

Important Notice! This translation is provided for informational purposes only, to facilitate understanding of the insurance terms, conditions, and product. It does not constitute a legal document and may not be relied upon as such.

Увага! Переклад надано з інформаційною метою для покращення розуміння умов страхування та продукту, не може бути використаний як юридичний документ».

**Comprehensive Insurance Program under the Insurance For Persons Traveling in Ukraine and/or Temporarily Staying in Ukraine
(by crossing the state borders of Ukraine)
"MANDRY+"**

These Terms and Conditions are effective as of 24 July 2025.

1. GENERAL PROVISIONS

1.1. The comprehensive insurance program for persons traveling in Ukraine and/or arriving in Ukraine for a temporary stay (by crossing the state borders of the country) has been developed in accordance with the Civil Code of Ukraine, the Law of Ukraine "On Insurance," regulatory legal acts of the National Bank of Ukraine, and the General Terms and Conditions of Comprehensive Insurance product "Comprehensive Insurance for Persons Traveling within Ukraine or Traveling Abroad (by crossing the state borders of Ukraine), or Arriving in Ukraine or Another Country for a Temporary Stay (by crossing the state borders of the respective country)" (hereinafter referred to as the "General Terms and Conditions"), which are available on the Insurer's website at:

https://ingo.ua/cms/image/uploads/Zagalni_umovi_kompleksnogo_strahovogo_produktu_Kompleksne_Stra_huvannya_osib_yaki_podorozhuyut_abo_pribuvayut_v_krayinu_na_timchasove_perebuvannya_981ee435dd.pdf?v=1719494977582, hereinafter referred to as the "Insurance Program",

1.2. This Comprehensive Insurance Program for the insurance product for persons traveling in Ukraine and/or arriving in Ukraine for a temporary stay (by crossing the state borders of the country) (hereinafter referred to as the "Insurance Program") is a public part of the Comprehensive Insurance Contract for persons traveling abroad (by crossing the state borders of Ukraine) and/or arriving in another country for a temporary stay (by crossing the state borders of the country) (hereinafter referred to as the "Insurance Contract" or the "Contract").

1.3. The Contract is concluded in the form of an electronic document in the manner prescribed by the Law of Ukraine "On Electronic Commerce" by joining the Program, which is posted on the Insurer's website www.ingo.ua.

1.4. The Insurance Contract is concluded:

- on the basis of the License (without number) for direct insurance activities, issued by the National Bank of Ukraine on April 26, 2024, under the following insurance classes: Insurance Class 18 – "Insurance of expenses related to providing assistance to persons who found themselves in a difficult situation while traveling", Insurance Class 1 – "Accident Insurance (including in the event of industrial injury and occupational, sease)", Insurance Class 13 – "Insurance of other liability (except for those specified in Classes 10, 11, 12)", Insurance Class 7 – "Goods-In-Transit Insurance [including cargo, baggage (cargo-luggage)]", Insurance Class 16 – "Insurance of other financial risks (except for those specified in Classes 14, 15)". The license and relevant information are available at: <https://ingo.ua/publicna-ta-finansova-informacziya>.
- in accordance with the current legislation of Ukraine, including the Civil Code of Ukraine, the Law of Ukraine "On Insurance," the Law of Ukraine "On Electronic Commerce," the Law of Ukraine "On Electronic Trust Services," and other regulatory legal acts of the National Bank of Ukraine;
- based on the Insurance Program;
- in accordance with the General Terms and Conditions.

1.5. The subject matter of the Insurance Contract is the transfer by the Insured – an individual or legal entity (hereinafter referred to as the "Insured") – for a fee, of the risk associated with the object of insurance, to the Insurer, on the terms specified in this Contract and in the General Terms and Conditions of the comprehensive insurance product "Comprehensive Insurance of Persons Traveling in Ukraine and/or Traveling Abroad (by Crossing the State Borders of Ukraine) and/or Arriving in Ukraine or Another Country for a Temporary Stay (by Crossing the State Borders of the Country)" (hereinafter referred to as the "General Terms and Conditions of Insurance").

1.6. The Insurance Contract consists of this Program (public part) and the Certificate (individual part), which

are integral parts of the Insurance Contract and cannot exist separately.

