

UNION Vienna Insurance Group Biztosító Zrt (hereinafter: "Insurer"), as controller uses this data processing information document to notify data subjects prior to the start of data processing about the purpose, legal basis, the duration of data processing and the scope of the data processed, the rights of data subjects related to data processing as well as the legal remedies available.

The Insurer accepts the contents of this data processing information document as binding, and undertakes to ensure that all the data processing relating to its activity complies with the requirements set out in this information document and the effective legal regulations, in particular in the provisions of Regulation (EU) 2016/679 of the European Parliament and of the Council on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC ("General Data Protection Regulation" or "GDPR"), and Act LXXXVIII of 2014 on the Business of Insurance (hereinafter: "Insurance Act").

The Insurer is entitled to modify this Data Processing Information Document. The detailed information on the data processing in force at any time is available on the website www.union.hu/adatvedelem.

Data controller: UNION Vienna Insurance Group Biztosító Zrt.

Registered office of the Company: 1082 Budapest, Baross u. 1.

Company registration number: 01-10-041566

Tax No.: 10491984-4-44.

Registered by: Court of Registration of the Metropolitan Court of Budapest

Mailing address: 1380 Budapest, Pf. 1076

Details of the Data Protection Officer of UNION Vienna Insurance Group Biztosító Zrt.:

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I. GENERAL PROVISIONS

Personal data may be stored and processed at the Insurer's registered office, business site, the sites of data processing service providers and reinsurers as well as the sites of partners potentially performing joint processing with the Insurer, within the territory of the European Economic Area.

The Insurer shall establish its personal data processing activities in such a manner that they comply with the data processing principles set out in Article 5 of the General Data Protection Regulation, i.e. they ensure the lawfulness, fairness and transparency, purpose limitation, data minimisation, the accuracy, storage limitation and confidentiality of data processing. The Insurer is liable and may be held accountable for the implementation of these principles.

The Insurer and the insurance intermediary is entitled to process customer data qualifying as confidential insurance information, which relate to the insurance policy, the conclusion, registration thereof and the service. Processing of such data shall take place only to the extent necessary

for the conclusion, amendment and maintenance of the insurance contract and for the evaluation of claims arising from the contract or for any other purpose specified in Act LXXXVIII of 2014 on the Business of Insurance.

Data processing for reasons other than those set out above may only be performed by the Insurer or insurance intermediary subject to the customer's prior consent. The customer shall not suffer any disadvantage or advantage, whether the consent is granted or not.

The Insurer is entitled to process the customer's data concerning health specified in the Health Data Act with the explicit consent of the data subject for the reasons specified in Section 135 (1) of the Insurance Act.

In line with the provisions of the Insurance Act, data relating to deceased persons shall be processed subject to the applicable legal provisions on personal data processing. In respect of data that may be associated with a deceased person, the rights of the deceased person may also be exercised by the heir of the deceased person or the beneficiary named in the insurance contract. Our Company also processes personal data for the purposes pursuant to the legitimate interest stipulated in Article 6 (1) f) of the GDPR. In case of such legal ground, the Insurer completes a balancing of interest test, which examines and compares the legitimate interest related to data processing and the interests and rights of the data subject, and determines whether the interest in data processing takes precedence. Data subjects are entitled to request access to the extract of the legitimate interest tests from the Data Protection Officer at a contact detailed above.

Comprehensive information on exercising the data subject's rights is set out in "*Section III - Rights of Data Subjects, Legal Remedies*", and the specific data subjects' rights typical of certain data processing activities are highlighted.

Definitions

This Information Document otherwise uses the definitions contained in the GDPR.

1. "Personal data" means any information relating to an identified or identifiable natural person ('data subject'); an identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.

2. "Special categories of personal data" Processing of personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person's sex life or sexual orientation shall be prohibited. Personal data relating to the determination of criminal liability and criminal offences also qualify as a special category of personal data.

3. "Personal data breach" means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to,

personal data transmitted, stored or otherwise processed.

4. "Processing" means any operation or set of operations which is performed on personal data or on sets of personal data, whether or not by automated means, such as collection, recording, organisation, structuring, storage, adaptation or alteration, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, restriction, erasure or destruction.

5. "Controller" means the natural or legal person, public authority, agency or other body which, alone or jointly with others, determines the purposes and means of the processing of personal data; where the purposes and means of such processing are determined by Union or Member State law, the Insurer or the specific criteria for its nomination may be provided for by Union or Member State law.

6. "Third party" means a natural or legal person, public authority, agency or body other than the data subject, Insurer, processor and persons who, under the direct authority of the Insurer or processor, are authorised to process personal data.

7. "Consent" of the data subject means any freely given, specific, informed and unambiguous indication of the data subject's wishes by which he or she, by a statement or by a clear affirmative action, signifies agreement to the processing of personal data relating to him or her.

8. "Data concerning health" means personal data related to the physical or mental health of a natural person, including the provision of health care services, which reveal information about his or her health status.

9. "Confidential insurance information" means all data, other than classified information, in the possession of the Insurer and the insurance intermediaries that pertain to the personal circumstances, financial situations and business affairs of their customers or their contracts concluded with the Insurer. Personal data provided by the Insured in any form, including personal data related to health condition, shall be processed by the Insurer, the insurance intermediary and the reinsurer as confidential insurance information. Such data qualify as confidential insurance information for both existing and already terminated insurance policies.

10. "Direct marketing" means the combination of information provision activities and supplementary services performed and provided by means of direct marketing, whose purpose is to send advertising (as defined in Section 3 d) of Act XLVIII of 2008 on Essential Conditions of and Certain Limitations to Business Advertising Activity (hereinafter: Advertising Act)) directly related to the sale of products or services and sales promotions, to consumers and commercial partners (hereinafter jointly: customers).

11. "Client" shall mean the policyholder, the insured person, the beneficiary, the injured party, any other person who makes a contractual offer to the insurance company and who is entitled to receive benefits from the insurance company, furthermore, in the case of independent insurance intermediaries, any person who enters into a contract with an independent insurance intermediary for the purpose of brokering.

12. "Healthcare Data Act" Act XLVII of 1997 on the Processing and Protection of Healthcare Data and Associated Personal Data.

13. "Accounting Act" Act C of 2000 on Accounting.

14. "Anti-Money Laundering Act" Act LIII of 2017 on the Prevention and Combating of Money Laundering and Terrorist Financing.

15. "E-Commerce Act" Act CVIII of 2001 on Certain Issues of Electronic Commerce Services and Information Society-related Services (hereinafter: E-Commerce Act).

16. "Advertising Act" Act XLVIII of 2008 on Essential Conditions of and Certain Limitations to Business Advertising Activity.

17. "Distance Marketing Act" Act XXV of 2005 on the Distance Marketing of Financial Sector Contracts.

18. "Security Services Act" Act CXXXIII of 2005 on Security Services and the Activities of Private Investigators.

19. "Civil Code" Act V of 2013 on the Civil Code.

20. "Restrictive Measures Act": Act LII of 2017 on the Enforcement of Restrictive Measures on Financial Activities and Assets as Ordered by the European Union and the UN Security Council.

21. "MVI": Act LXII of 2009 on Insurance Against Civil Liability in Respect of the Use of Motor Vehicles

22. "Kknytv. Act" Act LXXXIV of 1999 on road transport registration

23. "Nytv. Act": Act LXVI of 1992 on Keeping Records on the Personal Data and Address of citizens.

24. "Eütv": Act CLIV of 1997 on Health

25. "Hpt.": Act CCXXXVII of 2013 on Credit Institutions and Financial Enterprises

26. "Afad tv.": Act XLIII of 2021 on the establishment and operation of reporting background related to the identification task of financial and other service providers

27. "Other sensitive personal data":

Any information on criminal judgments and offenses or related security measures, bank account data, credit card and other financial information.

28. "FATCA act": between the government of Hungary and the government of the United States of America to promote international tax compliance and the promulgation of the agreement on the implementation of the FATCA regulations, and Act XIX. of 2014. on the Amendment of Certain Laws.

29. "AKTV": Act XXXVII. of 2013. on certain rules of international administrative cooperation related to tax and other public burdens.

II. VARIOUS DATA PROCESSING ACTIVITIES

1. Data processing related to insurance policies

Conclusion and maintenance of insurance policies

Purpose of data processing: Conclusion of insurance policies, amendment, register and maintenance of existig insurance policies, and the determination of premiums and receivables related to insurance policies, as well as the enforcement and protection of legal claims and to undertake the obligation of documentation.

Legal grounds for data processing: During the term of the insurance contract the **performance of the insurance policy** and contract, after the termination of the insurance contract during the limitation period of the claims arising from the contract the **legitimate interest of the Insurer**, performance of a **legal obligation** in relation to the obligation of documentation, and in the case of specific professional identification numbers the **consent** of the data subject.

Categories of data processed: name, name at birth, mother's name at birth, telephone number, email address, permanent address other data required for risk assessment

by the insurance company, temporary address, digital citizen identifier (DÁP ID), date of birth, place of birth, policy number, data pertaining to the policy, data relating to premium payment, outstanding premiums, identification data relating to the subject (vehicle, real estate, other assts) of the insurance (additionally specific professional identification numbers such as tax identification number and social security number depends on the type of the insurance contract, in the absence of such data, other alphanumeric identifiers (eg passport number, customer number, etc.), technical features and characteristics, review photos.

Data retention time: The Insurer and insurance intermediary processes confidential insurance information pertaining to the customer during the term of insurance and the agency agreement for said terms and as long as a claim may be enforced in respect of the insurance relationship. Documents created in relation to the conclusion and registration of the insurance policy and in relation to the insurance service are retained by the Insurer for 8 years pursuant to Section 169 of the Accounting Act. In addition, the Insurance Company also fulfils data retention obligations as per Section II.3 of this Notice.

Prior to the submission of an offer by the Client, the Insurer shall keep the electronically recorded data for 60 days from the data recording in case no offer is made by the Client for the purpose of the calculation of premiums, to conclude the contract and to join a group insurance. In such a case, the data processing is necessary to take steps at the request of the data subject prior to the conclusion of the insurance contract, which constitutes the legal basis for the processing.

Personal data related to insurance policies not concluded after an offer made by the Client are processed by the Insurer as long as claims may be enforced in connection with the conclusion of the insurance contract. In this respect, the limitation periods set out in the Civil Code apply to data retention. The legal basis for the data processing is the legitimate interest of the Insurer. The legitimate interest of the Insurer is to enforce legal claims arising from the failure to conclude the contract and to defend the legal claims raised against the Insurer.

The Insurer and insurance intermediary shall delete all personal data relating to its customers, former customers or unrealised policies where the purpose of data processing no longer exists, where the data subject's consent to processing is not available, or where there are no statutory legal grounds for processing.

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and rectification, and may also request a copy and the transmission of the personal data provided by you to the Insurer (data portability). In connection with the data processes performed with the consent of the data subject, you have the right to request erasure of your data.

Processing of health data and specific professional identification numbers related to insurance policies

The Insurer also processes special categories of personal data (health data) as set out in Article 9 of the GDPR, in respect of the conclusion and maintenance of insurance policies and in relation to insurance incidents and losses. These data are processed by the Insurer pursuant to Section 4 (3) of the Healthcare Data Act and the Section

136 of Bit., the Section 136 of Bit, for the conclusion or performance of the insurance contract, with the data **with the data subject's explicit consent**.

