Rights when acting in an official capacity,</li> <li>r) the National Authority for Data Protection and Freedom of Information when acting in an official capacity,</li> <li>s) the Insurer with respect to information concerning a customer's individual claims history and no-claim discount classification in the cases as set forth in the ministerial decree on the issuance of claim history certificates, the bonus-malus system (no claims bonus) and the classification of customers therein, upon receipt of a written request from an agency or person referred to in points a)–j), n) and s) indicating the name of the customer or the description of the insurance policy, the type of data requested and the purpose and grounds for requesting data. The bodies or persons referred to in points p)–s) are required to indicate only the type of data requested and the purpose and grounds for requesting it. An indication of the statutory provision granting authorisation for requesting data shall be treated as verification of the purpose and legal grounds.</li> </ol>
Applicable law:	<p>Pursuant to the Group Insurance Terms and Conditions, the provisions of Hungarian law shall apply. The parties may apply to the court with general competence and jurisdiction for the adjudication of legal disputes arising out of the insurance contract and the legal relations between the parties. The language of the proceedings shall be Hungarian.</p>
Miscellaneous:	<p>From 2017, the insurance company will disclose its report on its solvency and financial situation on its website (www.union.hu) in the manner and at the time defined by the legal provisions.</p>