1.7. Prior to concluding the Insurance Contract, the Insured must familiarize themselves with this Insurance Program, information regarding the financial service, which is posted on the Insurer's website <https://ingo.ua>, the General Terms and Conditions, and confirm consent to the processing of personal data.

1.8. To conclude the Insurance Contract, the Insured, having reviewed the Insurance Program:

1.8.1. selects the desired insurance conditions, including, but not limited to, the cost of insurance coverage (calculated using an online calculator) and other criteria as specified in the electronic form/application (hereinafter referred to as the "Form");

1.8.2. provides the Insurer with information, or enters information in the Form, including all mandatory fields, regarding themselves: surname, first name, patronymic (if any), date of birth, address, series (if any) and number of passport or other identity document, taxpayer registration number (if any), current mobile phone number, and current email address for communication with the Insurer;

1.8.3. provides information for identification of the object of insurance, sufficient to uniquely identify such object in accordance with the Form;

1.8.4. provides information for identifying the Beneficiary, including surname, first name, patronymic (if any), date of birth, and, if applicable, other data requested by the Insurer for the identification of the Beneficiary, including address, series and number of passport or other identity document, and taxpayer registration number.

1.9. Completion of the actions specified in clauses 1.7. – 1.8. constitutes a Statement by the Insured of their intention to conclude (accept) the Insurance Contract.

1.10. On the basis of the Insurance Application received via the information and telecommunications system, or by other available means, the Insurer prepares a proposal to conclude an Insurance Contract (hereinafter referred to as the "Proposal") and sends it to the Insured as a commercial electronic message within the information and telecommunications system. The Proposal is valid until the date specified therein.

1.11. Upon acceptance of the Proposal by the person intending to conclude the Insurance Contract, the Insured and the Insurer sign the Insurance Contract in the form of an electronic document.

1.12. The fact of concluding the Insurance Contract is certified by the Certificate.

1.12.1. The Contract by the Insured shall be signed in accordance with Section 9 "Procedure for Concluding an Insurance Contract" of the General Insurance Terms and Conditions.

1.12.2. After signing the Contract, the Insured is obliged to pay the insurance premium under the conditions specified in clause 3.6 of the Certificate.

1.13. Upon receipt of the copy or copies of the Certificate (individual part of the Contract) signed by the Insured, an authorized representative of the Insurer signs the individual part of the Insurance Contract with a qualified electronic signature (QES), indicating the qualified time stamp and date of its conclusion.

1.14. The copy of the Insurance Contract (individual part) signed by both Parties shall be delivered to the Insured in a format that prevents any alteration of its content, to the email address or telephone number specified by the Insured, within 24 hours of signing with a qualified electronic signature by the Insurer's authorized representative, and in any case no later than the commencement of the Contract term.

1.15. The Insurance Contract shall be considered concluded once the Insured joins the Insurance Program and shall be valid subject to payment of the insurance premium in the amount and within the terms specified in clauses 3.5 and 3.6 of the Certificate.

1.16. The Parties agree that the sending of the Certificate by the Insurer in electronic form constitutes proper delivery of the Insurance Contract to the Insured.

1.17. In matters not regulated by the Insurance Contract, the Parties shall be guided by the General Terms and Conditions posted on the Insurer's website <https://www.ingo.ua>, the provisions of the Civil Code of Ukraine, the Law of Ukraine "On Insurance," and other applicable legislation of Ukraine.

1.18. The Insurance Contract shall be amended or supplemented only with the mutual written consent of the Insurer and the Insured.

1.19. Any amendments and supplements made to the Insurance Contract after its conclusion shall be formalized by Supplementary to the Contract.

2. INSURANCE CONDITIONS

2.1. OBJECT OF INSURANCE

2.1.1. The object of insurance is defined for each insurance class under the General Conditions of the insurance product:

2.1.1.1. For Insurance Class 18 – "Insurance of expenses related to the provision of assistance to persons who found themselves in a difficult situation while traveling": the object is the life, health, and working capacity of the Insured Person, the impairment of which causes or may cause expenses for medical care, medical transport, or other transport services incurred by the Insured Person during the trip or temporary stay within the territory specified in the Insurance Contract (hereinafter referred to as medical and other expenses).

