

Policy No: 60-102433

Renewal of Policy No:

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**Activity code:** 

# **POLICY**

## Accident insurance of amateur athletes

## INFORMATION ABOUT THE INSURANCE CONTRACTOR/INSURED

Policyholder: MM SKI-SPORT d.o.o. Telephone number:

Address: Konak Maglić 402, Kopaonik, Raška Migration-NA E-mail:

Place: Kopaonik 36354

**TIN**: 107729550

**Insured:** According to the list

#### **CONTRACTUAL ELEMENTS**

Inception date: 01. Dec. 2021. 24:00 Expiry date: 01. Apr. 2022. 24:00 Duration of insurance: Short-term

Payment dynamics: One-time Premium maturity: 01. Dec. Place of insurance: According to the

provisions of special conditions

Currency: RSD Tariff/Group/Code: 010701

#### PERSONAL ACCIDENT INSURANCE POLICY

## Table I – Hazard class sports III – Age of the insured ≥ 14 - Skiing

| Insured events                       | Peril Class        | Sum insured | Premium per person | Number of<br>persons | Risk premium |
|--------------------------------------|--------------------|-------------|--------------------|----------------------|--------------|
| Accidental death                     | III                | 100.000,00  | 189,0000           | 50                   | 9.450,00     |
| Permanent disability due to accident | III                | 200.000,00  | 756,0000           | 50                   | 37.800,00    |
| Medical cost due to accident         | III                | 50.000,00   | 250,0000           | 50                   | 12.500,00    |
| Bone fracture to accident            | Ш                  | 20.000,00   | 250,0000           | 50                   | 12.500,00    |
| Pre                                  | mium per person:   |             |                    |                      | 1.445,0000   |
| Premiu                               | m per all persons: |             |                    |                      | 72.250,00    |
| Bonus 20%, CRn <                     | 10%, CRt < 65%:    |             |                    |                      | -14.450,00   |
| Discount for the number of insurar   | nts from: 301-500: |             |                    |                      | -5.780,00    |
| Loyalty discount – re                | newed insurance:   |             |                    |                      | -2.601,00    |
|                                      | Total discount:    |             |                    |                      | -8.381,00    |
| Total pr                             | emium per policy:  |             |                    |                      | 49.419,00    |
| Premiu                               | m payment total:   |             |                    |                      | 49.419,00    |

Based on the submitted information on the average number of skiers on the policy, the average number of skiers is stated due to the technical impossibility of displaying the total number of skiers as in previous policies. For the period from 01.12.2021. valid until 01.04.2022. year, based on the average number of skiers, the expected number of school students is 500, as in previous years. The insurance premium was calculated for the period from December 1, 2021. years until 01.04.2022. in the amount of 49.419.00 RSD..

### Terms and condition:

General terms and conditions for personal accident insurance dated 26 April 2021 (OUPNS IV/2021).

Disability table for determining permanent loss of general working capacity due to an accident dated 26 April 2021 (TI IV/2021)

Special conditions for insurance of amateur athletes from the consequences of an accident dated 26 April 2021 (PUCSO IV/2021)

#### Clause:

The contracting parties hereby agree that the risk coverage based on this contract commences upon effecting the insurance premium payment or the agreed part thereof, unless it is agreed that the insurance premium falls due after the contract conclusion.

#### Premium payment and commencement of insurance coverage

The contracting parties hereby agree that in case of failing to make the insurance premium payment, the contract shall be terminated within 30 days of the contract insurance inception date. The insurance contract always commences at 24.00 hours of the day that is indicated in the policy as the insurance inception. The Insurer's obligation starts at 24.00 of the next day following the payment of the first premium instalment, if it is agreed to pay annual or sub-annual premiums, yet the obligation does not start before the inception of the insurance contract. In case of the insurance contract termination due to failure in premium payment, the Insurer is not entitled to request the insurance premium to be collected since the insurance coverage has not been provided.

The Contract will be valueless if, at the time of its conclusion, the Policyholder/the Insured knew that the insured event had already occurred and failed to inform the Insurer thereof.

#### Submission of data

By signing this document, the Policyholder/the Insured guarantees that the data/information it provided to the Insurer regarding the conclusion of the Insurance contract is correct and accurate and further undertakes to inform the Insurer in due form and in due time about each data change relevant for the respective Insurance contract/policy. At the same time, the insurance Policyholder - the signatory confirms with his signature that he is aware of the consequences of intentional and negligent provision of incorrect information and that he accepts responsibility for the information given as well as that he bears the damage due to the provision of incorrect information. In case of address (and contact address) changes, the contracting parties hereby undertake to inform one another thereof and to have it mandatory for the insurance beneficiary to also indicate the policies to which the respective changes refer.

#### Personal Date Protection

By signing this document, the Insurance Policyholder / Insurant confirms that he/she is familiar with The Information on personal data processing, which is received from the Insurer and undertakes to acquaint the Insured/s with the contents thereof, if he differs from the Insurance Contractor.

The Information on personal data processing is available on the website www.uniqa.rs The Insurer delivers the Information on personal data protection together with the insurance contract.

By signing this document, the Policyholder undertakes to acquaint the Insured/s with the contents thereof. The Policyholder undertakes to, within 15 days of the day of signing this document, provide the Insurer with the evidence that it has acquainted the Insured with the contents thereof.

By signing this Policy, I confirm that, before concluding the insurance contract, I have been presented the text and content of the document: "Information for Policyholders and the insureds: Collective accident insurance during and out of the regular occupation" by UNIQA neživotno osiguranje a.d.o. Beograd, and that the text thereof was handed to me.

By signing this Policy, the Policyholder confirms that he has been provided with and that he is fully, without objections and ambiguities, aware of the provisions of General terms and conditions for personal accident insurance dated 26 April 2021 (OUPNS IV/2021), Disability table for determining permanent loss of general working capacity due to an accident dated 26 April 2021 (TI IV/2021), Special conditions for insurance of amateur athletes from the consequences of an accident dated 26 April 2021 (PUCSO IV/2021)

Pursuant to Article 6 of the Law on non-life insurance premium taxes, the Insurer does not calculate and does not charge any insurance premium tax.

This policy is valid bearing the scanned electronic stamp and signatures of the persons authorized to sign the Policy on behalf of the Insurer, which have the same probative force and legal effect as the manu propria and original stamp have.

NOTE: This is a mere translation of the original Serbian wording; however, in case of any discrepancies in the meaning the Serbian wording prevails at all times

|  | On behalf of the Insurer | On behalf of the Policyholder |
|--|--------------------------|-------------------------------|
|--|--------------------------|-------------------------------|