



“WORLD WITHOUT BORDERS”

TRAVEL INSURANCE PRODUCT SHEET

The Product Sheet contains essential information about the “World Without Borders” insurance. The Product Sheet is not part of the Insurance contract (hereinafter referred to as the “Contract”), nor is it a contract template or marketing material. The Product Sheet has been prepared by Europ Assistance S.A (hereinafter referred to as the “Insurer”) for the purposes of application by Bank Handlowy w Warszawie S.A. with its registered office at ul. Senatorska 16 in Warsaw (hereinafter referred to as the “Bank”) in line with Recommendation U of 24 June 2014 concerning good bancassurance practices and guidelines for insurance companies regarding the distribution of insurance products issued by the Polish Financial Supervision Authority, and aims to present key product information and help customers understand product features.

A decision to sign the Contract should be made after reading the insurance documentation, especially the General Terms and Conditions of the “World Without Borders” Insurance (hereinafter referred to as the “GTCl”) that contain detailed information about the insurance product. Capitalized terms have the meanings ascribed to them in the GTCl.

If you do not understand the product features described in this Sheet or you are not sure if the product matches your needs, please ask the Insurer or the Bank for assistance before you enter into the Contract.

Key information on insurance

Insured/Policyholder

Policyholder – a natural person who maintains a Bank Account with the Bank or a natural person who holds a Citibank Credit Card, concludes the Contract and is obliged to pay the Premium from the Citibank Credit Card account or from the Bank account at the Bank. In the Insurance contract, the Policyholder is always the Insured at the same time.

Additionally, an Insured can be a natural person for whose benefit the Insurance contract has been concluded by the Policyholder.

Insurer

Europ Assistance S.A.

Address: Gennevilliers, 1, promenade de la Bonnette, 92230 Gennevilliers, France

Entered in the Nanterre Trade and Companies Register under No. 451 366 405. Share capital: EUR 35,402,785.00. The main shareholder of the company is Generali France represented by its branch:

Europ Assistance S.A. Irish Branch with its registered office in Dublin, 4th Floor, 4 - 8 Eden Quay, Dublin 1, Ireland, registered at the Registry Office under number 907 089.

Role of the Bank

Bank Handlowy w Warszawie S.A. with its registered office in Warsaw (postal code: 00-923), ul. Senatorska16, entered in the register of entrepreneurs maintained by the National Court Register, District Court for the capital city of Warsaw in Warsaw, XII Commercial Division of the National Court Register [Krajowy Rejestr Sądowy - KRS], KRS number 0000001538, NIP [tax identification number]: 526-03-00-291, with paid up share capital of PLN 522 638 400.00 is an insurance agent carrying out agency activities for and on behalf of the Insurer, which is entered into the Register of Insurance Agents kept by the Polish Financial Supervision Authority [Komisja Nadzoru Finansowego - KNF], with registration number 11120807 / A. The Bank's entry in the aforesaid Register can be verified by the Client by filing relevant application to the KNF, in particular in the written form, by phone or via website. <https://rpu.knf.gov.pl> The Bank carries out agency activities for and on behalf of the following insurance companies: Aegon Towarzystwo Ubezpieczeń na Życie SA, Europ Assistance SA carrying out business activities within territory of Poland via its branch business in Ireland, MetLife Europe Insurance DAC, MetLife Towarzystwo Ubezpieczeń na Życie i Reasekurację S.A, Towarzystwo Ubezpieczeń i Reasekuracji "WARTA" S.A., Towarzystwo Ubezpieczeń na Życie "WARTA" S.A. The Bank does not hold shares or stocks in any of the listed insurance companies, entitling to at least 10% of votes at the general meeting of the insurance company. No insurance company holds the Bank's shares entitling to at least 10% of votes at the Bank's general meeting.

The scope of agency activities covering World without Borders [Świat bez granic] product, shall include in particular providing the Policy Holders with relevant information on the terms and conditions of insurance and conditions for the conclusion of the Agreement, providing and collecting from the Insurer all documents required to enter into Agreement along with any other relevant instructions related with the Agreement, followed by submission of the Agreement to the Insurer. The Bank, acting as an insurance agent, receives remuneration which is a combination of two types of remuneration: commission paid by the Insurer included in the insurance premium, which constitutes predetermined percentage of the insurance premium; and other types of financial or non-financial benefits related with the insurance business activities and participation in special promotional projects dedicated for the Bank acting as a distributor.