2.1.1.2. For Insurance Class 1 – “Accident Insurance (including industrial injury and occupational disease)”: the object is the life, health, and working capacity of the Insured Person, which may be impaired as a result of an accident occurring during the trip or temporary stay within the territory specified in the Insurance Contract (hereinafter referred to as the accident).

2.1.1.3. For Insurance Class 13 – “Insurance of Other Liability (except for those specified in classes 10, 11, 12)”: the object is the liability of the Insured Person to indemnify for damage to the life, health, or property of a third party caused by the Insured Person’s negligence, provided that the damage to property is recorded by competent authorities, while staying within the territory specified in the Contract (hereinafter referred to as the liability).

2.1.1.4. For Insurance Class 7 – “Goods-In-Transit Insurance [including cargo, baggage (cargo and baggage)]”: the object is property owned, used, or possessed by the Insured Person during the trip (hereinafter referred to as baggage).

2.1.1.5. For Insurance Class 16 – “Insurance of other financial risks (except those specified in classes 14, 15)”: the object is financial losses of the Insured Person resulting from forced trip cancellation or changes in trip conditions for reasons beyond the control of the Insured Person (hereinafter referred to as *trip cancellation*).

2.1.2. The following persons or conditions are not accepted for insurance:

In the part of Insurance Classes 18 and 1:

2.1.2.1. Persons holding citizenship of the Russian Federation or the Republic of Belarus;

2.1.2.2. Persons with established disability of Group 1 or 2, or with the status of “disabled child”;

2.1.2.3. Persons with at least one of the following established diagnoses:

- Toxic hepatitis;
- Chronic hepatitis B, C, D, E, or F;
- Liver cirrhosis;
- Chronic renal failure;
- Stroke;
- Malignant neoplasms.

If, after concluding the Insurance Contract, it is established that the Insured Person provided knowingly false information or concealed information regarding the circumstances specified in clauses 2.1.2.1–2.1.2.3, the Insurer shall have the right to declare the Insurance Contract invalid on the grounds of error and to terminate the provision of insurance protection.

In the part of Insurance Class 7:

2.1.2.3. The following items or groups of items are not accepted for insurance: Money, jewelry, securities, discount and bank cards; Perfumery and cosmetics; Precious metals in bars, precious and semi-precious stones without a setting; Antique or unique products, works of art, and collectibles; Travel documents, passports, and any other types of official documents; Slides, photographs, film copies, manuscripts, plans, diagrams, drawings, models, and business papers; Any type of prostheses, contact lenses; Watches (wrist and pocket); Animals; Plants and seeds; Vehicles, motorcycles, bicycles, air and water vehicles, including additional equipment, components, accessories, and spare parts for them; Religious objects.

2.2. LIST OF INSURANCE RISKS AND INSURANCE EVENTS

2.2.1. The list of insurance risks by Insurance Classes is determined by agreement of the Parties, based on the needs of the Client, and is specified in clauses 3.3. and 3.4. of the Certificate.

2.2.2. Events listed in clause 2.6.2. of the General Insurance Terms and Conditions may be recognized as insured events.

2.2.3. Under this Insurance Contract, the losses incurred by the Insured or the Insured Person as a result of an event covered by the insurance should be indemnified, including the losses arising from the consequences of military/combat operations, if the Insured Person is a civilian:

In the part of Insurance Class 18 – “Insurance of expenses related to the provision of assistance to persons who found themselves in a difficult situation while traveling”

2.2.3.1. In case of an insured event specified in clauses 2.6.2.1–2.6.2.2 of the General Terms and Conditions, the Insurer shall, to the extent of the sum insured or separately established liability limits, indemnify the following costs:

2.2.3.1.1. Emergency medical care, including initial diagnostic measures and testing, provided by ambulance or, with the Insurer’s consent, by alternative transport in the event of an emergency at the location where the incident occurs;

2.2.3.1.2. Emergency inpatient care in a hospital (standard-type ward), including accommodation costs, physicians’ services, emergency surgeries, diagnostic testing, prescribed medicines, medical supplies, and fixation devices (e.g., plaster, bandages).

2.2.3.1.3. Emergency outpatient care, including physicians' services, diagnostic testing to the extent necessary to establish a diagnosis, prescribed medicines, medical supplies, and fixation devices (such as plaster, bandages, or orthoses for fractures), except in cases excluded under this Contract.

