

# Customer Information Brochure

## Group Insurance of persons travelling on scheduled international bus lines with tickets purchased from Volánbusz Zrt.

We wish to take this opportunity to give you a brief outline of the most important features of our group travel insurance which was concluded on the basis of an agreement between Volánbusz Zrt. (hereinafter: Contracting Party) and Allianz Hungária Zrt. (hereinafter: the Insurer) in order to provide insurance coverage for passengers travelling with tickets purchased from Volánbusz Zrt. on scheduled international bus lines.

This information brochure does not replace the insurance terms and conditions, it is only intended to provide information to the reader.

### What is covered?

The insured events which are covered hereunder are the following:

- travel assistance insurance covering travel related accidents,
- accident insurance,
- luggage insurance,
- insurance against delayed delivery of luggage.

### Insured event

In case of travel assistance insurance:

- travel related accident of the Insured.

In case of other travel assistance insurance the Insurer shall provide indemnification in the following cases:

Visiting the Patient

- if the Insured is in a critical condition or if he/she needs hospital treatment exceeding ten (10) days.

Reimbursement of telephone calls

- if the Insured has to undergo emergency hospital treatment exceeding 48 hours whilst staying abroad, and for that reason he/she makes telephone calls to relatives.

Notification

- if the Insured has an accident or he/she falls ill and the Insurer is subsequently notified or learns of the case.

Home transfer of the corpse (mortal remains)

- if the Insured dies abroad.

In case of Supplementary accident an insured event may be one of the following:

- the accidental death of the Insured,
- permanent total or partial health impairment.

The supplementary luggage insurance provides coverage against

- theft,
- robbery, or
- the loss or destruction of insured property arising out of natural hazards or the accident suffered by the Insured.

### Inception and Expiry of Insurance Coverage

Insurance coverage shall attach when the Insured person(s) holding valid tickets board the bus or enter the areas designated for passenger transport and continues to be in force until the Insured leaves the bus or such designated areas, provided the Insurer has paid the due premium to the Insurer.

In case the Insured person is a „non-resident” according to foreign exchange rules then the events defined in the special terms and conditions of travel accident related health assistance and travel assistance insurance shall not cover events occurring in the territory of Hungary and countries where the Insured is registered as a citizen, however in respect of insured events defined in the special terms and conditions of accident, luggage, and late delivery of luggage, coverage shall be extended to events occurring in Hungary.

For the purposes of the present insurance terms and conditions “areas designated for passenger transport” shall be understood to mean the premises of the bus station, bus stops for boarding and getting off, plus areas used for reasons of managing the traffic during the journey (for instance resting places used during temporary stops, gas stations, or resting stations on the motorways etc.).

## Settlement of claims, sums insured

Insurance benefits	Sum insured
Hospital and medical expenses related to travel accidents	60,000 EUR
Transportation of the patient to Hungary	No limit
Visiting the patient 5 nights	100 EUR/night
Telephone charges	30 EUR
Transportation of the corpse	No limit
Accidental death	3,000,000 HUF
Accidental permanent disability, total (100%) or partial)	6,000,000 HUF
Loss/damage to luggage	200,000 HUF
Late delivery of luggage:	
i.r.o. delays between 4 to 8 hours	50 EUR
i.r.o. delays between 8 to 12 hours	80 EUR
i.r.o. delays exceeding 12 hours	150 EUR
Replacement of travel documents	10,000 HUF
Value of individual pieces of luggage	100,000 HUF

Upon the occurrence of an insured event, the Insurer shall provide the following services:

- The Insurer will provide information concerning options for medical treatment, notify relatives or persons named by the Insured about his/her condition if requested by the Insured, if necessary the Insurer will contact the Insured's family doctor and participates in maintaining contact between doctors, and provides health related advice to the Insured.
- In case of abasia, the Insurer shall arrange for an ambulance to transport the Insured to the nearest hospital or the nearest physician, and shall assume the cost of such transportation.
- If necessary, the Insurer will arrange for further medical treatment (for instance transporting the Insured to a specialised Clinic following instructions issued by a doctor), and will maintain continuous contact with the doctor in charge and the medical institution during inpatient and outpatient care, it will continuously monitor the condition of the Insured and the administration of the treatment. The Insurer shall cover the costs and expenses of medical treatment towards doctors and/or hospitals.
- The Insurer will furthermore arrange for the home transportation of the patient.
- In case of the Insured's death or permanent health

impairment the Insurer shall pay the amount of indemnity indicated in the contract.