Insurance contract concluded between the Policyholder and the Insurer.

The Insurance contract may be concluded on an individual or collective basis provided that the scope of insurance cover and the Sum insured is the same for all Insureds indicated at the time when the Policyholder concludes the Insurance contract. A collective contract may be concluded for a group from two up to nine persons.



Main Purpose of Insurance

The purpose of insurance is to assist the insured while traveling abroad in the event of an illness, accident, damage caused to a third party, baggage theft, delayed baggage or flight delay.



Insurance Characteristics

- 1) The insurance provides cover during a Trip abroad with respect to events covered by insurance in the cases where the Insurer is obliged to pay the insurance benefit or to arrange, and cover the costs of, assistance during a Trip abroad, and to cover the costs arising from the Insured's third party liability.
- 2) The insurance is short-term one (from 1 to 29 days).
- 3) The insurance is concluded online using the Insurer's platform. Following the conclusion of the contract, the Policyholder receives from the Insurer a Policy delivered electronically to the specified e-mail address and a text message with the number of the policy and the Emergency Center phone number.
- 4) After the Contract has been concluded, the scope of coverage or the sums insured cannot be changed.

Insurance Coverage

- 1) A Contract may be concluded in one of the four options related to the Sum insured with the following scope:
 - a) medical expenses;
 - b) assistance;
 - c) third party liability insurance;
 - d) baggage insurance;
 - e) delayed baggage and flight delay insurance.
- 2) Additional coverage
Insurance coverage with respect to medical expenses, Assistance and third party liability insurance may be extended upon the payment of an additional Premiums to include the effects of Accidents resulting from:
 - a) amateur Winter sports – the WINTER Option;
 - b) amateur Water sports – the WATER Option;
 - c) amateur Diving and amateur Water sports – the DIVING Option;
 - d) amateur mountain and rock climbing – the MOUNTAINS Option.
- 3) Territorial scope
Depending on the territorial scope selected, insurance cover shall include:
 - a) EUROPE – the following European countries: Albania, Andorra, Armenia, Austria, Belarus, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Montenegro, Czech Republic, Denmark, Estonia, Finland, France (including Corsica), Germany, Gibraltar, Greece, Hungary, Iceland, Ireland, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Malta, Moldova, Monaco, Netherlands, Norway, Portugal, Romania, Russia (European part), San Marino, Serbia (including Kosovo), Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey, Ukraine, Great Britain, Vatican City, Italy and the following Mediterranean countries: Algeria, Egypt, Israel, Lebanon, Libya, Morocco, Tunisia)
 - b) WORLD – in all countries of the world.Insurance cover shall also be valid on board aircraft and ships (irrespective of their flag) if they are outside the territory of the Republic of Poland, the Insured's country of nationality or the Insured's Country of residence.

Insurance Cover Start and End; Insurance Period

- 1) The Insurance contract may be concluded for an insurance period ranging from 1 to 29 days.
- 2) The Insurance contract shall be concluded for the period set forth in the Policy and indicated by the Policyholder when submitting the application for Contract conclusion.
- 3) The Insurer's liability shall start on the date on which a Trip abroad begins, which is indicated in the Policy as the start of the insurance period, however not earlier than the payment of the Premium.
- 4) If at the time of Contract conclusion the Insured is outside the Republic of Poland, the country of his or her residence or the country of his or her nationality, the Insurer's liability shall start on the first day of the insurance period, but no earlier than four days after the Premium payment date.
- 5) The Insurer's liability shall end when the Trip abroad ends, but not later than the end of the last day of the insurance period indicated in the Policy as the end of the insurance period.

Insurance Premium

- 1) The insurance premium shall be determined based on the premium rates applicable as at the date of Contract conclusion.
- 2) The amount of Premium shall depend on the period for which the Contract is concluded, the insurance option, the number of persons covered, the scope of additional risk and the territorial scope of the Contract.
- 3) The Insured shall pay the Premium on a one-time basis upon Contract conclusion. The Premium paid shall not subject to change.
- 4) The Premium payment time shall be deemed to be the time of placing an order for a payment to be made to the Insurer's correct account using a Citibank Credit Card or a Bank account at the Bank, provided that the balance of the Policyholder's Citibank Credit Card or Bank Account at the Bank is sufficient; otherwise the premium payment time shall be deemed to be the time at which the Premium is credited to the Insurer's correct account.