2.2.3.1.4. Emergency dental care, subject to a limit of 4,000 (four thousand) hryvnias (UAH) during the term of the Contract;

2.2.3.1.5. Emergency medical care in the event of sudden pregnancy complications requiring treatment for vital reasons. The necessity of such care must be confirmed by a medical opinion, except in cases excluded under this Contract.

2.2.3.1.6. Transportation of the Insured Person by specialized medical transport or, with the Insurer's consent, by alternative transport to the nearest medical institution if no adequate facilities are available at the place of temporary stay and the Insured/Insured Person is unable to reach the medical facility independently by public transport (except in cases of lower limb injury). Such transportation must be medically justified and confirmed by a doctor's opinion. Air ambulance transportation is only covered in cases where there is a direct threat to the Insured Person's life, combined with limited transport accessibility or significant distance to a medical facility, and must be pre-approved by the Insurer;

2.2.3.1.7. Medical evacuation by transport recommended by a physician, with such recommendation documented in the relevant medical records. Coverage includes costs of medical escort to the Insured Person's permanent residence or the nearest medical facility at their place of residence for continued treatment, provided that appropriate facilities are unavailable at the temporary location, or when continuation of treatment at the place of residence is medically advised. The Insurer reimburses expenses for documentation, transportation, and economy-class travel of one accompanying person (if medical escort was provided). Medical evacuation is covered only when confirmed as necessary by a physician and provided no medical contraindications exist. Expenses are reimbursed within the insured amount specified in the Insurance Contract;

2.2.3.1.8. Organization and payment of transportation (repatriation) of the Insured Person's body to their permanent place of residence. The Insurer shall reimburse the following costs::

- preparation of documents and arrangements for transportation, cremation, or burial;
- transportation costs for repatriation;
- cremation costs, or, with additional written agreement from the deceased Insured Person's relatives, burial costs in the country of death, up to 10% of the insured amount.

A prerequisite for repatriation is the submission by the relatives of a written statement confirming their readiness to receive the body (or ashes in the case of cremation) after crossing the state border. The Insurer does not cover ritual services (e.g., funeral urns in the case of cremation).

2.2.3.1.9. Search and rescue operations in the event of sudden illness or accident of the Insured Person, up to 15% of the medical expenses insurance sum insured.

2.2.3.1.10. Economy class return travel of the Insured Person to their country of permanent residence if the originally scheduled departure date (per pre-purchased travel documents) is delayed due to hospitalization. The Insurer reserves the right to deduct from the insurance payment the value of any unused pre-purchased travel documents. The mode of transportation shall be determined by the Insurer, taking into account medical recommendations provided by the attending physician or medical institution. The Insurer shall not be liable for delays or failures caused by the carrier.

2.2.3.1.11. The organization of medical assistance described in clauses 2.6.3.1.1–2.6.3.1.7 shall be carried out through state, departmental, or private medical institutions. The choice of a medical institution and the appointment shall be made exclusively by the Assistance Provider, taking into account the territorial location of the Insured Person and the readiness of the medical institution to provide emergency medical care

In the part of the Insurance Class 1 – Accident Insurance (including industrial injury and occupational disease)

2.2.3.2. In the cases specified in clauses 2.6.2.3–2.6.2.5 of the General Conditions, the amount of insurance payments shall be determined as follows:

2.2.3.2.1. For the case specified in clause 2.6.2.5 of the General Conditions, the insurance payment shall be calculated as a percentage of the sum insured for the Insured Person under the insurance program, in accordance with Table No. 1 "Amounts of Insurance Payments for Bodily Injuries" (Appendix No. 1 to the General Conditions), depending on the severity of the injury.

2.2.3.2.2. For the case specified in clause 2.6.2.4 of the General Conditions, the insurance payment shall be determined as follows:

2.2.3.2.2.1. 100% of the sum insured under the insurance program in the event of Group 1 disability;

2.2.3.2.2.2. 75% of the sum insured under the insurance program in the event of Group 2 disability;

2.2.3.2.2.3. 50% of the sum insured under the insurance program in the event of Group 3 disability.