The processing of such data is primarily required for health risk assessment purposes prior to the conclusion of certain – life insurance-type – insurance policies (see: *Section II. 2 Data processing prior to the conclusion of the policy, Health risk analysis and assessment*) or for the assessment of service needs/claim for benefits upon the occurrence of an incident (accident, health deterioration, death, use of health insurance service) (see: *Section II.5 Data processing related to claims administration, insured events and claims reporting forms*).

In processing health data, the Insurer pays particular attention to only ask the data subjects to disclose data that are essential to comply with the obligations related to the insurance policy. Health data disclosed by the data subject is treated as highly confidential by the Insurer.

The purpose of processing the social security number or tax identification number, in absence of such data, another alphanumeric identification number, is the verification of the insurance coverage, and also to perform and finance the medical service claim of the data subject, and the identification of the data subject.

Please be informed that if you withdraw or refuse your consent to the processing of your health data, social security number or tax identification number, in absence of such data, another alphanumeric identification number or tax identification number, in absence of such data, another alphanumeric identification number, the Insurer is unable to sell you insurance products or maintain insurance policies, fulfil claims, prior to the conclusion or maintenance or potential claim settlement of which the processing of health data is required with a view to the fact that the conclusion or maintenance of the insurance thus becomes impossible.

Data transfer to reinsurers

Pursuant to the Insurance Act, the reinsurer is entitled to receive and process your confidential insurance information. Therefore in the case of certain insurance product types, the Insurer transfers personal data constituting confidential insurance information to the reinsurer.

What is reinsurance? Reinsurance is a means to safely handle risks assumed by the insurer. A contract concluded by the insurer with another insurer, pursuant to which the reinsurer agrees to assume part of the damage in exchange for a part of the premium collected. It is a method particularly suitable to handle large or multiple (disaster) losses.

Personal data transferred to the reinsurer: name, date of birth, policy number, premium of insurance policy, insured amount, incidents related to the insurance policy, as well as the documents supporting such incidents.

The list of reinsurers involved in data transfer is available at the website <https://union.hu/adatvedelem>.

Data subject's rights related to data processing: in relation to data processing, you have the right and opportunity to request further information regarding the categories of your personal data being transferred and regarding the reinsurance companies to which data are transferred in relation to your insurance policy.

Role of insurance intermediaries in data processing related to insurance policies

Pursuant to the Section 379 of the Insurance Act, the

insurance intermediary is entitled to receive and process your confidential insurance information. In possession of such authorisation, the Insurer also transfers personal data to the insurance intermediary through which you have concluded your insurance policy (or to which insurance intermediary your contract has been transferred to after conclusion) for the purpose of the insurance intermediary performing the tasks related to portfolio maintenance, and to perform the tasks related to financial (commission) settlement between the Insurer and the insurance intermediary, and to provide its customers the information they need to assess their claims under the insurance contract and to the extent necessary in connection with the service.

Tied agents commissioned by the Insurer qualify as data processors for the Insurer, such tied agents are registered in the insurance intermediary registry kept by the National Bank of Hungary.

Multi-agents and brokers intermediating the insurance products qualify as independent controllers.

Categories of personal data transferred to insurance intermediaries: name, identification data, policy number, premium of insurance policy, data relating to premium payment, outstanding premiums, in case of claims related to liability insurance or health data the amount and the date of the payment made under the claims settlement, in case of other claims, categories of personal data specified in Section II.5.

Retention of data by insurance intermediaries: Reinsurers may process personal data and confidential insurance information for a period identical with that for which the Insurer entitled to process personal data, that is during the term of the insurance policy and as long as claims may be exercised in relation to the insurance relationship or until the legal relationship between the insurance intermediary and the Insurer is terminated.

Data subject's rights related to data processing: As a general rule, the Insurer make your personal data available to the insurance intermediary through which you have taken out your insurance (or to which insurance intermediary your contract has been transferred after its conclusion). You are entitled to exercise your right to access and request information or rectification in relation to this data processing activity as well.

Financial risk analysis and assessment

Prior to concluding the insurance policy, the Insurer checks all previous outstanding premiums, if any, of its customers or, in the case of larger amount insurance, the customer's capacity to pay the premium in the future, as well as to identify larger amount payments and claims for benefits during the insurance term that suggest fraud.

Purpose of data processing: To assess the customer's premium payment capacity, to assess claims for benefits and to uncover fraud.

Legal grounds for data processing: the Insurer's legitimate interest. The Insurer has carried out the balancing-of-interest test substantiating its legitimate interests, based on which it can be determined that data subjects' rights and freedoms have not been disproportionately restricted, and that data processing is necessary and proportionate.

Data categories processed: identification data of the natural person, premium payment data of previous policies, data on permanent income.

Data retention time: The data used for financial risk

analysis are retained for a period equal to the retention period of data related to the conclusion and maintenance of the insurance policy (see: Section II.1 Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and request information or rectification as well as to object to the given data processing (right to object).

2. Data processing prior to the conclusion of a policy

Compliance and suitability test for insurance-linked investment products

Pursuant to Section 166/E (1) of the Insurance Act, the Insurer shall obtain the necessary information regarding the customer's or potential customer's knowledge and experience in the investment field relevant to the specific type of insurance product, their financial situation including their ability to bear losses, and their investment objectives and risk tolerance, so as to be able to recommend the insurance-based investment products that are suitable for them. The Insurer complies with this legal obligation with a compliance and suitability test, which assesses the investment knowledge, investment objectives and current financial situation of potential customers, thus personal data are disclosed to the Insurer and the insurance intermediary used.

Pursuant to the provisions of the Insurance Act, insurance-based investment products may only be sold if accompanied with a consultation service, which requires the use of the test results.

Legal grounds for data processing: compliance with the **legal obligation** set out in Section 166/E (1) of the Insurance Act.

Data categories processed: customer's name, mother's name at birth, place of birth, date of birth, data relating to financial knowledge, risk appetite and past investments.

Data retention time: The Insurer is entitled to use the information provided in the test for 60 days following the completion of the test, for the purposes of drawing up a life insurance offer.

If, on the basis of the test results, within the 60 days the Insurer fails to make an offer to the potential customer to conclude an insurance policy, or if no insurance-based investment products can be offered to the potential customer, the Insurer destroys the paper-based test.

If, on the basis of the results of the test, the Insurer makes an offer to the potential customer to conclude an insurance policy and such insurance policy is concluded, the compliance and suitability test is retained as part of such policy.

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and request information or rectification.

Needs assessment

Pursuant to Section 153 (1) of the Insurance Act, before a life insurance policy is concluded, not including net risk life insurance policies that contain no savings elements, which are offered by a financial institution in connection with financial services it provides, or where the sum insured is less than HUF 1 million, the Insurer or the insurance intermediary shall assess customer needs or at least clarify such needs and requirements based on information provided by the customer. In the case of non-life insurance products, the Insurer is obliged to assess the specific needs and requirements of the given customer

in advance according to the section 158/B (1) of the Insurance Act. The data provided as part of the needs assessment is processed by the Insurer as confidential insurance information.

The purpose of data processing: clarification of customer needs, offering a suitable insurance product.

Legal grounds for data processing: compliance with the **legal obligation** set out in Section 153 (1) and in the Section 158 /B (1) of the Insurance Act.

Data categories processed: customer's name, mother's name, place of birth, date of birth, reasons and objectives of concluding the insurance policy, savings and financial goals, data relating to risk appetite, rate and method of premium payment, other data pertaining to the subject matter of the insurance (e.g. property data) and, in the event of a unit-linked life insurance or pension insurance contract, the main parameters of unit-linked life insurance or pension insurance policies that are terminated or linked to additional investment units within six months of the conclusion of the contract, in accordance with Recommendation No. 11/2024 (IX.24.) of the Magyar Nemzeti Bank (MNB).

Data retention time other data pertaining to the subject matter of the insurance (e.g. property data): The Insurer is entitled to use the information provided in the needs assessment for 60 days following the completion of the assessment, for the purposes of drawing up a life insurance offer. If, on the basis of the results of the needs assessment, within the 60 days the Insurer fails to make an offer to the customer to conclude an insurance policy, the Insurer destroys the paper-based test and deletes the electronically recorded needs assessment from its system. If, on the basis of the results of the needs assessment, the Insurer makes an offer to the potential customer to conclude an insurance policy and such insurance policy is concluded, the needs assessment is retained as part of such policy.

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and request information or rectification.

Sustainability questionnaire

In the light of the EU regulations on the sustainability of financial investments that are gradually coming into force, financial service providers, including insurers, must assess and take into account sustainability aspects (environmental E Environmental), social (S Social) and corporate governance (G Governance); together referred to as ESG) in their investments, and must inform their customers about these. For life and pension insurance products combined with investment, the insurer or insurance intermediaries must assess your sustainability preferences as a prospective client by means of a sustainability questionnaire, in order to be able to advise on the ESG aspects of the insurance products based on the analysis of this data. An insurance intermediary or insurer should not offer an insurance-based investment product to a client or prospective client if it does not meet the client's preferences. If the insurance-based investment products do not meet your sustainability preferences, you have the possibility to adjust the information on your sustainability preferences.

The purpose of the processing is to assess the needs of customers and recommend the right insurance product for them, taking into account their sustainability preferences.

Legal grounds for data processing: to fulfil a legal obligation under Commission Delegated Regulation (EU) 2021/1257

Data Categories processed: responses to the questionnaire; sustainability preferences; explanation supporting the adjustment

Data retention time: The Insurer is entitled to use the information provided in the questionnaire for 60 days after its completion in order to prepare the life insurance offer for which it was completed.

If, on the basis of the results of the questionnaire, the prospective customer does not make an offer to conclude an insurance contract within 60 days or if the prospective customer cannot be offered an insurance-based investment on the basis of the questionnaire, the Insurer will destroy the questionnaire.

If, on the basis of the test result, the prospective customer makes an offer to conclude an insurance contract and the insurance contract is concluded, the sustainability questionnaire shall be kept as part of the insurance contract.

Your data subject rights in relation to data processing: you may request information about data processing and exercise your rights of access and rectification.

Strategic financial questionnaire

The Insurer and its designated intermediaries are entitled to assess the financial situation of potential customers through a strategic financial questionnaire for the purpose of drawing up offers related insurance and other products intermediated by the Insurer, to be able to offer such customers the most suitable insurance product.

The purpose of data processing: to facilitate the selection of the insurance product most suited to the customer's needs.

Legal grounds for data processing: the data subject's consent. The insurance policy may also be concluded even if consent is refused. In such cases, the insurance intermediaries in contact with the Insurer offer insurance products suited to your needs without completing the questionnaire.

Data categories processed: customer's name, permanent address and postal address, date of birth, telephone number, email address, data relating to family status, academic qualifications, financial situation and savings, individual goals, data and technical parameters relating to asset to be insured.

Data retention time: The Insurer and the insurance intermediary, for the purpose of achieving the goal of data processing, process the data until the consent is withdrawn. Data subjects may withdraw their consent at any time, without justification, by sending a notice to this effect to the email address adatvedelem@union.hu or by mail to the Insurer's mailing address. In case the insurance contract is concluded according to the questionnaire, the data provided in it, will be stored for the same period as the data related to the conclusion and maintenance of the insurance contract (see in Chapter II.1.)

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and rectification, and may also request a copy of the personal data provided by you to the Insurer (data portability).

