# Expat Visit

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. INSURER:</td>
<td>Würzburger Versicherungs-AG, Bahnhofstr. 11, 97070 Würzburg.</td>
</tr>
<tr>
<td>2. POLICY HOLDER:</td>
<td>BDAE Dienstleistungsgesellschaft mbH.</td>
</tr>
<tr>
<td>3. PARTIES ENTITLED TO INSURANCE:</td>
<td>Natural persons.</td>
</tr>
<tr>
<td>4. INDIVIDUALS INSURABLE:</td>
<td>Parties entitled to insurance who stay abroad for non professional reasons up to 365 days.</td>
</tr>
<tr>
<td>5. CONTRACTUAL BASIS:</td>
<td>General insurance conditions for the Expat Visit (AVB-EV-365/2014), the tariff Expat Visit, the product specifications, the customer information according to the Regulation on Information Obligations for Insurance Contracts (VVG-InfoV), the application and the insurance policy.</td>
</tr>
<tr>
<td>6. AREA OF APPLICATION:</td>
<td></td>
</tr>
<tr>
<td>6.1 HOME COUNTRY IS GERMANY:</td>
<td>Coverage applies worldwide outside of Germany.</td>
</tr>
<tr>
<td>6.2 HOME COUNTRY IS OUTSIDE OF GERMANY:</td>
<td>Coverage applies within the EU including Liechtenstein, Switzerland, Norway, Iceland insofar this country is not the home country of the insured person.</td>
</tr>
<tr>
<td>7. START OF COVERAGE:</td>
<td>On the date indicated in the insurance policy, subject to timely payment. The contract of insurance must be concluded prior to the departure. In case of trips to Germany, the contract can be concluded within 10 days after the entry.</td>
</tr>
<tr>
<td>8. INSURANCE YEAR:</td>
<td>Not applicable.</td>
</tr>
<tr>
<td>9. DURATION OF INSURANCE AGREEMENT:</td>
<td>It is valid for the insured period at most up to 365 days.</td>
</tr>
<tr>
<td>10. TERMINATION OF INSURANCE AGREEMENT:</td>
<td>An early termination of the contract of insurance is admissible when a benefit has been paid or a claim for performance has been filed (see also clause 15 AVB-EV-365/2014 and or clause 9 of the product specifications).</td>
</tr>
<tr>
<td>11. PREMIUM PAYMENTS:</td>
<td>The premium is a daily premium and must be paid immediately after receipt of the insurance policy as a one-time premium for the overall contract term, but in no case prior to the insurance effective date.</td>
</tr>
<tr>
<td>12. DATA ON INSURED PERSON’S STATE OF HEALTH:</td>
<td>None. Please observe the exclusion of benefits in the AVB-EV-365/2014.</td>
</tr>
<tr>
<td>13. BENEFITS:</td>
<td>Medical benefits required for stays in Germany are reimbursed at up to 2.3 times the rate of GOÄ (Medical Fee Schedule), for technical services (Sections A, E and O) up to 1.8 times the rate of GOÄ, for lab services (Number 437 and Section M) up to 1.15 times the rate of GOÄ, for dental treatment up to 2.3 times the rate of GOZ (Dental fee Schedule).</td>
</tr>
<tr>
<td>13.1 OUTPATIENT THERAPY:</td>
<td>Outpatient medical therapy (not for treatment by alternative practitioner) including X-ray diagnostics.</td>
</tr>
<tr>
<td>13.2 INPATIENT TREATMENT:</td>
<td>Inpatient treatment including operations and additional operation charges in hospitals which are under continuous medical management and which work in accordance with scientific methods generally recognized in the Federal Republic of Germany or in the land of residence; treatments within Germany covered following the range of German statutory basic treatment (shared room) without elective treatments.</td>
</tr>
<tr>
<td>13.3 PHARMACEUTICALS, BANDAGES AND REMEDIES:</td>
<td>Pharmaceuticals, bandages and remedies based on medical prescription, not including baths. Medically prescribed massages, medicinal packs and inhalations up to EUR 300 per insurance year.</td>
</tr>
<tr>
<td>13.4 DENTAL TREATMENT:</td>
<td>Painkilling dental treatment incl. dental fillings in simple form up to maximum EUR 500 per insurance year.</td>
</tr>
<tr>
<td>13.5 ARTIFICIAL DENTITION:</td>
<td>Repair of function of artificial dentition. Cost reimbursement for this is 50 % up to EUR 250 per insurance year.</td>
</tr>
<tr>
<td>13.6 INSURANCE BENEFITS FOR PREGNANCY AND DELIVERY:</td>
<td>Pregnancy and delivery, if the pregnancy (fertilisation) has occurred after the insurance effective date and after the expiry of a waiting period of 8 months.</td>
</tr>
<tr>
<td>13.7 MEDICAL AIDS:</td>
<td>Medically required walkers and rent of a wheelchair.</td>
</tr>
</tbody>
</table>
| 13.8 OTHER BENEFITS: | a) Transportation costs to the nearest suitable hospital for inpatient treatment.  
b) Additional expenses  
- for the medically required and prescribed repatriation of an ill insured person from a foreign country to the principal place of residence in his / her home country, provided that a sufficient medical care is not ensured in the foreign country and the repatriation is required in the context of a reimbursed medical treatment. Unless required otherwise due to medical reasons, the most affordable transport mean must be selected. The transportation costs saved through the repatriation are offset against the insurance benefits.  
- for the costs incurred in relation to the transport of an insured person in case of death to the home country or the funeral at the place of death for an amount of up to EUR 10,000. |
14. WAITING PERIOD: 8 months for pregnancy and delivery.