- In case of property items lost or damaged during an insured event, indemnification shall be at new replacement value.
- In case of late delivery of luggage, the Insurer shall provide the service as detailed in the contract.
- The Insurer shall arrange for and reimburse the costs related to visiting the patient provided the Insured is in a critical condition, or the necessary hospital treatment exceeds ten days. In such cases the Insurer shall provide for five days of hotel accommodation and will pay for the related costs up to the limit set forth in the contract.
- In case the hospital treatment of the Insured exceeds 48 hours, the Insurer will pay for the cost of telephone calls to relatives.
- The Insurer will notify the person named by the Insured about his/her accident or illness.
- The Insurer shall arrange for the home transportation of the corpse (mortal remains).

## Reporting an Insured Event, and the Settlement of Claims

The Insured shall report an insured event to the Insurer within 5 working days following arrival at the destination indicated on his/her ticket. Losses/claims may be reported at any branch office or business unit of the Insurer.

The amount of indemnity will be paid by the Life Insurance Department of Allianz Hungária Biztosító Zrt. in HUF within 30 days following receipt of the last document needed for the assessment of the claim. Indemnification will be based on original invoices.

Our 24 hour assistance help desk is available in English and Hungarian at the following numbers:

**Budapest telephone: (36-1) 270-0521**

**fax: (36-1) 270-0519**

**Vienna telephone: (43-1) 525 03 6516**

## Exemption

**The Insurer shall be exempt from providing indemnity hereunder in the following cases**

- in case of accident insurance: if the Insured died as a consequence of the wilful conduct of the beneficiary.
- in case of accident and luggage insurance: if there is evidence to prove that the loss or accident was caused illegally through wilful intent or through gross negligence by the contracting party, the Insured or their relative living in the same household.
- in case of luggage insurance: if there is evidence to prove that the Insured failed to comply with his/her loss mitigation obligation and therefore significant circumstances can no longer be identified.

## Exclusions

No indemnification is payable hereunder if the Insured fails to report the insured event in accordance with the applicable regulations and therefore significant circumstances can no longer be identified.

The following are excluded from coverage hereunder:

a) in case of travel assistance insurance covering travel related accidents and other travel assistance insurance,

- services which are not related to acute injuries occurring in connection with a travel accident;
- treatment, spa therapy and home care;
- physiotherapy, balneotherapy, psychotherapy, acupuncture, and/or any type of healing activity performed by persons without a medical degree;
- treatment administered by a close relative of the Insured;
- general medical checkup, medical control and screening tests, and preventive inoculation;
- the purchase, replacement or repair of artificial limbs, hearing aids and other therapeutic devices;
- manufacturing and reattachment (glueing) of dental crowns, manufacturing and/or repair of dentures and dental bridges, removal of plaque and dental cosmetics;
- necessary medical treatment due to the effects of alcohol, drugs or other narcotic substances, including any deprivation symptoms arising therefrom;
- suicide or attempted suicide;
- in case the Insured caused the accident to him/herself wilfully or in case he/she became ill (or suffered an accident) in connection with the act of crime that he or she committed wilfully;

b) in case of supplementary insurance against accidents

- the following are excluded from coverage: suicide and self mutilation or any attempt thereat, overstraining, sprain, freezing, sunstroke, heat-stroke; the insurance coverage provided by the Insurer shall not include organs or parts of the body that have been injured, damaged, amputated or impaired in their function for whatever reason prior to the accident;

c) in case of supplementary luggage insurance

- loss, abandonment or dropping of luggage, theft of unattended property items;
- if luggage is stolen from the passenger compartment of the vehicle.

**In case of Luggage Insurance the following shall not be regarded as luggage or they are uninsured items:**

- jewelry, property items made of precious metals, artwork, collections, precious furs, stamps and musical instruments, arms and ammunition;
- cash, other means of payment (cheques, including blank cheques, bank cards, credit cards, cheque

cards, bills, payment orders, savings books, or any other official documents concerning such savings deposits, and/or any other documents used for the same purpose regardless of their name, securities, season tickets or passes (such as a ski pass) and travel tickets;

- property items purchased abroad during the insurance period;
- property items whose value exceeds the individual new replacement value as indicated in the insurance contract, including their parts and accessories regardless of their value.

## Limitation of the Service by the Insurer

In case of health care assistance and other travel assistance related to travel accidents, costs of services that were not agreed previously, will only be reimbursed by the Insurer up to a reasonable limit.

## Time lapse of claims

Claims arising out of the insurance contract shall lapse at the end of two years from their due date.

## Insurance secrets and forwarding data classified as insurance secrets

In accordance with Act LX of 2003 on Insurance Companies and Insurance Business (Insurance Act) the insurer and its agents are subject to a secrecy obligation in respect of all data that is related to the personal circumstances of their clients including their financial situation, business activities or contracts concluded with our company.