You are also entitled to withdraw the consent needed to complete the questionnaire at any time, and request the

erasure of data in the questionnaire (right to erasure), in which case the questionnaire is destroyed by the Insurer and the insurance intermediary.

Health risk analysis and assessment

Prior to the conclusion of life insurance and health insurance-type insurance policies, the Insurer requests information relating to the health condition of its customers, in order to determine a premium proportionate to the assessed risk and to assess the needs related to the use of the service.

The depth of such medical examinations may range from completing the health questionnaire based on the data subject's responses to specialist examinations, depending on the insured amount and insurance product. In processing such health data, the Insurer pays particular attention to only ask data subjects to disclose health data that are absolutely necessary to determine the risk related to the given insurance product and to assess the claim for benefits. The health data disclosed by the data subject or generated on the basis of medical examinations, as well as the diagnoses supporting such examinations, are treated as highly confidential by the Insurer.

Purpose of data processing (1): To assess and evaluate the risks arising from the customer's health condition, and to determine an insurance premium proportionate to such risks. The purpose of processing the social security number or tax identification number, in absence of such data, another alphanumeric identification number, is the verification of the insurance coverage, and also to perform and finance the medical service claim of the data subject, and the identification of the data subject.

Legal grounds for data processing: the **performance of the insurance contract** and the data subject's **explicit consent**, according to Section 136 of the Insurance Act, and the Section 6 (1) b) and 9 (2) a) of the GDPR.

Data categories processed: identification data of a natural person, social security number or tax identification number, in absence of such data, another alphanumeric identification number, responses given to healthcare questionnaire, health data, medical records substantiating health data, medical diagnoses and notes.

Data retention time: In the case of policies concluded, health data are retained for a period equal to the legitimate interest of the Insurer, with the retention period of data related to the conclusion and maintenance of such insurance policy (see: Section II.1 Conclusion and maintenance of insurance policies).

Health data related to unrealised contracts are processed for the purpose of exercising legal claims as long as legal claims may be exercised, on the legal ground of the legitimate interest of the Insurer, with the data subject's explicit consent.

Please be informed that if you withdraw or refuse your consent to the processing of your health data, the Insurer is unable to sell you insurance products or maintain insurance policies, prior to the conclusion or maintenance or potential claim settlement of which the processing of health data is required with a view to the fact that the conclusion or maintenance of the insurance thus becomes impossible.

Purpose of processing (2): The Insurer may process the answers to the health questionnaire previously made available to it, health data, medical reports and findings supporting health data, medical diagnoses and notes for

the purpose of health risk analysis and assessment when concluding a new life insurance or health insurance-type insurance contract, within the period of time allowed for the retention thereof, subject to the explicit consent of the data subject.

Legal basis for processing: the **data subject's explicit consent**.

Scope of data categories processed: natural person identification data, TAJ (social security) number (or tax identification number or, in the absence thereof, other alphanumeric identification data), health questionnaire responses, health data, medical reports and findings supporting health data, medical diagnoses and notes, processed in the context of a previously concluded, currently effective or terminated insurance contract or a previously rejected offer.

Duration of data retention: the health data provided during the previous contract conclusion and the answers to the health questionnaire are retained according to the retention periods for the new insurance contract.

Data subject's rights related to data processing (1), (2): You have the right to request information and to access health data (right of access), rectify and clarify the health data disclosed by you (right to rectification), request a copy, and transmission of the health data pertaining to you and made available by you to the Insurer (right to data portability).

3. Customer identification as per the Anti-Money Laundering Act

For the purpose of complying with the customer due diligence obligation as specified in Section 6 of Act LIII of 2017 on the Prevention and Combating of Money Laundering and Terrorist Financing (hereinafter the Anti-Money Laundering Act), the Insurance Company shall identify its customer (policyholder, beneficiary or person entitled to the benefits provided by the Insurer) or their representative, agent or beneficial owner, in relation to life insurance activities, and carry out and record their classification into a customer risk category. To comply with the obligations set out in the Anti-Money Laundering Act, the Insurance Company makes copies of the documents containing personal data for the purpose of verification of identity, registers the politically exposed person status of the beneficial owner and the customer, records the customer's risk classification level and, if needed, stores the data on the source of financial assets and wealth. The Insurer has access to the beneficial ownership register (detailed is the Anti-Money Laundering Act) in order to fulfill the Insurer's obligation related to customer identification described in Section 7-10 in the Anti-Money Laundering Act and detailed above, and to fulfill the data verification obligation according to the Section 12 (1) and (2) of Anti-Money Laundering Act. According to Section 11 of Afad tv. the Insurer is obliged to provide data about the beneficial owner in case it records different data during the customer identification concerning the actual ownership relations from the data stored in the beneficial ownership register.

Purpose of data processing: Prevention and combating of money laundering and terrorist financing.

Legal grounds for data processing: Performance of **legal obligation** described in the Anti-Money Laundering Act, and in Afad tv.

Data categories processed: Name of natural person, name

at birth, citizenship, place of birth, date of birth, mother's name at birth, address or place of stay, type, number and validity of identification document, copy of identification document, data on politically exposed person status, level of customer risk classification, data on the source of financial assets and wealth, the beneficial owner's first and last name, first and last name at birth, citizenship, date and place of birth, address or place of stay, the nature and extent of the ownership interest.

Data retention time: Pursuant to Section 56(2) of the Anti-Money Laundering Act, the personal data processed during identification and the copies of the documents containing such personal data are retained by the Insurer for 8 years from the termination of the insurance policy or the execution of the transaction order.

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and rectification, and may also request a copy of the personal data provided by you to the Insurer (data portability).

4. General customer identification

When you contact the Insurer with questions or requests related to a policy or for the purpose of enforcing your data subject's rights using any of the means available (by completing the questionnaire on the website, in writing, over the phone or in person through the customer service), or the Insurer makes a call to you (to check your contract, reconcile your details, or to assess customer satisfaction, for example), the Insurer identifies you in order to ensure that it only discloses confidential insurance information to which the identified person is authorised. During the identification process, we ask you for your key personal identification data in order to compare them with the data in our own database (which you have provided previously).

Purpose of data processing: Exercise of rights, fulfillment of obligations and the protection of protection of personal data and confidential insurance information in connection with the insurance contract, as well as ensuring that these data are only accessible to those authorised.

Legal grounds for data processing: **performing the policy.**

Personal data categories processed: name, name at birth, mother's name at birth, date of birth, number of identification document, registered e-mail address, registered phone number, username and password required for identification in case of administration via an electronic interface.

Data subject's rights related to data processing: interface, unique alphanumeric identifier provided by the insurance intermediary or the contracting party of the group insurance.

5. Data processing related to claims administration, insured events and claims reporting forms

Our customers (policyholders, insured persons or beneficiaries, injured parties) can report their claims or demand for service in person, over the phone, via an insurance intermediary, in an electronic way, by email or through the website. The Insurer's website allows customers as well as injured parties and other stakeholders to submit their claims using claims reporting forms in respect of vehicle insurance, CASCO or property insurance. If this platform is used to report a claim for benefits relating to life insurance or travel insurance, the data subject can download the form standardised for personal insurance or travel insurance, print it out on paper and then send it to the Insurer.

Purpose of data processing: To facilitate technical administration and to accelerate the administration of claims, payment of claims, eliminating typographic errors; contact by post or over the phone or in an electronic way facilitating claims administration, using these channels to collect information and data which the Insurer can use to assess the legitimacy of the claim (including the claims for medical, healthcare or other services) and the contractual rate of claims payment and the extent of funding the claims for medical, healthcare or other services.

Legal grounds for data processing: If the person requesting the service is in a contractual relationship with the insurer (policyholder, insured or beneficiary), the legal basis for data processing is the **performance of the insurance policy**. If the data subject affected by data processing is in no contractual relationship with the Insurer (the injured party for liability insurance), the legal basis for data processing is the **legitimate interest** of the controller (Insurer). If claims management or the assessment of the claim for benefits requires the processing of special categories of personal data (health data), in addition to the legal basis set out above, the data processing is carried out with the explicit consent of the data subject in accordance with Article 9 of the GDPR and the provisions of the Bit. Regarding the social security number and the tax identification number, the legal basis is the **consent** of the data subject.

Categories of personal data in case of property insurance: name of the insured, name of the injured party, address, contact person's telephone number, contact person's email address, policy number, date of incident, photographs of the asset, video recording, data recorded during inspection of damage, cause of damage, estimated claim amount, amount of claims payment, bank account number of injured party.

Categories of personal data in case of motor third party liability insurance: registration plate of vehicle responsible for the claim, photographs of the damaged vehicle, data recorded during inspection of damage, registration plate of damaged vehicle, name and address of owner of vehicle responsible for the claim, contact person's telephone number, contact person's email address, cause of damage, estimated claim amount, amount of claims payment, bank account number of injured party, health data, driving license, number and other identifying details of the damaged or damaged motor vehicle.

Categories of personal data in case of CASCO insurance: registration plate of damaged vehicle, natural identification data of the responsible party, photographs of the damaged vehicle, data recorded during inspection of damage, name and address of owner, contact person's telephone number, contact person's email address, amount of claims payment, bank account number of injured party, number and other identifying details of the damaged or damaged motor vehicle.

Categories of personal data processed in case of life and accident-type insurance: name and identification data and contact details of the policyholder, the insured and the beneficiary, type of incident (fact and circumstances of the accident, health deterioration or death), benefit amount, medical diagnoses supporting the incident and the related doctors' notes, bank account number of beneficiary, healthcare documentation, beneficiary's bank account number, other identification information/data

required for the provision of the service other identification information/data required for the provision of the service, tax identification number or social security number, in absence of such data, another unique alphanumeric identification number, the contact telephone number and e-mail address provided by the Client for the purpose of organising care or, in the case of a claim for health service financing after the event.

Categories of personal data in case of health insurance-type insurance: name and identification data of insured/policyholder, tax identification number or social security number, in absence of such data, another unique alphanumeric identification number (eg: passport number, customer number, etc), other identification information/data required for the provision of the insurance benefit, interventions performed within the framework of health insurance and the types of diagnostic procedures, diagnoses of medical examinations supporting the insured event and the related medical documentation, the contact telephone number and e-mail address provided by the Client for the purpose of organising care or, in the case of a claim for health service financing after the event. In the case of health insurances, the Insurer transmits the data of the insured person to the health care provider which is a contracted partner of the Insurer or the care organizer in order to provide the specific and booked health care service undertaken and financed in accordance with the terms and conditions of insurance. The scope of data transmitted for the purpose of performing the booked medical service: name, place and date of birth, mother's name, social security number, e-mail address, telephone number, name of the booked medical care.

Data retention time: The personal data related to incidents and claims administration are retained for a period equal to the retention period of data related to the conclusion and maintenance of the insurance policy (see: Section II.1 Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: You have the right to access your personal data related to claims administration and incidents, and to rectify and clarify the data disclosed by you (right to rectification). You are entitled to exercise such rights regardless of whether you are in a contractual relationship with the Insurer or not.

If the Insurer is processing your data for the purpose of performing the policy or on the basis of your consent, then in addition to the above you are entitled to request a copy and a transmission of your personal data provided by you to the Insurer (right to data portability). If your personal data are processed by the Insurer on the basis of legitimate interests, you have the right to access your personal data (right of access), to rectify and clarify the data disclosed by you (right to rectification) and to object to processing. Such objections are investigated on their merits by the Insurer, which will also provide a written response. In the event of objection, the data processing shall be continued in the event that there is a compelling, legitimate reason for the data processing.