15. DAILY PREMIUM: The minimum premium per person equals to the premium of a 10 day journey.

WORLDWIDE EXCLUDING USA / CANADA: The age of the insured person at the time of the inception date is essential

<table>
<thead>
<tr>
<th>Category</th>
<th>Premium</th>
</tr>
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<tbody>
<tr>
<td>USA / CANADA:</td>
<td></td>
</tr>
<tr>
<td>PERSONS TO 64 YEARS:</td>
<td>EUR 1.10</td>
</tr>
<tr>
<td>PERSONS FROM 65-74 YEARS:</td>
<td>EUR 3.30</td>
</tr>
<tr>
<td>PERSONS FROM 75 YEARS:</td>
<td>EUR 5.50</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Premium</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSONS TO 64 YEARS:</td>
<td>EUR 3.30</td>
</tr>
<tr>
<td>PERSONS FROM 65-74 YEARS:</td>
<td>EUR 9.90</td>
</tr>
<tr>
<td>PERSONS FROM 75 YEARS:</td>
<td>EUR 16.50</td>
</tr>
</tbody>
</table>

15.1 DEDUCTIBLE: No deductible.

16. OTHER MATTERS: No pension reserve fund will be established. You are recommended to take out a deferred insurance policy scheme.

ADDITIONAL ADVICE: The insurance contract applied for is governed by German law, and is to be interpreted exclusively consistent with German law and usage of terminology. This includes, without limitation, the legal concepts and terms contained in the contract, the English translations of which may not be identical with the original German terms in their respective legal understanding. In case of discrepancy between the German version of this contract and the English version, the German version prevails.
1. What is insured?

1. The insured event is a medically required treatment of the insured person due to an acute unforeseeable illness or consequences of an accident incurred while travelling. The insured event starts with the medical treatment and ends when no more treatment is required based on the diagnosis. Insured events also include medically required and prescribed patient repatriation and death. If the treatment must be extended to a disease or consequence of an accident that is not causatively related to the previously treated disease or consequences of an accident, a new insured event is deemed to have occurred.

3. The extent of the coverage results from the insurance policy, the application form, special written agreements and / or the General Terms and Conditions of Insurance as well as the applicable legal regulations in the Federal Republic of Germany. This applies in particular for the legal regulations indicated in the attachment that are an integral part of the insurance agreement according to the insurance conditions.

4. a) The following applies to trips from Germany:

The coverage applies to EU member states, including Liechtenstein, Switzerland, Norway and Iceland. All persons having their principal place of residence outside of Germany can be insured. If one of the listed countries should be the home country of the insured person, coverage does not apply in this country.

c) The country, in which the insured person has been permanently residing for at least the last two years, has to be considered as home country.