Insurance Benefits, Calculation Rules and the Persons Entitled to Receive Benefits

- 1) In the case of an insured event occurring, the Insurer shall arrange assistance, treatment and other services and benefits listed in point 11.
- 2) Benefits within the limits of the Sums insured shall be paid in accordance with the rules set forth in the GTCI on the basis of documented costs. In the case of civil liability, the Insurer shall cover the damages that the Insured is required to pay in connection with civil law claims by Third parties.
- 3) The Insured affected by the event shall be entitled to benefits.

Sum Insured/Description of Benefits

Sums Insured applicable to individual Contract options per each Insured.

SUM INSURED				
COVERAGE SCOPE/BENEFIT TYPE	Option 1	Option 2	Option 3	Option 4
	EUR 15,000	EUR 30,000	EUR 50,000	EUR 100,000
MEDICAL EXPENSES INSURANCE AND ASSISTANCE				
Medical expenses related to accidents and sudden illness		up to the Sum insured		
Dental treatment		EUR 275		
Medical transportation		up to the Sum insured		
Medical transportation to the Republic of Poland		up to the Sum insured		
Repatriation of remains		up to the Sum insured		
Rescue and search costs		up to 50% of the Sum insured		
Accommodation during convalescence		EUR 425		
Trip continuation		EUR 425		
Visit of a family member		EUR 600		
Sending personal items		EUR 425		
Legal assistance		EUR 1,675		
Medical helpline		No limits		
BAGGAGE INSURANCE, DELAYED BAGGAGE, FLIGHT DELAYS				
Loss of baggage	EUR 250		EUR 500	
Delayed baggage		EUR 250		
Flight delay: the purchase of necessities		EUR 250		
Flight delay: accommodation costs		EUR 1,000		
Flight cancellation: the purchase of necessities		EUR 250		
Flight cancellation: accommodation costs		EUR 1,000		
THIRD PARTY LIABILITY INSURANCE				
Third party liability		EUR 18,000		

The Sums insured under individual coverage areas for the option selected under the Contract shall be reduced by any amount of compensation/benefit paid for the coverage area in question. Any payment arising from rescue and search cost insurance shall reduce the Sum insured in respect of medical expenses related to accidents and sudden illness. The total Sum insured for all benefits under medical expenses insurance and Assistance shall be limited to the main Sum insured for the option selected for the Contract concluded.

Insurer's Liability Limitations and Exclusions

- 1) The Insurer shall not be liable for claims arising in the territory of Poland, in the Insured's country of residence and in the Insured's country of nationality.
- 2) The Insurer shall not be liable for claims arising as a result of the Insured's intentional or grossly negligent conduct.
- 3) Insurance shall not cover claims arising as a result of:
 - a) war, hostilities, armed conflicts;
 - b) active participation in riots and unrest, coups d'état or acts of terror;
 - c) nuclear fission and radioactivity of any kind irrespective of their origin, source and impact on the Insured;
 - d) epidemics or chemical contaminations if these emerged and were announced before the Insured's trip;
 - e) the Insured's participation in bets or fights with the exception of actions taken in self-defense;
 - f) the Insured's mental illness, mental retardation or mental disorders and their consequences, including without limitation an attack of convulsions;
 - g) the Insured driving a motor vehicle without the license required pursuant to applicable laws;
 - h) a failure by the Insured to observe the prohibition on driving motor vehicles, operating machinery and staying at heights during treatment with drugs that affect the ability to concentrate (in accordance with the manufacturer's label);

- i) the Insured being intoxicated or under the influence of alcohol or under the influence of narcotic drugs, psychotropic substances or their substitutes within the meaning of substance abuse prevention regulations;
 - j) the Insured being under the influence of drugs not prescribed by a doctor and taken not in accordance with medical indications;
 - k) the Insured's deliberate actions (suicide, attempted suicide or self-mutilation);
 - l) participation in expeditions and survival camps;
 - m) the Insured's stays in places with extreme climatic or natural conditions (with the exception of participation in trips, no longer than two days, arranged by professional entities that are licensed to arrange such trips. Having the original bill issued by such entities shall be a prerequisite for applying for the benefit);
 - n) engaging in competitive sports, including without limitation the Insured's participation in training, competitions or training camps where the sports discipline practiced provides a source of income;
 - o) engaging in High-risk sports;
 - p) gainful employment or the provision of services related to physical work abroad;
 - q) participation in car races;
 - r) air accidents where the Insured was a passenger of a non-licensed airline;
 - s) the Insured engaging in active service in the armed forces of any nation;
 - t) amateur Winter sports unless an additional Premium was paid;
 - u) amateur Water sports unless an additional Premium was paid;
 - v) amateur Diving using specialized equipment unless an additional Premium was paid;
 - w) amateur mountain and rock climbing unless an additional Premium was paid.
- 4) The Insurer shall not be liable for the medical expenses and Assistance costs that are in a causal relationship with the diseases, including chronic diseases, that existed and were diagnosed before the conclusion of the Insurance Contract and also for the consequences of the aforementioned diseases.
- 5) The Insurer shall not be liable for medical expenses and Assistance costs if the Insured's trip abroad was contraindicated for health reasons and those contraindications were identified in the Insured's medical records.
- 6) The Insurer shall not be liable for the consequences of Sudden illnesses and Accidents and of other events related to the following costs:
- a) medical expenses in excess of those necessary to restore the Insured's health in order to enable his or her Return or Transport to the Country. The decision to qualify medical services as necessary shall be made by the Insurer's consultant physician on the basis of written medical records;
 - b) outpatient treatment, Hospitalization or accommodation where the Insured refuses to Return to the Country despite the Emergency Center physician's decision. Such a decision shall be made by an Emergency Center consultant physician on the basis of the attending physician's opinion.
 - c) outpatient treatment, Hospitalization or accommodation where in the opinion of an Emergency Center physician the start of treatment may be postponed until the Insured's Return to the Country;
 - d) the performance of tests unnecessary for the diagnosis or treatment of the disease, medical check-ups, obtaining medical certificates and carrying out preventive vaccinations;
 - e) trips made for the purpose of planned treatment and complications associated with such treatment;
 - f) psychoanalytical or psychotherapeutic treatment;
 - g) sanatorium treatment, treatment at holiday resorts or addiction treatment centers;
 - h) plastic surgery or cosmetic procedures;
 - i) the treatment of mental disorders, depression, birth defects, venereal diseases and AIDS, even if these were not treated previously;
 - j) the Insured's special nutrition, massages and baths, inhalations, therapeutic gymnastics, irradiation, alternative medicine treatments (even if any of these measures have been recommended by a physician) and other rehabilitation and physiotherapeutic procedures;
 - k) abortions, unless they are performed to save the Insured's life or health and unless these procedures are allowed by the law of the state in which they are performed;
 - l) prosthetic and dental treatment exceeding the equivalent of the limit indicated in the table of benefits and if it was not the result of acute pain or inflammation that required immediate assistance.
- 7) The Insurer shall not cover the costs, including Medical expenses, that are related to, or result from:
- a) epidemics or contaminations if these emerged and were announced before the Insured's Trip abroad;
 - b) the diagnosis of pregnancy and planned prenatal care;
 - c) complications occurring on or after the 32nd week of pregnancy;
 - d) birth occurring after the 32nd week of pregnancy;
 - e) artificial insemination and any other infertility treatment as well as the costs related to the purchase of contraceptives;
 - f) the use of any non-standard services during the stay in Hospital such as the use of radio, television;
 - g) the use of hairdressing or beauty services, etc.;
 - h) other causes listed in points 1)–3).
- 8) The Insurer shall not cover the costs associated with the necessity of early Return to the Country to undergo planned diagnostics or treatment in a situation where the patient did not require treatment to be started abroad and continued urgently in the Republic of Poland, which has been confirmed by an Emergency Center physician.
- 9) The Insurer shall not cover additional costs of Assistance services if the Insured has refused to Return to the Country despite the Emergency Center physician's recommendations.
- 10) The Insurer shall not cover the cost of primary knee ligament repair.

The complete list of insurance cover exclusions and limitations is included in the GTCI.

Withdrawal/Termination of the Contract

The Insured shall not be entitled to withdraw from the Contract or terminate the Contract owing to its short-term nature (from 1 to 29 days).

Rules and Procedure Concerning the Notification of Insured Events

In the case of an insured event occurring abroad, the Insured shall promptly call the Insurer's Emergency Center – Europ Assistance at:

+ 48 22 205 50 55

Europ Assistance Polska Sp. z o. o.
Ul. Wołoska 5 (budynek Taurus)
02-675 Warszawa

Detailed rules and procedures concerning the submission of requests for benefits are set forth in the GTCI.