Please be informed that consent to the processing of health data is refused or withdrawn, the Insurer is unable to initiate claims payment for incidents, where the processing of health data is required to assess the claim for benefits.

6. Data Processing relating to the enforcement of legal claims and legal protection

Data processing is necessary by the Insurer for the establishment, exercise or defence of legal claims. Pursuant to Section 6:468 of the Civil Code, the Insurer shall be entitled to lay claim for compensation against the person responsible (including the driver of the injuring vehicle in the case of motor vehicle liability insurance) for the damage up to the amount of settlement it has paid, unless this person is a family member of the injured person living in the same household. The guarantees of the terminated claim shall remain in effect, and shall be transferred to the claim. In case the person responsible is not counted as a customer of the Insurer (eg the driver of the injuring vehicle), the Insurer has a right to recover the full amount of the claim paid in accordance with the rules of civil law.

Purpose of data processing: To enforce claims for compensation or other legal claims and defend the legal claims related to insurance contracts against customers or persons who do not qualify as customers (also by using a data processor)

Legal grounds: According to Article 6 (1) (f) of the GDPR, the Insurer's **legitimate interest**.

Categories of personal data: client's (including the person responsible or the person liable for compensation) name, address, birth name, place and date of birth, mother's name, telephone number, e-mail address, data about the legal claim, evidence supporting the legal basis and the data processed, personal data required for claim enforcement and the legal protection.

Data retention time: until the end of the limitation period of the validation and enforcement of the claim.

7. Customer Service

In the interest of serving customer needs related to insurance policies, the Insurer's customer service processes data in person, over the phone, via email and online as part of its customer service activities.

The Insurer's website allows customers to use the customer service form to submit and report questions, demands and requests, in particular to request payment cheques, certificates of cover, claims history certificates, green card applications, to request information on the current value of the policy (request of balance and principal notification) in case of unit-linked life insurances, and request an insurance policy in case of property insurance. Such data requests and the data supplied on the basis thereof are required in the interest of maintaining the insurance policy. As part of such data and document requests, the Insurer always identifies the person requesting the data in line with the rules set out in Section II.4 (General customer identification) of this information document.

In the interest of complying with the provisions pertaining to confidential insurance information, the Insurer can only and exclusively provide general information in ordinary electronic mail (email that is unencrypted and containing no electronic signature) and is unable to provide information that qualifies as confidential insurance information. Standard emails by the Customer containing or requesting such information are in each case answered by the Insurance Company in an encrypted email sent to the Customer's registered email address available to the Insurance Company or, in the absence of a registered

email address, in a letter sent by mail to the postal address specified by the Customer.

Purpose of data processing: To facilitate technical administration, implement faster customer servicing, and disclosing information related to personal data and insurance policies to eligible data subjects.

Legal grounds for data processing: **honouring the insurance policy.**

Categories of personal data: name, address, telephone number, e-mail address, natural identification data, claim number, contract number.

Data retention time: The data in completed forms and in the answers to the questions therein are retained for a period equal to the retention period of data related to the conclusion and maintenance of the insurance policies (see: Section II.1 Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: You have the right to request information, and the right to access the forms you have previously completed (right of access) and to rectify or clarify the data contained therein at any time (right to rectification), request a copy or the transmission of the personal data pertaining to you, provided by you to the Insurer (right to data portability).

8. Group insurance

The Insurer also sells group insurance, primarily to corporate customers, where the insured persons are typically the employees or clients of such partners. In respect of processing the personal data of such insured persons, the Insurer is a data controller. The contracting party of the group insurance may transit the documents or the sound recordings evidencing the joining of the insured person to the group insurance contract.

In case of group insurance, the provisions of the "Section II.1 Conclusion and maintenance of insurance policies" also apply to group insurance as far as the categories of data subjects' data processed, the duration of the data retention and the data subjects' rights related to data processing are concerned. Please be informed that as the insured of a group insurance, in respect of exercising data subject's rights related to personal data processing, you are entitled to the same rights as our individual customers.

9. Audio recordings

Telephone conversations (outgoing and incoming calls) with the customer service or with data processing partners carrying out outsourced activities for the Insurer, or with partners carrying out distance marketing and selling activities, as well as telephone conversations with the Insurer (outgoing calls) are recorded by the Insurer. Telephone conversations are recorded with the help of CISCO as a data processor for several purposes. We provide information about the purposes and the characteristics of the data processes in the following description. Telephone conversations are recorded for numerous purposes.

Purpose of data processing (1): To comply with and manage customers' policy-related demands, requests, objections, observations and reports, in a manner that is acceptable for the customer and satisfactory for both parties; to receive claims reports and claims for benefits; and, following a telephone conversation, to reconstruct policy-related telephone conversations based on audio recordings related to the policy in case of subsequently lodged complaints and potential legal disputes.

The purpose of outgoing calls initiated by the Insurer is to identify larger amount payments and claims for benefits during the term of the insurance, and the prevention of abuse and fraud.

Legal grounds for the above data processing: the Insurer's **legitimate interest.**

Purpose of data processing (2): Pursuant to the provisions of the Distance Marketing Act, contracts for certain insurance products may also be concluded with the Insurer over the phone. In this case, the conclusion of the contract and its content can only be proved by the sound records, and the performance of the contract is not possible in the absence of the sound records. For this reason the telephone communication is recorded, and also for the purpose of proving compliance with the service provider's obligation regarding the statutory information provided to consumers, as well as for proving the conclusion and performance of the insurance policy and to perform the contract.

Legal grounds for the above data processing: **honouring the insurance policy.**

Purpose of data processing (3): Pursuant to Section 159 (2) of the Insurance Act, the Insurer shall record and retain telephone calls reporting complaints for a period of five years.

Legal grounds for the above data processing: **compliance with the legal obligation** set out in Section 159 (2) of the Insurance Act.

Purpose of data processing (4): It is possible for third parties who are not costumers of the Insurer to make a report, complaint or enquire about the services of the Insurer. Conversations described above which cannot be considered a complaint are recorded by the Insurer in order to control, maintain and increase the appropriate quality of its service, and to increase the accountability of the Insurer. The purpose includes recalling the exact content of the conversation to assess any legal claims related to the conversation, also to investigate the reported case, and to identify the data subject, to verify compliance of the information provided by the Insurer with the legislations, contract terms and the quality requirements. The Insurer can also incorporate the feedbacks into its processes in order to control, maintain and increase the quality of customer service.

Legal grounds for the above data processing: **legitimate interest** of the Insurer.

Purpose of data processing (5):

The Insurer conducts conversations with customers during which outgoing calls are recorded partly to comply with Recommendation No. 10/2024 (IX.24.) of the Magyar Nemzeti Bank (hereinafter: MNB Recommendation), and partly to assess their awareness and knowledge and to prevent fraud (onboarding quality assurance call, welcome call) after the conclusion of insurance contracts. It also records calls made in the course of customer service activities and calls made for the purpose of concluding a contract, and processes these in order to check compliance with the relevant quality requirements.

The purpose of recording calls made on the basis of the MNB Recommendation is to enable the Insurer to subsequently prove that the call took place and also to thus record its content.

Legal grounds for the above data processing: **Insurer's legitimate interest**

Purpose of processing (6): The Insurer conducts telephone conversations with customers during which outgoing calls

are recorded to comply with Recommendation No. 10/2024 (IX.24.) of the Magyar Nemzeti Bank (hereinafter: MNB Recommendation) (exit quality assurance call). The purpose of recording calls made on the basis of the MNB Recommendation is to enable the Insurer to subsequently prove that the call took place and also to thus record its content.

Legal basis for the above processing: **legitimate interest** of the Insurer

Purpose of Data Management (7)

The Insurer provides regular information to customers, especially regarding questions they may have regarding their contracts and their status, as well as in connection with this for the purpose of explaining possible new opportunities (stock maintenance) and, in the event of a request to terminate the contract, to explain the benefits of the contract (customer retention), as well as to encourage customers who are in arrears conducts telephone conversations in order to list the easiest options for the client to settle the fee (intervention), during which outgoing calls are recorded.

The legal basis for the above data management: the legitimate interest of the insurer

Purpose of Data Management (8)

UNION Insurance Company attaches importance to customer satisfaction and seeks the opportunity to get to know its customers' opinions, therefore our data processor – UNISONO Telecommunications Ltd – conducts a customer satisfaction survey on a fixed line. The answers to the customer satisfaction survey provide UNION Insurance Company with feedback on the quality of our work and your satisfaction with it.

Legal basis for processing: voluntary consent pursuant to Article 6(1)(a) of the GDPR

The data subjects are natural persons who have an insurance contract with our company and who respond to the customer satisfaction survey or consent to the processing of data.

Data processed: name of the customer, answers to the individual questions in the surveys

Data storage: the recorded call is stored by our data processing partner for 60 days.

Data retention time: Audio recordings related to telephone conversations are retained by the Insurer from the date of the termination of the related insurance contract for 5 years in the case of Purpose of data processing (1) and (4); for the period specified in relation to data processing for insurance policies in Section II.1 for Purpose of data processing (2), and for 5 years in the case of Purpose of data processing (3), and for 2 years in the case of Purpose of data processing (7). Retention period (5), (6): The Insurer and the insurance intermediary process data concerning the customer that constitute confidential insurance information for the duration of the insurance or agency relationship and for the period during which a claim may be enforced in connection with the insurance relationship. The Insurer retains the documents generated in connection with the conclusion and registration of the insurance contract and with the insurance service for 8 years pursuant to Section 169 of the Accounting Act. The Controller processes data related to unconcluded contracts for the purpose of enforcing and protecting its legal interests under the legal basis of legitimate interest for as long as a legal claim may be enforced in relation to such data.

Data subject's rights related to data processing: If the Insurer is processing your data for the purpose of performing the policy, you are entitled to request a copy of your personal data provided by you to the Insurer. You have the right to listen to the recordings of conversations between you and the Insurer, as well as to request copies thereof (right of access). You are entitled to object/protest to the specified data processing (right to object) at the start of the conversation. In such cases the Insurer cannot provide any information on administration, the registration of orders, the rectification of data or any specific questions you may have concerning the insurance policy over the phone. If, however, you still wish to contact the Insurer for the above reasons, but you object/protest to having an audio recording made, our personal customer service and email availability as well as our sales network are at your disposal, but you may also contact our Company by mail.

10. Data processing in relation to complaints

The personal data received by the Insurer during the handling of complaints are processed for the purpose of complying with the provisions of Section 159 of the Insurance Act on the handling of complaints, and the Insurer also keeps records of customer complaints as well as the measures serving the settlement and resolution of such complaints.

In case of complaints managed over the phone, the telephone communication between the Insurer and the customer will be recorded by the Insurer. Calls are ordered to be recorded by the section of the Insurance Act specified above.

Purpose of data processing: To document and settle complaints related to the Insurer's services, as well as to investigate and respond to such complaints.

Legal grounds for data processing: **performance of the legal obligation** set out in Section 159 of the Insurance Act, 437/2016. (XII.16.) decree of the government decree, 66/2021. (XII.20.) decree of the Hungarian National Bank, 16/2021. (XI.25.) recommendation of the Hungarian National Bank

Categories of personal data processed: name, identification data, subject of the complaint and the personal data provided during the reporting of the complaint, indication and description of the event or fact which is the subject of the complaint, date of submission of the complaint, manner of settlement of the complaint or reason for rejection, date of response.

Data retention time: The recordings are retained by the Insurer for five years. The Insurer retains the complaint lodged as well as the reply given to said complaint for 5 years.

Data subject's rights related to data processing: You have the right to request information, and to access your personal data related to the handling of complaints, and to rectify and clarify the data disclosed by you (right to rectification). You are entitled to exercise such rights regardless of whether you are in a contractual relationship with the Insurer or not.

In the case of complaints lodged in standard, unregistered electronic mail or over the phone, in the interests of complying with the provisions pertaining to confidential insurance information, the Insurer sends its response to the complaint lodged by mail, to the mailing address specified in the complaint or by the customer.

The detailed rules on the handling of complaints are set out in the Insurer's Complaints Handling Policy.

11. Data processing for the purpose of protecting the insured risk pool (data request and data supply)

11.1. Data requests

Purpose of data processing: In discharging the obligations delegated by the law, or complying with its contractual commitments, in order to provide services in compliance with the relevant legislation or as contracted, and to prevent insurance fraud, pursuant to the authorisation granted in Section 149 of the Insurance Act the Insurer is entitled to make a request to another insurer in line with the provisions of Section 135 (1) of the Insurance Act, with respect to data specified in Sections 149 (3)-(6) of the Insurance Act, which are processed by taking into account the unique characteristics of the given insurance product.

The request shall contain the data required for the identification of the person, property and assets, claims or rights specified therein, the type of data requested as well as the specification of the purpose of the data request. Making contact and its fulfilment do not qualify as the breaching of insurance secrets.

In this context, the Insurer

- may request the following data in relation to the performance of accident, sickness and life insurance policies:
 - a) personal identification data of the policyholder, the insured and the beneficiary;
 - b) data on the health condition of the insured at the time of data recording, to the extent they relate to the policy risk;
 - c) data on earlier insured events linked to the policies within the classes defined in this paragraph involving the person defined in paragraph a);
 - d) data required to assess the risk arising from the policy concluded with the contacted insurer, and
 - e) data required to assess the legal grounds of the benefits to be provided based on the policy with the contacted insurer;
- the following data may be requested in respect of the performance of insurance for land vehicles (other than railway rolling stock), railway rolling stock, ships, goods in transit, fire and natural forces, other damage to property, credit, suretyship and guarantee, miscellaneous financial loss, legal expenses and assistance:
 - a) personal identification data of the policyholder, the insured and the beneficiary;
 - b) the data required for the identification of the insured property and assets, claims or rights;
 - c) information concerning previous insured events relating to the property and assets, claims or rights specified in paragraph b);
 - d) data required to assess the risk arising from the policy concluded with the contacted insurer, and
 - e) data required to assess the legal grounds of the benefits to be provided based on the policy with the contacted insurer;
- the following data may be requested in respect of liability arising out of the use of motor vehicles operating on land (including carrier's liability and compulsory motor vehicle liability insurance), liability arising out of the use of aircraft (including carrier's liability), liability arising out of the use of ships, and in respect of the fulfilment of insurance falling into general liability insurance classes:
 - a) the identification data of the injured party subject to the injured party's prior consent;

- b) the identification data of the policyholder, the insured and the beneficiary, as well as the data specified in paragraphs b)-e) of the previous section;
- c) in case of prior consent by the injured party, data on the health condition at the time of the data the person exercising a claim for benefit or a claim for a grievance fee for personal injury or violation of personal rights, relevant to the policy risk, were recorded;
- d) data (not including personal data) on earlier insured events linked to a policy belonging to any of the classes defined in this paragraph and involving the person exercising a claim for benefits on account of a damaged asset;
- e) in case of prior consent by the injured party, data on earlier insured events linked to a policy belonging to any of the classes defined in this paragraph and involving the person exercising a claim for a grievance fee for personal injury or violation of personal rights, relevant to the policy risk;
- the following data may be requested by the Insurer in relation to the performance of policies falling into insurance classes of land vehicles (other than railway rolling stock) and liability arising out of the use of motor vehicles operating on land (including carrier's liability and compulsory motor vehicle liability insurance), based on the vehicle's identification data (registration plate number, chassis number) in the case of damages belonging to the class of liability arising out of the use of motor vehicles operating on land (including carrier's liability and compulsory motor vehicle liability insurance) without prior consent by the injured party:
 - a) information concerning the insurance history related to the vehicle in question, such as in particular the dates when the damage occurred, the legal basis, how the vehicle was damaged and information as to the settlement for covering such losses, including the damages sustained by the motor vehicle indicated by the requesting insurance company, caused by means other than a motor vehicle;
 - b) the findings of the damage assessment performed by the insurer on the vehicle in question, and the amount of damages.

The insurer contacted by the Insurer shall transfer the data to the Insurer in line with the request complying with legal regulations before the date specified in the request, or in the absence of the date, within 15 days from the receipt of the request.

Legal grounds for data processing: the Insurer's legitimate interest, the legal basis for processing personal data under Article 149(5)(a) – (c) – (e) is the prior **consent of the injured party**.

The legal basis for processing personal data under Article 149(5)(a) – (c) – (e) is the prior consent of the injured party. The legal basis for processing personal data under Article 149(5)(a) – (c) – (e) is the prior cons

Data retention time: The Insurer may process the data received as a result of the enquiry for ninety days from receipt. If the data disclosed to the Insurer as a result of the request is required for the enforcement of our Company's legitimate interests, the data processing time above is extended until the completion of the proceedings opened in relation to exercising the claim.

If the data disclosed to the Insurer as a result of the request is required for the enforcement of the Insurer's

legitimate interests, and if in relation to exercising the claim proceedings are not opened within one year from the disclosure of data, the data may be processed for one year from disclosure.

Rights related to data processing: The Insurer notifies the customer concerned about the request made for this purpose and about compliance with such request, as well as the categories of data therein, at least once during the insurance term. If the client requests access to his or her personal data and the requesting insurance company no longer has – in view of the above – the data to which the request pertains, the client shall be informed thereof.

The data received as a result of the request may not be linked by the Insurer with other data not concerning the insured's interest, received or processed by it for purposes other than the above.

The insurer contacted is responsible for the correctness and accuracy of the performance of the data specified in the request.

11.2. Provision of data

If, pursuant to the above provisions of the Insurance Act, another insurer contacts our company with a request for data, the Company shall comply with the request before the time specified above.

Legal grounds for data processing: **compliance with the legal obligation** set out in Section 149 (2) of the Insurance Act.

12. Data processing in accordance to the law of MVI (data reporting obligations, data provision)

The MVI Act defines to the Insurers to operate a system of registration, data processing and data provision and control that enables the fulfillment of the obligation to provide information to the bond and the claims registration body and the exercise of the right to request data.

The bureau of insurance policy records shall keep records of the data and information contained in the insurance policies taken out for motor vehicles listed in the motor vehicle registry, including motor vehicles or registration plate numbers listed in the register of temporary registration number plates, with a view to discharging the functions related to checks on insurance cover, to supplying information required for the enforcement of claims for losses and injury, and for compensation and the data of risk bearing according to MVI Act. (central policy records). In accordance with the MVI Act, Insurer may require statutory data from the central policy record, relate to data according to the date of the data request and before the date of the request for data according to a specified date. With a view to better apportioning the collective burden of those required to participate in the compulsory motor vehicle liability insurance regime and for determining the premium charged for such policies reflecting the risk involved, the insurance companies governed under the MVI Act shall keep accident and claims records for the purpose of managing data related to accidents and claims, for discharging tasks relating to settlements, and for issuing accident and claims certificates (hereinafter referred to as "claims records")

The legislation cited creates the legal basis for questioning and access to data by the Insurer in the course of settlement and contract management.

Purpose of data processing: fulfillment of legal obligations according to MVI Act. (data provision and data request for claims records and central policy records)

Legal grounds for data processing: **fulfillment of legal obligations** according to MVI Act Section 46 (2) and Section 47 (1) and Section 51 (1)

Categories of data processed: the current MVI Act. data necessary for the fulfillment of the legal obligation specified by law (operator, vehicle, contract and data on possible damage events).

Data retention time: The data used for are retained for a period equal to the retention period of data related to the conclusion and maintenance of the insurance policy (see: Section II.1 Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access.

13. Data processing related to the registers managed by the Ministry of Interior (road traffic registers)

The Ministry of the Interior (Deputy State Secretariat responsible for keeping records of the Ministry of the Interior) maintains a road traffic register for the purpose of managing the data needed to protect property, promote road safety and ensure the public credibility of official documents. The Insurer is obliged to provide data to the register about the compulsory motor vehicle liability insurances in accordance with the provisions of 14 (2) (f) of Kknytv. Act LXXXIV of 1999 on road transport registration creates the legal basis for inquiries and access to data by the insurer during the settlement of claims and contract management in the road traffic registers.

Purpose of data processing: tasks relating to contract management (contracting/binding, register, moderation, terminating) as well as tasks related to claims settlement

Legal grounds for data processing: **Compliance with the legal obligation** according to the Kknytv. Act Section 19 (1) (l), Section (2) (e) and (f), Section 21 (a) and Section 20 (1) (b)

Categories of data processed: Personal data specified in the Section 7-13 of Kknytv. Act

Data retention time: The data used for are retained for a period equal to the retention period of data related to the conclusion and maintenance of the insurance policy (see: Section II.1 Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access.

14. Data processing related to the register of home insurances and the credit insurance coverage statement

The Insurer provides data about property insurance (casco, home insurance, other property insurances) related to the financed assets in accordance with the Section 138 (2a) of the Act on the Business of Insurance. The request for data provision contains the identification number of the contract for loan, the start and the maturity of the contract, the amount of the loan, the data of the pledged item, name and identifying data of the contracting parties, in respect of which the Insurer becomes data controller. The Insurer is entitled to process banking secrecy as described above pursuant to Section 164 (d) of Hpt.

In accordance with the authorization provided in Section 138 (2a) of Act on the Business of Insurance in case a financial institution makes a written request to the Insurer, which includes the name of the customer or the

number of the insurance contract, the type of data requested and the purpose of the data request, the Insurer provides the following information to the financial institution. The Insurer provides information about the payment status of the insurance premium, the termination of the insurance contract and its date, the claims and the details of the claim payment related to the contract. The Insurer transfers the personal data of the data subject and the insurance secret related to the insurance contract to the financial institution, no data will be transferred to a third country or an international organization.

Purpose of the data processing: To issue a credit coverage statement (certificate the existence of an insurance contract) about the financed property.

Legal grounds of processing: **Legitimate interest** of the financial institution or other financing organization (pledgee, assignee, co-insured).

Categories of data processed: identification number of the contract for loan, the start and the maturity of the contract, the amount of the loan, the data of the pledged item.

Data retention time: equal to the retention period of data related to the conclusion and maintenance of the insurance policy (see: Section II.1. Conclusion and maintenance of insurance policies).

Data subject's rights related to data processing: in relation to data processing, you are entitled to exercise your right to access and rectification and the right to object.

15. Data processing for direct marketing purposes

The Insurer performs direct marketing activities to its existing customers as well as data subjects whose personal data the Insurer received, free of charge or against consideration, from other service providers based on contracts, for the purpose of performing direct marketing activities. The Insurer performs such direct marketing activity by electronic means (e-DM) or postal newsletters, through its insurance intermediary network as well as by directly calling the relevant persons. To achieve the purpose of data processing, the Insurer may process the data of the data subject to the extent and for the duration required thereto or until the consent is withdrawn. In the event of withdrawal of consent, the personal data provided for the purpose of processing for direct marketing purposes will be processed by the Insurer for as long as the data processing can be claimed. In this respect, the statute of limitations of the Civil Code shall apply to the retention of the data and the legal basis for the processing shall be the legitimate interest of the Insurer.

Purpose of data processing: To provide information on new or existing products or products customised to meet individual customer needs, and to send business advertising and newsletters. In the event of withdrawal of consent, the Insurer will retain the personal data processed until 5 years after the withdrawal. The purpose of this is to enable the Insurer to examine the lawfulness of data processing for direct marketing purposes in the event of a legal dispute or legal claim.

Legal grounds for data processing: **the data subject's consent** on the standardised declaration form. In case of withdrawal, the **legitimate interest** of the Insurer.

Categories of personal data processed: name, address, telephone number, email address, postcode.

Data subject's rights related to data processing: If your data is processed, you have the right of access and

rectification, and may withdraw at any time, without justification, your consent to the processing of your data for direct marketing purposes by completing and sending a declaration on www.union.hu/leiratkozás or by mail to the Insurer's mailing address, in which case the Insurer terminates such data processing. The data subject may object to the processing of personal data processed on the basis of a legitimate interest.

16. Verification of politically exposed person status and screening on sanctions lists

Checking customers in the database of politically exposed persons and on the European Union's, the United Nation's, UK, France and the United States of America's sanction lists by way of a screening system, and the assessment of the findings. In connection with the data process, the Insurer took into account the measures of the Hungarian National Bank related to restrictive measures and sanctions.

Purpose of processing: **compliance with a legal obligation** set out in Section 8 (3); 9 (2) and 9/A and 9/B of the Anti-Money Laundering Act, and Section 3 (1) and (6) of the Restrictive Measures Act (with respect to the EU and UN sanction lists), and **legitimate interest** of the Insurer with respect to the US, France and the UK sanctions.

Scope of data processed: politically exposed person status, specification of relation with political exposed person (degree of relation, scope of interest), criminal records data (the fact of being on the sanctions list)

Duration of data retention: the data generated during screening are retained by the Insurance Company for 8 years from the performance of such screening in line with the legal provisions (Section 56 (2) of Anti-Money Laundering Act, Section 3 (6) of Restrictive Measures Act).

17. FATCA and Aktiv. compliance – tax residence determination

Our Company conducts a tax residency examination as required by the Act and the FATCA Act, in the course of which it processes personal data and statements relating to the tax residency of the person concerned and the proof of tax residency. If the policyholder or the person entitled to receive the services of the insurer is a US or other foreign resident for tax purposes, the insurer will transfer its own and the contract data to the tax authorities for the purpose of automatic exchange of information in accordance with the Act and the FATCA Act. The insurer will classify the contract as a reportable or non-reportable account on the basis of the data and declaration of the contractor or the person entitled to receive the services from the insurer and, after the contract has been concluded, the insurer is entitled to reclassify the account in the cases provided for in the Act or the FATCA Act. The insurer shall continuously monitor the data required for the solvency test and any significant changes in the value of the contracts for the purposes of the Act and the FATCA Act.

Purpose of processing (1): to carry out a tax residence assessment under FATCA Legal basis for processing. The legal obligation is based on the FATCA regulations, including the FATCA Act and the Bit. 148 of the BitFAT Act.

Data subjects: the account holders of the Insurer, in particular the contracting party and the beneficiary, the new contracting party in the event of a modification, the controlling persons in the case of legal persons (natural persons who are the owners of the legal person Scope of data

processed: data necessary for the fulfilment of the legal obligation laid down in the FATCA law in force at the time.

Data retention period: data are retained for the same period as the data relating to the conclusion and maintenance of the insurance contract (see Chapter II.1: Conclusion and maintenance of insurance contracts).

Data subject's rights in relation to data processing: in relation to data processing, you have the right to access your personal data relating to the provision of the data (right of access)

Purpose of data processing (2): the examination of the Account Holder's and Entity's residence in accordance with Annex 1, points II-VII of the Act (residence examination), carried out in relation to the Financial Accounts, to fulfil the obligations set out in the CRS Regulation.

Legal basis for processing. The legal obligation arises from the CRS Regulation, including Act CXC of 2015 on the promulgation of the Multilateral Agreement between Competent Authorities on the Automatic Exchange of Information on Financial Accounts, and the Act on the Protection of the Securities Market.

Affected parties.

Scope of data processed: data necessary for the fulfilment of the legal obligation as defined in the Act in force at the time.

Data retention period: data are stored for the same period as the data relating to the conclusion and maintenance of the insurance contract (see Chapter II.1: Conclusion and maintenance of insurance contracts).

Data subject's rights in relation to data processing: in relation to data processing, you have the right to access your personal data relating to the provision of the data (right of access)

18. Processing related to quality assurance calls

The Insurer conducts onboarding and exit quality assurance calls with customers pursuant to Recommendation No. 10/2024 (IX.24.) of the Magyar Nemzeti Bank (hereinafter: MNB Recommendation).

Onboarding quality assurance calls

Purpose of processing: to comply with the requirements of the supervisory authority (MNB) for onboarding quality assurance calls, to make quality assurance telephone calls in order to ensure that the Insurer can ascertain the customer's understanding of the conclusion of the insurance contract for the insurance-based investment product and their long-term potentially regular obligations, and in this context to ensure that the offer correctly reflects the customer's intentions and, if necessary, to provide the given customer with the appropriate information.

The Insurer keeps a record of onboarding quality assurance calls, which includes the name of the policyholder, the name of the intermediary, the name of the product, the duration of the contract, the frequency and amount of the premium, the date of the offer, the date of the call, whether the call was successful, the result of the call and the reason for the customer being selected for the call.

Pursuant to Section 12 of the MNB Recommendation, the Insurer and the independent insurance intermediary may agree in writing that the Insurer directly fulfils the obligations related to onboarding quality assurance calls. The Insurer provides the intermediary involved in the conclusion of the contract with information on the quality

assurance calls made on behalf of the intermediary at least once a month, including the offer number, the name of the policyholder, the date and the result of the call. If, in the opinion of the Insurer, the content of the answers given by the customer during the onboarding quality assurance call clearly does not correspond to one or more contractual conditions that are relevant for the conclusion of the contract, it also indicates this fact to the intermediary involved in the conclusion of the contract.

If the onboarding quality assurance call is carried out by the independent insurance intermediary themselves and the intermediary is of the opinion that the content of the answers given by the customer during the onboarding quality assurance call clearly does not correspond to one or more contractual conditions that are relevant for the conclusion of the contract, it indicates this fact to the Insurer. At the request of the Insurer, the intermediary shares with the Insurer evidence certifying the making of the quality assurance call and the relevant circumstances of the case.

In order to prevent multiple calls to the customer, the Insurer verifies that the independent insurance intermediary has not yet made the quality assurance call for contracts sold by the intermediary and selected in the sample. If the Insurer selects a sample of contracts sold by the independent insurance intermediary for which the intermediary has already made a quality assurance call, the Insurer obtains the information necessary for the quality assurance assessment of the call from the independent insurance intermediary.

Legal basis for processing: **compliance with a legal obligation**

Scope of data processed: name of the policyholder, name of the intermediary, name of the product, duration of the contract, frequency and amount of the premium, date of the offer, the date of the call, whether the call was successful, the result of the call and the reason for the customer being selected for the call.

Retention period: The Insurer and the insurance intermediary process data concerning the customer that constitute confidential insurance information for the duration of the insurance or agency relationship and for the period during which a claim may be enforced in connection with the insurance relationship. The Insurer retains the documents generated in connection with the conclusion and registration of the insurance contract and with the insurance service for 8 years pursuant to Section 169 of the Accounting Act.

The Controller processes data related to unconcluded contracts for the purpose of enforcing and protecting its legal interests under the legal basis of legitimate interest for as long as a legal claim may be enforced in relation to such data.

Exit quality assurance calls

The purpose of the call is for the Insurer to ascertain that the customer has made a request for surrender, waiver or suspension of the premiums of the contract, based on true and correct information and without any influence from the insurance broker, and that the customer is aware of all the costs and other adverse consequences of surrender, waiver or suspension of the premiums.

In line with the MNB Recommendation, the Insurer keeps a record of exit quality assurance calls, which includes the name of the policyholder, the name of the intermediary, the name of the product, the duration of the contract, the

frequency and amount of the premium, the date of the offer, the date of the call, whether the call was successful, the result of the call and the reason for the customer being selected for the call.

Legal basis for processing: **compliance with a legal obligation**

Scope of data processed: name of the customer, mother's name, place of birth, date of birth, reason for the termination/premium waiver/premium suspension of insurance, original purpose of the insurance, circumstances of the termination/premium waiver/premium suspension of insurance.

Retention period: The Insurer and the insurance intermediary process data concerning the customer that constitute confidential insurance information for the duration of the insurance or agency relationship and for the period during which a claim may be enforced in connection with the insurance relationship. The Insurer retains the documents generated in connection with the conclusion and registration of the insurance contract and with the insurance service for 8 years pursuant to Section 169 of the Accounting Act.

Data subject rights in relation to processing under this Section: you may request information about processing and exercise your rights of access and rectification.

19. Processing of data of the authorised representative

According to legal provisions, only the policyholder or the insured of the insurance contract, the injured party or the beneficiary of the insurance benefit is entitled to have direct administration with the Insurer. If, however, any person wishes to entrust the administration to another person (an authorised representative), the personal data of the person granting such authorisation and the personal data of the authorised representative are processed by the Insurer. In the case of a private deed of full probative force, the data of the witnesses present are also recorded on the form.

Purpose of processing: The purpose of processing is to allow third parties to proceed with the Insurer in addition to the person entitled to have direct administration, on the basis of a written authorisation of such person. The purpose of processing is also to ensure that the Insurer identifies the given natural person on the basis of the data listed above and that it records the fact of authorisation and the authorised representative status. In addition, the written authorisations recorded may be used to protect the interests of the Insurer in any subsequent legal proceedings. As such, the Controller continues to process the authorisations under the relevant insurance contract even after the possible fulfilment of the purpose set out above.

Legal basis for processing: The legal basis for processing is the **performance of the insurance contract**, which legal basis is set out in Article 6(1)(b) of Regulation (EU) 2016/679 of the European Parliament and of the Council (General Data Protection Regulation).

Scope of data processed: name, place of birth, date of birth, mother's name, address, signature, email address, in the case of witnesses, the names, permanent address and signatures of the witnesses.

Duration of processing: In view of the fact that processing is directly related to the insurance contract or a claim in relation to which the authorised representative has proceeded, personal data is retained for this purpose as long as the insurance contract is retained in the underlying case.

Data subject rights related to processing: you may at any time request information about the processing, exercise your right of access and rectification, and request a copy or transmission of the personal data concerning you that you have provided to the Insurer (data portability).

20. Other cases of data processing

In you participate in various prize competitions, draws or promotions, special information relating to the processing of personal data is provided in the competition/promotion rules.

Detailed information concerning the processing of data provided by applicants to jobs is defined in the data processing information document related to job applications, available on the website.