5. Coverage applies for the period indicated in the insurance policy, but however up to a maximum of one year for non professional trips abroad. Incentive trips are considered as private trips abroad in this context. Coverage for foreign business and industrial fair guests in the Federal Republic of Germany applies for the period indicated in the insurance policy but in no case for more than 30 days. Employees of companies, authorities and associations can be insured. Persons performing professional physical activities cannot be insured, irrespective of their profession and in spite of premium payments.
1. **No performance obligation applies**
   c) for treatments on the occasion of a professional activity abroad;
   d) for treatments of affective disorders or mental diseases as well as for
      psychosomatic treatments (e.g. hypnosis, autogenic training) and psycho-
      therapy;
   e) hypnosis, autogenic training

2. **Additional expenses**
   a) for the medically required or prescribed repatriation of an ill insured
      person from a foreign country to his / her permanent place of residence
      in his / her home country, if a sufficient healthcare cannot be ensured in the
      foreign country and the repatriation is required in the context of an insu-
      red treatment process. Unless otherwise required due to medical reasons,
      the most affordable transport mean must be selected. The transport
      costs saved through the repatriation are offset against the insurance
      benefits.
   b) for the costs incurred due to the transporting in case of the death of
      an insured person to the home country or the funeral at the place of
      death up to an amount of EUR 10,000.

5. **WHICH LIMITATIONS APPLY TO THE PERFORMANCE OBLIGATION?**
   1. No performance obligation applies
      a) for treatments that could prior the beginning of the trip reasonably
         be expected to incur in case of performing the trip as planned, unless the trip
         was required due to the death of the spouse or a first-degree relative;
      b) for diseases and consequences as well as accident consequences, for which
         treatment the trip abroad is made;
      c) for treatments on the occasion of a professional activity abroad;
      d) for treatments of affective disorders or mental diseases as well as for
         psychosomatic treatments (e.g. hypnosis, autogenic training) and psycho-
         therapy;
      e) for the purchase of adjuvants, like e.g. glasses, contact lenses, insoles, pros-
         theses, etc.;
      f) for health damages and death due to acts of war and civil commotion.
         Coverage however applies if the insured person on a trip abroad is affected
         by unforeseeable acts of war or civil war. This coverage expires on the
         seventh day after the beginning of a war or civil war on the territory of
         the country in which the insured person is located;
      g) diseases or accidents resulting from wilful acts including suicide or attempt-
         ed suicide and addiction, like alcohol, drugs etc.; and consequences of such
         diseases or accidents, as well as for detox and physical withdrawal treat-
         ments;
      h) for accommodation due to nursing dependency or custody;
      i) for cure and sanatorium treatments as well as rehabilitation measures;
      j) for examination or treatment methods and medicaments that are generally
         scientifically accepted neither in the respective country of stay nor domes-
         tically;
      k) for dental treatments exceeding analytic treatments, repairs of dental
         and provisional prostheses as well as new prostheses including coronals, dental
         cosmetics as well as orthodontics.
   2. If a medical treatment or other measure agreed for the performance exceeds
      the medically required extent or if the required remuneration is not appropri-
      ate for the conditions in the travel destination country, Würzburger is entitled
      to reduce the performance to a reasonable amount.
   3. Würzburger reimburses the treatment costs up to the date of transportability,
      if a repatriation cannot be performed until the end of the trip due to the insu-
      red person's transport incapacity, but in no case for more than 90 days from
      the beginning of the treatment.

6. **WHICH INSURANCE BENEFIT WILL BE PAID?**
   1. Würzburger is obligated to performance if the original invoice is submitted and
      the required evidence is provided. These documents become property of
      Würzburger. If the original documents have been provided to another insurer
      for reimbursement, copies of the invoices shall suffice, provided that the insur-
      er has notified his benefit or rejection on such copies. German translations of
      all documents in foreign languages that are relevant for the insurance benefit,
      must be submitted upon our request.
   2. All documents must indicate the name of the treating healthcare professional,
      the first name(s) and the surname as well as the date of birth of the treated
      person, the description of the disease and the individual medical services with
      treatment dates. The prescriptions must clearly indicate the prescribed medica-
      ment, the price and the receipt annotation. In case of dental treatments the
      documents must indicate the designation of the treated teeth and the perfor-
      med treatment.
   3. The evidence of a medically required repatriation requires a medical confirm-
      ation according to the medical requirement. In addition to the medical requirement of
      the repatriation, the medical confirmation must include the correct designation of
      the disease.
   4. The assertion of claims for transport or funeral costs in case of death requires
      an official or medical confirmation of the cause of death.
   5. Würzburger is entitled to make payments to the bearer or remitter of proper
      evidence documents unless Würzburger has reasonable doubt with regards to
      the legitimation of the bearer or remitter.
   6. The costs incurred in foreign currency are converted into euro based on the
      applicable daily exchange rate on the date of receipt of the documents by
      Würzburger. The daily exchange rate for traded currencies is the official
      Frankfurt exchange rate. The daily exchange rate for non-traded currencies is
      the exchange rate according to the “World Currencies” publications of
      Deutsche Bundesbank, Frankfurt (Germany) according to the most recent sta-
      tus, unless the insured person submits a bank document to evidence that he / she
      has acquired the currencies required to pay the invoices at a less advanta-
      geous exchange rate due to changes of the monetary parities.
   7. Costs of the remittance of insurance benefits – with the exception of bank
      transfers to a domestic account – can be deducted from the benefit payment.
   8. Insurance benefit claims can neither be assigned nor mortgaged.