The Insurer may only pass on insurance secrets to third parties if

- the Insurer's client or his/her authorised representative submits a written exemption, specifically indicating the range of secrets which may be disclosed, or
- there is no statutory secrecy obligation.

On the basis of Article 157 of the Insurance Act, there is no secrecy obligation in respect of certain organisations. If necessary, the Insurer may disclose client related data to such organisations without the written consent of the client. Such organisations are the following:

- the Hungarian Financial Supervisory Authority acting in its official capacity;
- the investigating authority and the Prosecutor's Office acting in case of criminal proceedings;
- any court of law in connection with criminal or civil cases as well as bankruptcy and liquidation proceedings, and

- the independent court bailiff acting in a case of judicial enforcement;
- public notaries acting in probate cases;
- the tax authorities in tax matters if the Insurer is legally obliged to disclose data or if it must disclose data on payments made in connection with an insurance contract when such payment is subject to taxation. In such cases data will be disclosed following a request by - the tax authorities;
- the national security service acting in its official capacity;
- the Hungarian Competition Authority acting in its official capacity;
- the guardian agency acting in its official capacity;
- the health care authority as defined in Act CLIV of 1997 on Health Care;
- the agencies authorized to apply secret service means and to conduct covert investigations in case of special conditions as stipulated in the relevant special law;
- reinsurers and co-insurers in case of joint underwriting (co-insurance);
- the receiving insurance company in respect of insurance contracts being conferred under insurance portfolio transfer;
- the outsourcing service provider, in respect of data required for the performance of the outsourced activity;
- the parliamentary commissioner acting in his/her official capacity

provided the above persons or organisations submit a written request to the Insurer which shall contain the name of the Client, indicate the relevant insurance contract, the type of data requested plus the purpose and legal justification for such a request of data. Justification of purpose and legal grounds shall be admitted if the request indicates the relevant piece of legislation authorising the viewing of such data or the applicable European Community legislative norm. Outside of the framework of the given proceeding, the secrecy obligation in respect of insurance secrets shall be binding on the employees of the above listed organisations as well.

Upon a written request from the investigating authority, the national security agency or the prosecutor's office the Insurer shall promptly provide information if there is data which alludes to the fact that the insurance transaction is related to drug abuse, terrorist activities, abuse of explosive materials or devices, abuse of arms or ammunition, money laundering, or criminal acts committed by organised criminals.

The Insurer shall provide information to the investigating authority on insurance secrets managed by the company and related to the given case if the request is classified as "urgent action" which means that such requests may

bypass the prosecutor's prior approval on the basis of a special legislation.

The insurance secrecy obligation does not exist in case the Insurer must comply with a reporting obligation as set forth in the EU implementing measures on restrictions concerning financial and material assets.

The insurance secrecy obligation shall also be lifted in case the National Police Headquarters or the Hungarian investigating authorities are obliged to provide information upon receipt of a written request by foreign investigating authorities or a foreign Financial Information Unit on the basis of Act XV of 2003 on the prevention and elimination of money laundering. In case of such requests, insurance secrets may be disclosed provided the request includes a confidentiality endorsement signed by the requesting party.

Our company shall keep all business secrets which are also classified as insurance secrets learned during its business activities, and such secrets may not be disclosed to third parties.

In addition to organisations listed in Art. 157 of the Insurance Act, the secrecy obligation does not apply in case of the following:

- I.
  - The National Bank of Hungary,
  - The National Court of Auditors,
  - The National Controlling Office in charge of supervising the appropriate and efficient use of funds from the central budget,
  - asset controller.
- II. as regards the case triggering the proceedings, the secrecy obligation does not apply to the following:
  - the investigating authority and/or the prosecutor's office in case the accusation must be supplemented,
  - the court if the case is connected to a procedure of settling debt towards the local municipality.

Sending data to a third country insurance company or data processing company shall not be a breach of the secrecy obligation in case the Insurer's client gave his/her written consent and the data is handled by such third country data processing company in a way which is fully compliant with the relevant Hungarian legal requirements and the country where such data processing company resides has data protection legislation which complies with the relevant Hungarian legal requirements.

In case of forwarding insurance secrets to another member state, the rules on domestic data transfer shall be applied.

Disclosing summary data where the personal data or business related data of individuals cannot be identified shall not be regarded as breach of insurance secrets. The same is true in respect of “non personal” data forwarded to the Ministry of Finance to be used for legislative groundwork and impact assessment studies, The Insurer shall not refuse the disclosure of such data with reference to the protection of insurance secrets.

As part of our services our Company uses external contributors in case there is a need for the special expertise of our contractual partners or in case the quality of our services will remain the same whilst using such outside contributors, but our costs and therefore our prices can be reduced.

In order to inform our clients we post the list of our contractual partners who participate in our insurance activities and have access to insurance related data in our business premises which are open to clients. You may request information by phone on those companies and enterprises from our Customer Service at the following number: 06-40-421-421.

On the basis of the Insurance Act and the special confidentiality rules applicable to the given line of business plus the relevant provisions in the agreement between the service providers and our Company, the above service providers must protect insurance secrets learned during their activities without time limitation and shall not disclose such secrets to third parties.

## Complaints Management Principles and Practices at Allianz Hungária Zrt.

One of the goals of our company is to ensure that our Clients are fully satisfied with our services and the way we manage their affairs. In order to continuously improve the quality of our services and increase the satisfaction of our clients we need feedback whether it is negative or positive. Please let us know what you think of our products, services, procedures, our employees or our Company as a whole.

### We adhere to the following complaints management principles and practices in order to handle complaints and criticism in the most appropriate manner:

- We pay thorough attention to all complaints and criticism that we receive. We are doing our best to serve the interests of our customers by constantly improving the quality of our products and services and we are committed to continuously increasing the satisfaction of our clients. This includes offering them remedies for their complaints.
- Our complaints management procedures guarantee

a thorough, unbiased and quick review of all incoming complaints. Our clients receive appropriate answers to their queries and justified complaints are remedied as soon as possible. We are operating a central Complaints Management Department where our colleagues pay special attention to handling and settling complaints.

- Whenever possible, we handle the complaints of our customers at the first point of contact, and we always correct our own errors. In case of more complex cases where the solution takes a longer time we provide updated information to our Clients on the complaints management process and when our final response may be expected.
- The applicable rules of law provide 30 days for investigating complaints cases and responding to the Client; our company is doing its utmost to ensure that in simpler cases our Clients should receive an answer in a considerably shorter time.
- We are accessible through various communication channels, and all of them are open to receive feedback from our clients, so they may express their views and opinions in a simple and quick manner through e-mail, telefax, telephone, by mail or by simply talking to us.

### You may forward your complaints or observations through the following channels:

- **Talking to us in person:** If you have complaints or observations, you may contact any customer service unit in our branch network, or talk to our contract agents or our partners. They will listen to you carefully and record your complaint in writing. You may also ask for a Complaints Reporting Form. This should be filled out and submitted to one of our colleagues.
- **By telephone:** Our telephone Customer Service is available round the clock at the following telephone number: 06-40-421-421.
- **By e-mail:** [ugyfelszolgalat@allianz.hu](mailto:ugyfelszolgalat@allianz.hu)
- **By mail:** Your letters should be sent to the Complaints Management Department at 1368 Budapest, Pf. 191.

In order to make our complaints management as smooth as possible, we need basic personal identification data from our Clients, including information concerning existing insurance policies (policy number, contract number, customer ID number).

Should you be dissatisfied by our way of handling your complaint, you may contact the following authority:

### Our Supervisory Authority is:

- Hungarian Financial Supervisory Authority  
1013 Budapest, Krisztina krt. 39.
- In case of our Head Office, the relevant body is the Dispute Resolution Organisation of Budapest 1253 Budapest, Pf.: 10.

If you wish, you may contact the dispute resolution organisation which is acting in the area of your residence, or you may take your case to court.

### **A few words about Allianz Hungária Zrt.**

Our company is a member of Allianz SE, a group of insurance companies which is the market leader in Europe, and one of the largest insurance groups worldwide. Allianz Hungária Zrt. is the marked leading insurer in Hungary, and we are at the disposal of our clients with our long years of domestic and international expertise. Since 1990, our company has been operating as a company limited by shares.

Our Head Office: 1054 Budapest, Bajcsy-Zsilinszky út 52.  
Our mailing address: 1368 Budapest, Pf.: 191  
Company registration number: The Municipal Court of Budapest as Court of Registration, Cg. 01-10-041356  
Country of registration of the Seat of the Company: Hungary

Our supervisory authority is the Hungarian Financial Supervisory Authority (address: 1013 Budapest, Krisztina körút 39.).

In case you wish to know more about our insurance products our colleagues will be pleased to assist you at any of our customer service units.

The address of our customer service unit at our Head Office is:

1054 Budapest, Bajcsy-Zsilinszky út 52.

### **Additional information**

In case you need additional information you may contact our helpline at 06-40-421-421 (in Hungary) or at +361-237-2372 (from abroad), or you may consult our website at: [www.allianz.hu](http://www.allianz.hu).

We hope that you have found our brochure interesting and we may soon welcome you among our clients.

With best regards,

**Allianz Hungária Zrt.**