Rules and Procedures for Submitting and Handling Complaints

To the Insurer:

If the Insured or the person entitled to submit claims does not agree with the Insurer's decisions concerning its refusal to satisfy the claim or concerning the extent to which the claim is to be satisfied or wishes to submit other complaints, he/she may submit via the Emergency Center a request that the case be reconsidered. The request referred to in subpara. 1 shall be considered within 30 days from the date of its receipt by the Emergency Center. Moreover, if the Insured or the person entitled to submit claims does not agree with the Insurer's decisions concerning its refusal to satisfy the claim or concerning the extent to which the claim is to be satisfied, he/she may lodge a complaint with the Insurance Ombudsman acting pursuant to the provisions of the Act of 22 May 2003 on Insurance and Pension Funds Supervision and on the Insurance Ombudsman. Entitled persons shall also have the right to pursue their claims in court.

The Insured shall be entitled to submit a complaint for the Insurer's business activities to the Financial Ombudsman [Rzecznik Finansowy], and shall be entitled to seek assistance in resolving dispute arising in connection with the agreement by referring the dispute to the extrajudicial proceedings conducted by the Financial Ombudsman ([HYPERLINK "http://www.rf.gov.pl/"](http://www.rf.gov.pl/) www.rf.gov.pl).

The Insured shall be entitled to bring the dispute arising in connection with the insurance agreement before the Arbitration Court at the Polish Financial Supervision Authority ([HYPERLINK "http://www.knf.gov.pl/"](http://www.knf.gov.pl/) www.knf.gov.pl).

Moreover, the Insured can obtain advice from the Municipal and District Consumer Ombudsmen [Miejski i Powiatowy Rzecznik Konsumenta].

Europ Assistance S.A. hereby informs, that in case of disputes arising in connection with the insurance agreement, under the Regulation (EU) No 524/2013 of the European Parliament and of the Council of 21 May 2013 on online dispute resolution for consumer disputes and amending Regulation (EC) No 2006/2004 and Directive 2009/22/EC (Regulation on consumer ODR), the policy holder and the insured shall be entitled to choose online dispute resolution method using ODR (Online Dispute Resolution) platform at <https://ec.europa.eu/consumers/odr/main/index.cfm?event=main.home.show&lng=PL>

To the Bank: all complaints related to the Bank's actions shall be submitted to the Bank promptly after being informed of the circumstances that cause the complainant's objections in one of the following forms:

- a) electronically via the Citibank Online banking service, the contact form on the Bank's website or via e-mail: listybh@citi.com;
- b) by phone via the CitiPhone banking service at (+48) 22 692 24 84 (calls charged at the operator's applicable rates) or at 801 32 24 84 (calls cost one call unit + VAT at the operator's rates for each three minutes or part thereof) provided that the Policyholder is able to use CitiPhone (the fee shall be charged in line with the current Table of Fees and Commissions in force at the Bank);
- c) by mail to the following address: Bank Handlowy w Warszawie S.A., Sektor Bankowości Detalicznej Zespół ds. Współpracy z Klientami, Departament Obsługi Reklamacji i Zapytań Klientów, ul. Golezowska 6, 01-249 Warszawa;
- d) at a Bank branch.

The Bank shall consider the complaint and respond to the Customer promptly, but not later than within 30 days. If the subject of the complaint lies with the Insurer, the Bank shall forward the complaint to the Insurer for handling.

Taxation of Benefits

All taxes related to the Contract shall be paid according to the tax law in force at the tax point. As at the date on which the GTCI enter into force, these are regulations on personal and corporate income tax, i.e. the Personal Income Tax Act of 26 July 1991 and the Corporate Income Tax Act of 15 February 1992.

Impact of Insurance on the Availability of Banking Products

Insurance is voluntary and does not impact the availability of the banking products offered by the Bank. The Customer may select an insurer other than that cooperating with the Bank.

Access to Additional Information by the Customer

Additional information about the terms and conditions of insurance may be obtained by the Customer from authorized representatives of the Bank or the Insurer.

Other Important Information

- 1) The funds paid as premium under the "Świat bez Granic" ["World without Borders"] insurance are not a bank deposit and are not guaranteed by the State Treasury or any governmental agencies.
- 2) The "Świat bez Granic" ["World without Borders"] insurance is neither an obligation of, nor guaranteed by, Bank Handlowy w Warszawie S.A., any of its affiliates or subsidiaries or by the Bank Guarantee Fund.