7. **WHEN DOES COVERAGE EXPIRE?**
   1. Coverage expires – also for pending insured events – upon the end of the stay
      abroad and / or termination of the insurance relationship or upon completion
      of the repatriation according to clause 4, paragraph 4, section 2a, but in any
      case upon the expiry of the insurance.
   2. If the insured person cannot return during the term of coverage due to medi-
      cal reasons, the performance term is extended by up to 90 days from the
      beginning of the treatment, as long as the insured person cannot return home
      without incurring health risks.

8. **WHICH REGULATIONS APPLY TO PREMIUM PAYMENTS?**
   The policy holder and / or the insured person has to pay the initial or one-time pre-
   sum immediately upon receipt of the insurance policy, but in no case before the
   insurance effective date indicated on the insurance policy. The renewal premiums
   come due on the dates agreed. If the initial or one-time premium is not paid punc-
   tual when due, the provisions of §37 of the German Insurance Contract Act (VVG)
   apply, i.e. Würzburger is entitled to withdraw from the contract. In case of a late
   payment of any renewal premium, the provisions of §38 of the German Insurance
   Contract Act (VVG) apply.

9. **WHAT IS TO BE CONSIDERED IN CASE OF AN INSURED EVENT (OBLIGATIONS)?**
   1. The insured person is obligated to avoid any actions that could result in an
      unnecessary cost increase.
   2. The policy holder and / or insured person has to pass in all evidence documents
      the legitim ation of the bearer or remitter.
The policy holder and / or the insured person has to pass in declarations of intent and notifications to Würzburger in writing. Insurance brokers are not entitled to accept these documents.

15. HOW CAN THE CONTRACT BE TERMINATED AFTER AN INSURED EVENT?

1. Both parties can terminate the contract after the occurrence of an insured event. The termination must be notified in writing and submitted within one month after the closure of an insured event. Würzburger must observe a notice period of one month. Our notice of termination becomes effective after the end of the current trip in any case. In case of a termination by the policy holder and / or the insured person, the latter can request the termination to become effective immediately or at a later date, but in any case upon expiry of the current insurance period.

2. If Würzburger has terminated the contract, we are obligated to reimburse the corresponding proportion of the premium for the unexpired insurance period.

16. WHICH COURT IS COMPETENT?

The legal venue for any legal actions against Würzburger resulting from the contract of insurance is the competent court of the registered office of Würzburger or the competent courts at the address of the company’s relevant branch offices. In addition, legal actions can be filed with the competent court at the place of residence of the policy holder and / or the insured person or – in default of such place of residence – the habitual residence on the date on which the claim is filed. Legal actions against the policy holder and / or the insured person resulting from the contract of insurance must be filed with the competent court at the place of residence or – in default of such place of residence – the habitual residence of the policy holder and/or the insured person.

17. ADDRESS OF WÜRZBURGER

Würzburger Versicherungs-AG, Bahnhofstr. 11, 97070 Würzburg

GENERAL INFORMATION
SECONDARY LIABILITY CLAUSE

To the extent that third parties are liable in case of an insured event or an indemnification can be claimed from other insurance contracts, such performance obligations prevail. This applies in particular to benefits from legal health insurance and subsidies. If damages can be claimed from other insurance contracts, you are entitled to freely select which insurer you inform of the insured event.

Würzburger Versicherungs-AG / Bahnhofstraße 11 / 97070 Würzburg
phone +49-931-27 95-0 / fax +49-931-27 95-291
Place of business: Würzburg, Amtsgericht Würzburg HRB 3500
Chairman of the supervisory board: Prof. Dr. Ronald Frohne
Management board: Dr. Klaus Dimmer (Chairman), Pavel Berkovitch
The following information serves to provide a first overview of the services offered to you. This information however is not exhaustive. The complete contract content is based on the application, the insurance policy and the General Terms and Conditions of Insurance. Please read the contract provisions carefully.

1. WHICH TYPE OF INSURANCE DO WE OFFER TO YOU?
We offer you a health insurance for illness, accidents and other events specified in the conditions occurring during a trip abroad. This insurance is based on the general insurance conditions for international health insurances (AVB-EV-365/2014) as well as any other conditions and conventions mentioned in the application that are applicable to the selected product.

2. WHICH RISKS ARE INSURED AND WHICH ARE EXCLUDED?
The health insurance covers the expenses as well as other agreed services for the required medical treatment for an acute illness or accident consequences while staying abroad.

   a) Which trips are covered by the insurance?
   Coverage applies during the insurance term up to one year for private stays abroad. For more details please see clause 1 of the AVB-EV-365/2014.

   b) Where does the coverage apply?
   The coverage extends to foreign countries, i.e. the territory outside of Germany for all persons having their principal place of residence in Germany. For foreign guests, coverage also applies to EU member states including Liechtenstein, Norway, Switzerland and Iceland, with the exception of the insured person’s home country and F or the country in which the insured person has its permanent or habitual place of residence.
   For more details, please see clause 1 of the AVB-EV-365/2014.

3. WHICH PREMIUM LEVEL DOES YOUR CONTRACT OF INSURANCE HAVE, WHEN DO YOU HAVE TO PAY AND WHICH CONSEQUENCES DOES AN NON-PAYMENT OR A LATE PAYMENT HAVE?
The insurance premium for the respective insured trip is indicated in the application or the insurance policy. Please pay the first or one-time premium immediately upon receipt of the insurance policy. If you grant a direct debit authorisation, please make sure to have a sufficient balance on your bank account. The coverage for the booked trip will become effective upon payment of the premium. If you fail to pay the first or one-time premium punctual culpably, we are entitled to withdraw from the contract until you have paid the outstanding amount. In this case, coverage applies from the date of the receipt of the late payment by us only.
   For more details, please see clause 8 of the AVB-EV-365/2014.

4. WHICH BENEFITS ARE EXCLUDED?
We cannot insure all potential events as this would require us to demand a significantly higher premium. We therefore have excluded some events from the coverage. The health insurance in particular does not cover medical treatments that were clearly foreseeable to be required upon the departure for the trip as well as medical treatments for diseases or accident consequences for which the trip abroad is made.
   This list is not exhaustive. For details and a complete list of the reasons for exclusion, please see clause 5 of the AVB-EV-365/2014.

5. WHAT ARE YOUR OBLIGATIONS IN CASE OF A CONTRACT CONCLUSION AND WHAT ARE THE CONSEQUENCES OF BREACHING THESE OBLIGATIONS?
You are obligated to answer the questions in the application form accurately and completely in order to enable us to check your application properly. This applies in particular to all trip information and the age of the insured persons.
   If you fail to meet this obligation, we are entitled to an early termination of the contract and your coverage will expire. We are furthermore entitled to adapt the insurance premiums.
   For more details, please see the clauses 3 and 10 of the AVB-EV-365/2014.

6. WHAT ARE YOUR OBLIGATIONS DURING THE CONTRACT TERM AND WHAT ARE THE POTENTIAL CONSEQUENCES OF BREACHING THESE OBLIGATIONS?
Please read clause 3 of this product specifications for more detailed information on this topic.

7. WHAT ARE YOUR OBLIGATIONS IN CASE OF AN INSURED EVENT AND WHAT ARE THE POTENTIAL CONSEQUENCES OF BREACHING THESE OBLIGATIONS?
You are obligated to avoid anything that could lead to an unnecessary cost increase. You are obligated to immediately inform us about the occurrence of an insured event in writing. You are obligated to provide any information required to determine the insured event and the performance extent upon request when applying for insurance benefits, including the invoices and medical reports, e.g. the exemption of your physicians from their professional secrecy obligation or – if requested by us – agree to an examination by a physician selected by us.
   A failure to meet these obligations can lead to a complete or partial loss of the coverage.
   For more details, please see the clauses 9 and 10 of the AVB-EV-365/2014.