2.2.3.2.3. For the case specified in clause 2.6.2.3 of the General Conditions, the insurance indemnity shall be 100% of the sum insured.

In the part of the Insurance Class 13 – Liability Insurance (excluding Classes 10, 11, and 12)

2.2.4.1. In the cases specified in clause 2.6.2.6 of the General Conditions, the following liability limits of the Insurer apply within the insured amount::

2.2.4.1.1. For compensation of material damage resulting from partial damage or destruction of a third party's property – up to 30% of the insured amount for civil liability insurance, including a liability limit of 1% of the insured amount for accidental damage to rented sports equipment (e.g., skis, diving equipment).

2.2.4.1.2. For compensation of material damage resulting from harm to the life or health of a third party – up to 70% of the insured amount for civil liability insurance.

In the part of the Insurance Class – 7 “Goods-In-Transit Insurance [including cargo, baggage (cargo baggage)]”
2.6.5.1. In the cases specified in clauses 2.6.2.7-2.6.2.8. of the General Conditions, the insurance indemnity is paid:

2.2.5.1.1. in the event of complete loss of all or part of the baggage – in the amount of its actual value, which is determined in the Application of the Insured/Insured Person indicating the list of items, identifying features of the items (brand, model, serial number, etc.) excluding the residual value of the damaged baggage, but not more than the sum insured. The baggage is considered completely destroyed (complete loss of baggage) if the repair costs, taking into account wear and tear, together with the residual value, exceed the actual value of the baggage. The deductible provided for in the Insurance Contract is deducted from the amount of the insurance indemnity;

2.2.5.1.2. in case of theft, complete or partial loss of luggage – in the amount of its actual value, which is determined in the Application of the Insured/Insured Person with an indication of the list of items, identifying features of the items (brand, model, serial number, etc.), except for the residual value of the luggage remaining to the extent of the sum insured.

2.2.5.1.3. in case of damage to all or part of it – in the amount of actually incurred repair costs. The insured luggage is considered damaged if the repair costs together with the residual value do not exceed the actual value (established by the relevant expert opinion, certificate of the airport, any other carrier, certificate of competent authorities, etc.) of the undamaged luggage. The amount of damage is determined for each item separately. The total amount of indemnities cannot exceed the amount of the sum insured established in the Insurance Contract.

2.2.5.1.4. If the stolen (lost) item was returned to the Insured/Insured Person, he/she shall be obliged to refund to the Insurer the insurance indemnity received, except for the costs related to the insured event for the repair or arrangement of the returned item, no later than 15 (fifteen) calendar days after the return of the stolen (lost) item to him/her.

2.2.5.1.5. If the Insured/Insured Person has received indemnity from third parties for lost or damaged baggage, the Insurer pays only the difference between the amount payable under the Insurance Contract and the amount received from third parties. The Insured must immediately notify the Insurer of the receipt of such amounts.

2.2.5.1.6. If the lost or damaged baggage was handed over to the carrier for transportation or was with the passenger as hand luggage, the insurance indemnity shall be paid in addition to the indemnity paid by the carrier in accordance with the terms of carriage, and only after the Insured/Insured Person has received such indemnity and provided the Insurer with duly confirmed financial documents evidencing the carrier's indemnification.

2.2.5.1.7 In the event of baggage delay caused by the carrier, provided that such baggage was handed over for transportation, and if the delay exceeds three (3) hours, the Insurer shall indemnify to the Insured/Insured Person, to the extent of 100 (one hundred) euros/US dollars, for the costs of purchasing essential items (toothbrush, toothpaste, napkins, towels, soap, baby and women's hygiene products, disposable shaving products).

2.2.5.1.8. In case of loss (theft) of individual items included in a set, kit, etc., the amount of loss shall be determined as the difference between the cost of the entire set, kit, etc. and the value of preserved items, as established by the relevant expert opinion, airport certificate, carrier's certificate, or certificate of competent authorities.

2.2.5.2. The decision to pay or to deny payment of Insurance Indemnity shall be made within thirty (30) calendar days from the date the Insured submits to the Insurer the last of documents required under Section 14 of the Contract.

2.2.5.3. The insurance coverage extends to all baggage of the Insured/Insured Person (personal belongings transported during the trip, both checked with the carrier and hand luggage), within the limits provided by this insurance product and the sum insured.