Detailed information on the www.union.hu website, the applications and electronic forms available on the site and on the use of cookies is available in the information document pertaining to the website and the cookies used, as published on the website.

In relation to the data processing of the property insurance of a deceased policyholder or insured heirs, the present data processing information document is directed to the provision of information to the heirs after the the quality of the heir has been certified (for example: certificate of inheritance).

Up to the date of gaining knowledge of the conclusion of probate proceedings by final decision, insurance companies shall be entitled:

- a) to disclose data in connection with the property insurance of a deceased policyholder, solely in the interest of keeping the relevant insurance contract alive by the payment of premium on the existence of the insurance contract, the number of the insurance policy, standard contract terms and conditions, premium balance, the amount of any premium owed, the anniversary of the contract to the close relative of the deceased policyholder or the holder of the asset,
- b) to disclose information for a credit life insurance contract and in connection with any insurance contract where a credit institution is shown as the beneficiary and the deceased person is shown as the insured party, solely for reporting claims to the insurance company and for supplying the insurance company with information necessary for settlement on the existence of the insurance contract, the number of the insurance policy, and the standard contract terms and conditions to the close relative of the deceased policyholder,

upon written request, subject to documentary proof of the applicant's such capacity.

Said disclosure of information – detailed above – to the close relative and/or the asset holder shall not be construed as violation of insurance secrets. Insurance companies shall be allowed to process the applicant's personal data for a period of five years after the time of disclosure, or for as long as a claim may be made in connection with the insurance, reinsurance or retrocession relationship.

III. DATA SUBJECTS' RIGHTS, LEGAL REMEDIES

Data subjects may at any time request information regarding the processing of their personal data, and they may exercise the following rights against the Insurer:

Right of access

At the request of the data subject, the Insurer shall provide confirmation as to whether or not personal data concerning the data subject are being processed, and, where that is the case, the data subject is entitled to access the personal data and the following information:

- the purposes of data processing;
- the categories of personal data;
- the recipients or categories of recipient to whom the personal data have been or will be disclosed, in particular recipients in third countries or international organisations;
- where possible, the envisaged period for which the personal data will be stored, or, if not possible, the criteria used to determine that period;
- the existence of the right to request from the Insurer rectification or erasure of personal data or restriction of processing of personal data concerning the data subject or to object to such processing;
- the right to lodge a complaint with a supervisory authority;
- where the personal data are not collected from the data subject, any available information as to their source;
- the existence of automated decision-making, including profiling, and, at least in those cases, comprehensible information about the logic applied, as well as the significance and the envisaged consequences of such processing for the data subject.

Where personal data are transferred to a third country or to an international organisation, you shall have the right to be informed of the appropriate safeguards pursuant to Article 46 of the GDPR relating to the transfer.

At the data subjects' request, the Insurer shall provide them with a copy of the personal data undergoing processing. For any further copies requested, the Insurer may charge a reasonable fee based on administrative costs. Where the data subject submits the request electronically, and unless otherwise requested by the data subject, the information shall be provided by the Insurer in a commonly used electronic form.

The right to obtain a copy referred to in the previous section shall not adversely affect the rights and freedoms of others.

Right to rectification

The data subject shall have the right to obtain from the Insurer without undue delay the rectification of inaccurate personal data concerning him or her. Taking into account the purposes of the processing, the data subject shall have the right to have incomplete personal data completed, including by means of providing a supplementary statement.

Right to erasure ('right to be forgotten')

The data subject shall have the right to obtain from the Insurer the erasure of personal data concerning him or her without undue delay and the Insurer shall have the obligation to erase personal data without undue delay where one of the following grounds applies: a) the personal data are no longer necessary in relation to the purposes for

which they were collected or otherwise processed; b) the data subject withdraws the consent to processing, and there is no other legal ground for the processing; c) the data subject objects to the processing based on legitimate interest, and there are no overriding legitimate grounds for the processing, or, the data subject objects to the processing with regard to processing conducted for the purpose of direct marketing; d) the personal data have been unlawfully processed; e) the personal data have to be erased for compliance with a legal obligation in Union or Member State law to which the Insurer is subject; (f) the personal data have been collected in relation to the offer of information society services directly offered to children. The above provisions are not applicable in cases, among others, where data processing is necessary:

- for compliance with a legal obligation which requires processing by Union or Member State law to which the Insurer is subject or for the performance of a task carried out in the public interest or in the exercise of official authority vested in the Insurer;
- for the establishment, exercise or defence of legal claims.

Given the above, in certain cases the Insurer may not erase the data subject's data despite their request to this end. Pursuant to the provisions of the Insurance Act, the Insurer shall be entitled to process personal data relating to any unrealised insurance policies as long as any claim can be asserted in connection with the failure of the contract (unless otherwise stipulated in applicable legal regulations, the general limitation period as per the Civil Code shall prevail).

The Insurer does erase customer data even after the termination of the insurance policy, given its data retention obligation set out in legal regulations (Anti-Money Laundering Act, Accounting Act). Upon the expiry of this obligation, the data are erased.

Right to restriction of processing

The data subject shall have the right to request from the Insurer the restriction of data processing where one of the following apply: a) the accuracy of the personal data is contested by the data subject, in this case the restriction applies for a period enabling the Insurer to verify the accuracy of the personal data;

b) the processing is unlawful and the data subject opposes the erasure of the personal data and requests the restriction of their use instead; c) the Insurer no longer needs the personal data for the purposes of the processing, but they are required by the data subject for the establishment, exercise or defence of legal claims; or d) the data subject has objected to processing; in this case, the restriction shall apply until it is determined whether the legitimate grounds of the Insurer override the legitimate interests of the data subject.

Where processing has been restricted on the basis of the data subject's request, such personal data shall, with the exception of storage, only be processed with the data subject's consent or for the establishment, exercise or defence of legal claims or for the protection of the rights of another natural or legal person or for reasons of important public interest in the European Union or a Member State.

A data subject who has obtained restriction of processing on the basis of the above shall be informed by the Insurer in advance of the lifting of the restriction on processing.

Notification obligation regarding rectification or erasure of personal data or restriction of processing

The Insurer shall communicate the rectification or erasure of personal data or restriction of processing to each recipient to whom the personal data have been disclosed, unless this proves impossible or involves disproportionate effort. The Insurer shall inform the data subject about such recipients at the request of the data subject.

Right to data portability

The data subject shall have the right to receive the personal data concerning him or her, which he or she has provided to the Insurer, in a structured, commonly used and machine-readable format and have the right to transmit those data to another controller without hindrance from the Insurer to which the personal data have been provided, where: a) the processing is based on the data subject's consent or the performance of a contract, b) the processing is carried out by automated means.

The aforementioned right shall not adversely affect the rights and freedoms of others.

Right to object

The data subject shall have the right to object at any time, on grounds relating to his or her particular situation to the processing of personal data concerning him or her, including profiling based on the above mentioned grounds. In such case, the Insurer shall no longer process the personal data unless the Insurer demonstrates compelling legitimate grounds for the processing that override the interests, rights and freedoms of the data subject, or which are related to the establishment, exercising or defence of legal claims.

Procedural rules:

Information shall be provided in writing or by other means, including, where appropriate, by electronic means. When requested by the data subject, the information may be provided orally, provided that the identity of the data subject is proven by other means. Please contact the Insurer's data protection officer with any questions, observations or complaints related to data processing.

The controller facilitates the exercise of data subject rights. If the data subject is appropriately identified, the Insurer fulfils the requests pertaining to the exercise of data subject rights.

The Insurer shall, within one month of receiving the request, inform the data subject of the measures taken as a result of their request relating to data subject rights. If needed, taking the complexity and number of requests into consideration, such date may be extended by two months. The Insurer informs the data subject about the extension of the due date within one month from the receipt of the request, but indicating the reasons for the delay. Where the data subject makes the request by electronic means, the information shall be provided in electronic form unless requested otherwise by the data subject. If the Insurer does not take action on the request of the data subject, the Insurer shall inform the data subject without delay, but at the latest within one month of receiving the request of the reasons for not taking action and on the possibility of lodging a complaint with a supervisory authority and seeking a judicial remedy.

Information on the circumstances of data processing, the exercise of data subject rights and information and

measures relating to personal data breaches are provided by the Insurer free of charge. Where requests from the data subject are manifestly unfounded or excessive, in particular because of their repetitive character, the Insurer may either charge a reasonable fee taking into account the administrative costs of providing the information or communication or taking the action requested; or refuse to act on the request.

The Insurer shall bear the burden of demonstrating the manifestly unfounded or excessive character of the request. Where the Insurer has reasonable doubts concerning the identity of the natural person making the request to exercise data subject rights, the Insurer may request the provision of additional information necessary to confirm the identity of the data subject.

Right to turn to the court:

Any person who has suffered material or non-material damage as a result of an infringement of the GDPR shall have the right to receive compensation from the Insurer (or processor). The court shall proceed in the action as a matter of urgency. The hearing of the case falls within the jurisdiction of the regional court. Legal proceedings may be opened before the regional court competent according to either the data subject's residence or place of stay, as selected by the data subject.

Official data protection proceedings:

The data subject may submit their complaints to the Hungarian National Authority for Data Protection and Freedom of Information (1055 Budapest, Falk Miksa utca 9-11., mailing address: 1363 Budapest, Pf.: 9, telephone: +36 (1) 391-1400, fax: +36 (1) 391-1410, email: ugyfelszolgalat@naih.hu, website: www.naih.hu).

IV. PROVISIONS PERTAINING TO THE SAFEGUARDING OF CONFIDENTIAL INSURANCE INFORMATION

With regard to confidential insurance information, unless otherwise provided for by law, the owners of the Insurer and insurance intermediary, its managers, employees and all other persons that have access to such information in their activities relating to the Insurer, are bound by confidentiality for an indefinite period of time.

Confidential insurance information may only be disclosed to third parties if

- a) the Insurer's or insurance intermediary's customer has given their prior express written consent, and such consent precisely specifies the confidential insurance information that may be disclosed, or
- b) pursuant to the Insurance Act, there is no obligation of confidentiality.
- c) a) if the certification body, including its subcontractor, hired by an insurance or reinsurance company, received such confidential information in carrying out the certification process.
- d) the interests of the insurer make it necessary for the sale or enforcement of his claim against the policyholder.

V. SECURITY OF DATA

The Insurer treats the personal data of all natural persons in line with effective legal provisions, who in view of the above provided personal data to the Insurer, and the Insurer ensures the security of such data and also implements the appropriate technical and organisational

measures that are needed to enforce the applicable legal provisions, in particular the compliance of the data security requirements set out in Article 32 of the GDPR, and the financial supervision requirements of the Hungarian National Bank.

In processing and handling personal data disclosed to it, the Insurer fully complies with the data security provisions of the GDPR, and processes all personal data provided to it online with the same level of protection as it does data made available to it by other means. The Insurer protects the personal data disclosed to it with appropriate measures, in particular against unauthorised access, change, transfer, publication, deletion or destruction and against accidental destruction or damage or unavailability resulting from a change in the applied technology.

VI. PERSONAL DATA BREACHES

The Insurer hereby informs you that even with the most up-to-date technical and organisational measures applied by it, it still cannot be guaranteed that no personal data breaches occur in relation to your personal data and confidential insurance information.

The Insurer notifies you of all personal data breaches, provided it is required to inform data subjects under the statutory provisions via postal letter or if the circumstances justify it, through notice posted on the website www.union.hu and/or in a letter. If you become aware of a personal data breach concerning your own data or the data of any other person as processed by the Insurer, please communicate this information without undue delay using the adatvedelem@union.hu email address.

VII. PERSONS ELIGIBLE TO HAVE ACCESS TO DATA

Personal data and data qualifying as confidential insurance information may be disclosed to the Insurer's employees with access rights related to the relevant data processing purpose, its designated insurance intermediaries, as well as persons and organisations providing data processing or outsourced services to our Company under service contracts, within the scope determined by our Company to the extent required for their activities.

Furthermore, data classified as confidential insurance information may also be disclosed to persons or organisations to whom the Insurer's obligation to keep confidential insurance information does not apply pursuant to Chapter X of the Insurance Act, the list of such organisations is included in Appendix 1 of this information document.

For the purpose of data processing, the Insurer employs data processors as well as service providers performing outsourced activity within the framework of service agreements concluded to this end. The list of data processors and reinsurers is available on the website <https://union.hu/adatvedelem>.

The content of the data processing information document may change subject to statutory amendments or partner contracts concluded or to be concluded by the Insurer. The latest version of the data processing information document is available on the website <https://union.hu/adatvedelem>.

UNION Vienna Insurance Group Biztosító Zrt.

Appendix 1:

List of organisations eligible to access confidential insurance information as set out by the Insurance Act

Pursuant to Section 138(1) of the Insurance Act, confidentiality concerning confidential insurance information shall not apply to:

- a) the Supervisory Authority acting in an official capacity,
- b) the body conducting preliminary proceedings, the investigating authority and the public prosecutor's office, as well as the police, acting in their capacity as law enforcement authorities, and the National Tax and Customs Administration
- c) the court of law in connection with criminal cases, civil actions and non-litigious cases, including the experts appointed by the court, and the independent court bailiff, the administrator acting in bankruptcy proceedings, the temporary administrator, extraordinary administrator, liquidator acting in liquidation proceedings in connection with a case of judicial enforcement, the principal creditor in debt consolidation procedures of natural persons, the Family Bankruptcy Protection Service, the family administrator, the court
- d) public notaries and the experts appointed by them in connection with probate cases,
- e) the tax authority in the cases referred to in Subsection (2);
- f) the National Security Service when acting in an official capacity,
- g) the Hungarian Competition Authority acting in an official capacity,
- h) guardianship authorities acting in an official capacity,
- i) the public health authority in the case referred to in Section 108(2) of Act CLIV of 1997 on Health Care,
- j) bodies authorized to conduct covert information gathering operations if the conditions prescribed in specific other act are provided for;
- k) providers of reinsurance, other members of the group and providers of co-insurance, where applicable,
- l) the bureau of insurance policy records maintaining the central policy records with respect to data transferred as governed by law, the claims records agency keeping accident and claims records, the traffic control authority in connection with road transport administrative actions relating to vehicles which are not listed in the motor vehicle registry, and the body operating the register of motor vehicles;
- m) the receiving insurer with respect to insurance policies received under an insurance portfolio transfer, according to the provisions of the relevant agreement,
- 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,
- 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 their tasks,

p) third-country insurers and insurance intermediaries in respect of their branch offices, if they are able to satisfy the requirements prescribed by Hungarian law in connection with the processing of each data item and the country in which the third-country insurer is established has legal regulations on data protection that conform to the requirements stipulated by Hungarian law,

q) the Commissioner for Fundamental Rights when acting in an official capacity,

r) the National Authority for Data Protection and Freedom of Information when acting in an official capacity,

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,

t) in the case of insured persons included in agricultural insurance contracts concluded for standing crops, with the agricultural damage assessment body, the agricultural administration body, the agricultural damage mitigation body, and the institution dealing with economic analyzes under the control of the ministry headed by the minister responsible for agricultural policy;

u) the authority registering liquidation organisations,

v) MABISZ in connection with gathering data provided through the e-claim platform provided for in the MVI with respect to operating the e-claim reporting application, for collecting information relevant to the insured event and forwarding such information to the insurance companies for the purpose of settlement,

upon receipt of a written request from a body or person referred to in Subsections a)-j), n), s), t) and u) indicating the name of the customer or the specification of the insurance policy, the type of data requested and the purpose of and the grounds for requesting data, with the proviso that the bodies or persons referred to in Subsections 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.

(2) Pursuant to Subsection (1) e), confidentiality concerning confidential insurance information shall not apply to tax matters with respect to which the Insurer is bound by disclosure obligation in respect of data defined by legislation, or is bound by a statutory data reporting obligation in respect of taxable payments under the insurance policy.

(2a) The obligation of confidentiality concerning confidential insurance information shall not apply to financial institutions listed in the Credit Institutions Act in connection with insurance contracts linked to claims arising out of financial services, if the financial institution makes a written request to the insurance company indicating the name of the client or the description of the insurance policy, the type of data requested and the purpose for requesting them.

(3) Data transfer by the insurer to the tax authority for the purposes of complying with the obligation stipulated in Sections 43/B-43/C of Act XXXVII of 2013 on Certain Rules of International Public Administration Cooperation Related to Taxes and Other Public Duties (hereinafter: "International Tax Cooperation Act") based on Act XIX of

2014 on Announcing the Agreement between the Government of Hungary and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA and the amendments of certain related laws (hereinafter: "FATCA Act") shall not qualify as a breach of confidential insurance information.

(3a) It shall not be construed a violation of confidential insurance information if the Insurer supplied data to the tax authority to comply with the obligation set out in Section 43/H of the International Tax Cooperation Act or Sections 43/B and 43/C of the International Tax Cooperation Act pursuant to the FATCA Act.

(4) The Insurer and the reinsurer may transfer the personal data of customers in the cases and to organisations specified in Subsections (1) and (6) and Sections 137, 140 and 141.

(5) The confidentiality requirement shall apply to the employees of the agencies specified in Subsection (1) beyond the framework of their official capacity.

(6) Insurance and reinsurance companies shall be required to supply information forthwith where so requested in writing by the the body conducting preliminary proceedings, the investigating authority, the public prosecutor's office and the court, including data requests, if there is any suspicion that an insurance transaction is associated with:

a) misuse of narcotic drugs, illegal possession of new psychoactive substances, acts of terrorism, criminal misuse of explosives or blasting agents, criminal misuse of firearms and ammunition, money laundering, or any felony offense committed in criminal conspiracy or within the framework of a criminal organization under Act IV of 1978 in force until 30 June 2013,

b) unlawful drug trafficking, possession of narcotic drugs, inciting substance abuse, aiding in the manufacture or production of narcotic drugs, illegal possession of new psychoactive substances, acts of terrorism, failure to report a terrorist act, terrorist financing, criminal misuse of explosives or blasting agents, criminal misuse of firearms and ammunition, money laundering, or any felony offense committed in criminal conspiracy or within the framework of a criminal organization under the Criminal Code.

(6a) In the case of a data request defined in Section 69 (3) and (4) of Act XXXIV of 1994 on the Police, Section 58 (3) of Act CXXII of 2010 on the National Tax and Customs Administration, or Section 262 (3)(5) of Act XC of 2017 on Criminal Procedure (hereinafter: Be.), the insurer or reinsurer is obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, even without the prosecutor's authorization. In the case of a data request pursuant to Section 262/A of the Be., the insurer or reinsurer is also obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, without the prosecutor's specific authorization related to the client or the insurance contract.

(6a) In the case of a data request defined in Section 69 (3) and (4) of Act XXXIV of 1994 on the Police, Section 58 (3) of Act CXXII of 2010 on the National Tax and Customs Administration, or Section 262 (3)(5) of Act XC of 2017 on Criminal Procedure (hereinafter: Be.), the insurer or reinsurer is obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, even without the prosecutor's authorization. In the case of a

data request pursuant to Section 262/A of the Be., the insurer or reinsurer is also obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, without the prosecutor's specific authorization related to the client or the insurance contract.(6a) In the case of a data request defined in Section 69 (3) and (4) of Act XXXIV of 1994 on the Police, Section 58 (3) of Act CXXII of 2010 on the National Tax and Customs Administration, or Section 262 (3)(5) of Act XC of 2017 on Criminal Procedure (hereinafter: Be.), the insurer or reinsurer is obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, even without the prosecutor's authorization. In the case of a data request pursuant to Section 262/A of the Be., the insurer or reinsurer is also obliged to fulfill the data request concerning the data it manages, which qualifies as insurance secrets, without the prosecutor's specific authorization related to the client or the insurance contract.

(7) The obligation to safeguard confidential insurance information does not apply in cases where the insurer or reinsurer fulfils its reporting obligation set forth in the act on the implementation of financial and asset restriction measures ordered by the European Union and the UN Security Council.

(8) The disclosure of the group assessment report to the leader of the financial group during the supervisory audit proceedings, in the case of group supervision, shall not constitute breach of confidentiality concerning confidential insurance information and trade secrets.

(9) Data transfer as per Section 164/B of the Credit Institutions Act shall not be construed as a violation of confidential insurance information.

Section 139 The obligation to safeguard confidential insurance information shall not apply when:

- a) a Hungarian law enforcement agency acting in response to the written request of a foreign law enforcement agency pursuant to an international agreement, requests confidential insurance information in writing,
- b) the national financial intelligence unit makes a written request for information – that is considered insurance secret – from an insurance company acting within its powers conferred under Act LIII of 2017 on the Prevention and Combating of Money Laundering and Terrorist Financing or in order to fulfill the written requests made by a foreign financial intelligence unit, and in connection with the insurance or reinsurance company fulfilling its obligation relating to policies and procedures at the group level for combating money laundering and terrorist financing.

Section 139/A. In order to effectively fulfill the tasks defined by law, the insurer or reinsurer may enter into a cooperation agreement with the investigative authority or the prosecutor's office.

Section 140(1) Data transfer by the insurer or reinsurer to a third-country insurer, reinsurer or a third-country data processing agency shall not qualify as a breach of confidential insurance information if:

- a) if the client to whom such information pertains (hereinafter referred to as "data subject") has given his prior written consent, or
- b) if – in the absence of the data subject's consent – the data transfer is made in compliance with the provisions applicable to the transfer of personal data to third countries.

(2) When transferring confidential insurance information to another Member State, the provisions governing data transfer within the domestic territory shall be applicable. Section 141 (1) The following shall not be construed as breach of confidential insurance information:

- a) in the event of disclosure of summarised information from which the identity of customers or the specifics of their business cannot be identified,
- b) in the case of a branch office, the data transfer necessary for the supervisory authority as per the registered office (headquarters) of the enterprise with a registered office abroad if it complies with the agreement between the foreign and the Hungarian supervisory authority,
- c) in the event of disclosure of information, other than personal data, to the competent minister for legislative purposes or in connection with the completion of feasibility studies,
- d) data transfer in order to comply with the provisions of the act on the supplementary supervision of financial conglomerates.

Section 142 (1) The personal data indicated in the data transfer records, and the data treated as special data or personal data from the criminal records shall be deleted, respectively, after five years and twenty years following the date of disclosure.

(2) The insurance or reinsurance company shall not be authorized to notify the data subject when data is disclosed pursuant to Paragraphs b), f) and j) of Subsection (1) of Section 138 or Subsection (6) of Section 138.

UNION Vienna Insurance Group Biztosító Zrt.