8. WHEN DOES COVERAGE BECOME EFFECTIVE? WHEN DOES COVERAGE EXPIRE?
Coverage becomes effective on the date mentioned in the insurance policy subject to a timely payment of the premium. The requested effective date of your coverage is specified in clause 3 of this product specification, which also includes information on the contract term and expiry.
   The contract expires without notice upon the end of the stay abroad, but however on the expiry date mentioned in the insurance policy by the latest.
   For more details, please see clause 7 of the AVB-EV-365/2014.

9. HOW CAN YOU TERMINATE YOUR CONTRACT?
Both parties are entitled to an early termination, even if a service has been delivered or you have filed a performance claim against us. The contract can be terminated within one month from the end of the negotiations for an indemnification.
   For more details, please see clause 15 of the AVB-EV-365/2014.
WÜRZBURGER VERSICHERUNGS-AG

1. Identity, address for service of the insurer and responsible supervisory authority

Würzburger Versicherungs-AG is a member of the Versicherungsombudsmann e.V. Würzburg, telefax: 0931.2795-290; e-mail: info@wuerzburger.com

2. Principal business activity of the insurer

Würzburger Versicherungs-AG is a member of the Versicherungsombudsmann e.V. Würzburg, telefax: 0931.2795-290; e-mail: info@wuerzburger.com

3. Data on existence of a guarantee found (or the like)

For your insurance no guarantee found or the like are existing.

4. Essential features of contractual provision

Application, insurance policy and possible supplements are the basis of the insurance contract. According to the requested extent of coverage general insurance conditions, special conditions and additional clauses to the appropriate products are valid and maybe also agreements with you and legal provisions. Significant for the scope of the conditions is the selected extent of coverage according to application, insurance policy and possible supplements. Details of contract basis can be inferred from the product information sheet.

5. Essential features of insurance benefit

The insured type of services results from application and insurance policy. The compensation is due if our obligation is diagnosed because of cause and amount. After that payment of compensation is effected within two weeks. Details of insured services can be inferred from the product information sheet.

6. Total price of insurances (premium)

The payable total price results from the scope of the chosen insurance coverage and can be inferred from the application. It also contains insurance tax and maybe fees for installment payment. Details of price and its components can be inferred from the product information sheet.

7. Additional incurred costs

Except of possible dunning charges and costs in case of dishonor of direct debits within a direct debiting service despite granted debit order no other fees or costs are arising. If you phone us, send a fax or an e-mail prices of your telecoms or mobile communications provider will be valid.

8. Payment and fulfillment

The first or only premium is due immediately after conclusion of the insurance contract (regardless from existing of the right to cancel) but not before the commencement of insurance mentioned in the insurance policy. All other premiums (subsequent premiums) have to be paid to the agreed due date. Insurance coverage starts with payment of the owed premium (first premium) however not before the agreed time of the commencement of insurance. If the first premium is not paid on time but later commencement of insurance starts then. This is not valid if you prove that you are not responsible for non-payment or delayed payment.

9. Period of validity for offers

The offer- and application documents provided are based on premiums, insurance benefits, insurance conditions and customer information which are valid at the time of delivery.

10. Realization of the contract

The insurance contract is been realized by two corresponding declarations of intention. Your declaration of intention is the application or in case of a contract of distance selling act (via telephone, via internet) your declaration of intention in this connection, our declaration of intention is the insurance policy. You are bound to your contract for 14 days (application acceptance period). The contract is becoming legal with arriving of the insurance policy at you.

11. Right to cancel

Your contractual statement can be revoked without giving any reasons by means of a clear declaration in writing (e.g. letter, fax or e-mail) within 14 days. The period of time starts after receiving insurance policy, contractual provisions including general insurance conditions, further information according to § 7 Absatz 1 and 2 of the German law on insurance contract in combination with §§ 2 to 4 of VVG-directive contractual rule and this caution in writing. For contracts of electronic business dealings (§ 312 Absatz 1 Satz 3 of the German civil code) however not before fulfillment of our duties according to § 312 Absatz 1 Satz 1 of the German civil code in combination with Article 266 c of the introductory act to German civil code. For protection of the period of time for revocation the punctual dispatch of the revocation is sufficient. The revocation has to be addressed to: WÜRZBURGER VERSICHERUNGS-AG, Bahnhofstraße 11, 97070 Würzburg

In case of a revocation via e-mail it has to be addressed to the following e-mail address: widerruf@wuerzburger.com

Consequences of revocation

In case of an effective revocation your insurance coverage ends and we will reimburse the omitted part of the premium for the time after receiving of revocation provided that we have agreed that insurance coverage had started before ending of the period of time for revocation. In this case the part of the premium for the time until receiving of the revocation is kept at our company. Here it is about an amount of the number of days for which insurance coverage was existing, multiplied by 1/30 of the monthly amount. The reimbursement of repaid amounts occurs immediately but 30 days after receiving of revocation at the latest. In case that insurance coverage begins not before end of the period of time for revocation the effective revocation results in grant back of received services and drawn use (e.g. interest).

Special advices

Your right to cancel expires when the contract is completely performed by both by you and also by us at your explicit request before you have exercised your right to cancel.

End of information on rights of revocation
# HEALTH INSURANCE FOR NON PROFESSIONAL JOURNEYS UP TO 365 DAYS

## EXPAT VISIT APPLICATION

### APPLICANT / PARTY ENTITLED TO INSURANCE:

<table>
<thead>
<tr>
<th>Surname:</th>
<th>First name(s):</th>
<th>Date of birth:</th>
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<tr>
<th>Street, house number:</th>
<th>Addition:</th>
<th>Current occupation:</th>
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<table>
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<tr>
<th>Postcode: D-</th>
<th>City:</th>
<th>No. of membership, if existing:</th>
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<tr>
<th>Phone:</th>
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### PAYMENT DETAILS: (SEPA direct debit mandate stated below)

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<tr>
<th>Bank:</th>
<th>Acc.-No.:</th>
<th>Sort Code:</th>
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</thead>
<tbody>
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</tbody>
</table>

Account holder, if not applicant:

Signature account holder:

### INFORMATION ON ADDITIONAL HEALTH INSURANCE:

Do you have additional health insurance?  

- [ ] Non  
- [x] Yes, with:  

Insurance no.:

### THE FOLLOWING PERSONS ARE TO BE INCLUDED IN THE INSURANCE: (PLEASE SPECIFY EACH INSURED PERSON!)

<table>
<thead>
<tr>
<th>Insured person</th>
<th>Surname, First name(s)</th>
<th>Sex*</th>
<th>Nationality</th>
<th>Date of birth</th>
<th>Passport number</th>
<th>Planned country of residence</th>
<th>USA / Canada*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>yes</td>
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</tr>
</tbody>
</table>

### CALCULATION OF PREMIUMS:

<table>
<thead>
<tr>
<th>Insured person</th>
<th>Start of insurance including (Day / Month / Year)</th>
<th>End of insurance up to and including (Day / Month / Year)</th>
<th>Travel data (from / till)</th>
<th>Number of days (maximal 365 days)</th>
<th>Without USA / Canada from EUR 1.10 per day</th>
<th>With USA / Canada from EUR 3.30 per day</th>
<th>Once-only premium to pay</th>
<th>TOTAL ONCE-ONLY PREMIUM:</th>
</tr>
</thead>
<tbody>
<tr>
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<td>3.</td>
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<td>EUR</td>
</tr>
</tbody>
</table>

(*please tick) (** Earliest one day after the insurer has received the applications)

Important note: The application, the insurance confirmation and the General Terms and Conditions of Insurance for the Expat Visit (AVB-EV-365/2014) are essential for the contract. By signing the agreement, you confirm the timely receipt prior to filing the application of the AVB-EV-365/2014, the product specifications and the the customer information according to the Regulation on Information Obligations on the contract of insurance in written form. You can withdraw your declaration of agreement within 14 days from the date of receipt of the insurance policy. In case of deliberate incorrect information, the insurer is entitled to withdraw from the contract according to §19 of the German Insurance Contract Act. **SEPA direct debit mandate:** I hereby authorise Würzburger Versicherungs-AG to debit the premiums from my account. I hereby authorise my bank to redeem the debit notes presented by Würzburger Versicherungs-AG. Important note: As a part of my rights I can claim a refund of the debited amount within eight weeks from the date on which my account was debited. Terms and Conditions of my agreement with my bank apply. I will be informed in advance - latest one calendar day – about the SEPA direct debit under specification of the due date. Recipient of the payment: Würzburger Versicherungs-AG, Creditor Identifier: DE30ZZZ00000030954, Mandate Reference follows separate.

Place, date:  

Signatures:  

Applicant / Insured person(s)

Insurer: Würzburger Versicherungs-AG, Bahnhofstr. 11, D-97070 Würzburg, Policy holder: BDAE Dienstleistungsgesellschaft mbH