2.2.5.3.1. The insurance coverage applies to fur products, jewelry, portable audio, photo, video, film, computing and software systems, printing devices, gadgets, including additional equipment, components, accessories and peripherals, only in cases where:

- they are used exclusively for their intended purpose as personal belongings;

- all necessary measures have been taken to ensure their safety and preservation;
- such items are kept in storage facilities or other specially designated secure places.

2.2.5.3.2. The insurance coverage also applies to sports equipment (including ski and diving equipment), provided that it is used by the Insured/Insured Person for its intended purpose during sports activities.

2.2.5.4. In the event of theft of insured property from a vehicle (or trailer), the Insurer shall pay insurance indemnity if documentary confirmation is provided (payment document, receipt, invoice) for parking and/or stopping place, subject to the following conditions: the theft occurred during daytime hours (from 06:00 am to 10:00 pm); the stolen items were kept in a locked compartment of a vehicle (or trailer) parked in a secured lot with a checkpoint (multi-storey, underground parking, etc.); theft occurred during a stop lasting no longer than three (3) hours. In such cases, the insurance coverage shall not extend to fur products, jewelry, portable audio, photo, video, film, computing and software systems, printing devices, and related accessories.

2.2.5.5. To the extent of the sum insured, the Insurer shall also indemnify to all necessary and reasonable expenses for salvaging luggage, as well as expenses incurred in reducing or establishing the amount of damage, provided the event should be indemnified.

In the part of Insurance Class – 16 “Insurance of Other Financial Risks (except those specified in Classes 14 and 15)”

2.2.6.1. In the cases specified in clauses 2.6.2.9–2.6.2.19 of the General Conditions, and to the extent of the sum insured under the insurance program, the Insurer shall indemnify for:

2.2.6.1.1. the cost of unused travel documents if the Insured/Insured Person did not use the alternative flight option to the destination offered by the air carrier;

2.2.6.1.2. the cost of hotel/apartment reservations, subject to documentary confirmation of actual expenses incurred;

2.2.6.1.3. in the cases specified in clauses 2.6.2.9.1, 2.6.2.9.3, and 2.6.2.9.4 of the General Conditions, the costs of purchasing new economy-class travel tickets, provided with supporting documents. Such costs are indemnified in full only if the previously purchased ticket cannot be reissued. If a prepaid ticket (100% prepayment) can be rebooked, only the difference in ticket cost shall be indemnified.

2.2.6.2. In the cases specified in clauses 2.6.2.10.1–2.6.2.10.6 of the General Conditions, the Insurer shall indemnify, to the extent of the sum insured under the insurance program and subject to prior agreement with the Insurer, the following expenses:

2.2.6.2.1. accommodation expenses within the country of temporary stay (within the Territory of the Contract), up to 80 (eighty) euros/US dollars per day for a maximum of five (5) days;

2.2.6.2.2. meal expenses up to 50 (fifty) euros/US dollars;

2.2.6.2.3. expenses for obtaining temporary replacement documents, up to 200 (two hundred) euros/US dollars;

2.2.6.2.4. in the case specified in clause 2.6.2.10.6 of the General Conditions, accommodation expenses within the country of temporary stay (within the Territory of the Contract) up to 400 (four hundred) euros/US dollars for a maximum of fourteen (14) days, and meal expenses up to 50 (fifty) euros/US dollars.

2.2.7. Additional risk groups may be applied under Insurance Classes 18 and 1, considering the increased level of insurance risk associated with participation in sports at a professional or amateur level, participation in extreme sports, or performance of employment or work activities during travel:

Risk Group SA (Amateur Sports): Engaging in sports at an amateur level (including participation in amateur competitions), excluding extreme sports and riding or being a passenger on a two-wheeled motor vehicle (except for bicycle rides). Within the framework of the Comprehensive Insurance Contract for Persons Traveling Abroad, amateur sports mean irregular (including one-time) participation in any sport (including during vacation) or regular participation in sports through attendance at a sports club/section, provided that sport is not the main activity of the Insured Person, and participation is limited to amateur competitions or marathons.

Risk Group SP (Professional Sports): Engaging in sports at a professional level (including participation in professional competitions), excluding extreme sports. