

Distance Insurance Policy Information Pursuant to Act 266/2005 Coll., Distance Service Consumer Protection

This form contains information on distance contracts pursuant to Section 4 of Act 266/2005 Coll., Distance Service Consumer Protection, as amended (hereinafter the 'Act 266/2005'). Information provided herein supplements information provided in the Policy Terms and Insurance product information document served to the Client in advance.

1. Service Provider

Welcome ACUTE Online, the health insurance for foreigners (hereinafter 'Welcome ACUTE Online') executed at a distance by ERGO Poistovňa, headquartered in: Apollo Business Center II, Block D, Prievozská 4C, 821 08 Bratislava, Slovak Republic, Company ID: 35779012, registered in the Commercial Register of the District Court Bratislava I, Section: Sa, File 2332/B (hereinafter the 'Insurance Company').

The Insurance Company provides insurance services pursuant to the Insurance Act regarding life insurance and non-life insurance under the authorization granted by the National Bank of Slovakia. The authorization above also includes insurance services related to accident insurance and sickness insurance, i.e. the individual health insurance. Email: info@ergo.sk. Website: www.ergo.sk

Phone Assistance: 0850 777 777

EURO CENTER HOLDING SE is the claim communication service provider ('CSP'), headquartered in Křížkova 237/36a, 186 00 Prague 8, Czech Republic, Company ID: 24853861, registered in the Commercial Register of the Municipal Court in Prague, Section. Sa, File 834 (hereinafter the "CSP").

Claim Contact Number: (+420) 221 860 605

2. Insurance Companies Supervision

The National Bank of Slovakia - headquartered in Imrich Karvaš 1, 813 25 Bratislava - is the supervisor of the Insurance Company's conduct of business.

3. Financial Service

Welcome ACUTE Online is a financial service paid and provided at a distance.

Welcome ACUTE Online Policy can include the following insurance risks:

This insurance may include medical expenses in case of urgent and emergency health care within the limits set forth in the Policy and Welcome ACUTE General Terms and Conditions related strictly to acute illness or injury of the Insured.

The coverage thereof contains the risk of accident or acute illness of the Insured that directly threatens the

life and health of the Insured and requires an urgent medical attention in the territory of the Slovak Republic or other members states of the Schengen Area.

The specific extent of coverage is stipulated in the Policy.

The basic extent of coverage is specified in the Policy General Terms and Conditions; a clear summary of the coverage is given in the Welcome ACUTE General Terms and Conditions (hereinafter the 'ACUTE GTC'). The documents above are available at www.ergo.sk. Policy enters into force upon payment in full. Premium represents the total and final price for the Financial Service.

Welcome ACUTE Online is executed at a distance. No written form is required to execute the Policy pursuant to the ACUTE GTC.

Written form is required to amend, change, or terminate the Policy.

The Insurance Company completes and submits insurance policy form based on the information provided by the applicant at a distance (hereinafter the 'Form'). The applicant is asked to provide all the information required by the Insurance Company (policyholder / insured information, i.e. name, birth number, address, email, phone) and information on the coverage pursuant to the packaged offered by the Insurance Company in the ACUTE GTC. The applicant shall provide accurate and true information.

ONLINE

Internet-based Policies are arranged using the forms prescribed by the Insurance Company as displayed in the browser.

The offer of coverage is valid while it appears in the web browser and during transactions related to the payment of the Premium. The offer of coverage expires by closing the internet browser window, by interrupting the connection, or after a certain period of time (connection timeout). The Policy offer may only be accepted using a cashless payment of the Premium as specified in the Form. The Policy enters into force upon payment of the Premium in full. The Policy does not enter into force, if the Premium is paid partially. The Premium is deemed to be paid in full when the Insurance Company receives a confirmation from its financial institution of a successful completion of the payment in full. Should a financial institution confirms a successful completion of the payment transaction, but no amount is credited to the account of the Insurance Company, the validity of the Policy will not be affected, but the Insurance Company shall have the right to require the Policyholder to pay the Premium accordingly. If a financial institution notifies the Insurance Company that the transaction has not taken place, the Policy is deemed to be invalid.

In case of a claim, the claim is due within 15 days from the date of the claim investigation conducted by the Insurance Company required to determine the extent of its liability. Insurance benefits are not subject to income tax.

4. Distance Contract

The Policy is executed for a limited period of time as specified in the Form. The policy period may be 1, 2, 3, 6, or 12 months.

Welcome ACUTE Online may be terminated prematurely. The Policy may be terminated in cases stipulated in the Insurance product information document, Policy General Terms and Conditions, and ACUTE GTC.

The Policy may be terminated pursuant to the ACUTE GTC without any fees or charges.

In case of an early termination of the Policy, the Insurance Company has the right to Premiums calculated pro-rata from the purchase to the date of the termination.

5. Insurance Termination

1. The Insurance Company and Policyholder may terminate the Policy within two months from its purchase. The Policy is cancelled after eight days of the notice period.
2. The Policy is also terminated by the death of the Insured.
3. In addition, the Policy is terminated as a result of the statutory obligation of the Insured to register for a mandatory health insurance pursuant to the Health Insurance Act. In this case, the Policy; will be terminated on the day preceding the date of the registration in the national system of health insurance.
4. If the Insurance Policy pays the entire insurance benefits of the coverage, the Policy will be terminated on the date of the payment thereof.
5. In case of a breach committed by the Policyholder to provide accurate and true information to any and all questions of the Insurance Company, the Insurance Company shall have the right to terminate the Policy, if the Insurance Company would not sign the Policy when provided with true and accurate information in the first place. The Insurance Company shall have the right to terminate the Policy within three months from the date when it became aware of the information above. In case of an early termination of the Policy, the Insurance Company shall have the right to charge any and all costs associated with the execution and administration of the Policy.
6. The Policy may also be terminated by the Insurance Company, if the Policyholder provides false or misleading information intentionally to the Insurance Company related to material facts of the Policy or in a case of unjust enrichment of the Policyholder. The Policy in this case is terminated on the date of delivery of the notice of termination to the Policyholder.
7. If the Insurance Company finds that an insurance claim is based on inaccurate or misleading fact as provided by the Policyholder, which the Insurance

Company had no means to learn in advance, the Insurance Company shall have the right to reject the claim. The Policy will be terminated on the date of rejection of such claim.

8. The Policyholder may terminate the Policy within 14 calendar days from the purchase. The notice of termination shall be delivered formally to the headquarters of the Insurance Company no later than the last day of this period. In case of termination of the Policy under this paragraph, the Policy will be terminated on the date of the delivery of the notice of termination to the Insurance Company. The Insurance Company has the right to Premiums calculated pro-rata from the purchase to the termination; the remaining amount of the Premium will be refunded to the Policyholder.
9. The Policyholder may terminate the Policy within 30 days from the purchase. Any statement of the Policyholder within this period regarding the termination of the Policy shall be construed as a withdrawal.
10. The Policy is terminated by:
 - a) The expiry of the policy period as specified therein;
 - b) Mutual agreement of the Insurance Company and Policyholder;

6. Complaint Handling

The Policyholder and Insured have the right to submit a complaint to the address of the Insurance Company. Communications

that only contain an inquiry or question - without exercising any rights thereof -

or that are served as notifications of actions of third parties without legal basis, are not be taken as complaints. Each complaint

delivered will be handled and responded within 30 calendar days of its delivery.

If a complaint is delivered incomplete, this period of 30 calendar days begins on the date of a delivery of a complete complaint as required. The period of 30 calendar days may be exceeded in cases that are difficult to investigate, but no more than for a period of another 30 days.

7. Law and Language of Communication

The Form as well as any and all legal rights and duties of the parties are governed by the law of the Slovak Republic. Disputes related to rights and duties of the parties to the Policy will be resolved by courts of the Slovak Republic based on local jurisdiction. The language of communication between the Policyholder and Insurance Company is the Slovak language.

This Distance Insurance Policy Information Pursuant to Act 266/2005 Coll., Distance Service Consumer Protection enters into effect on 25/05/2018.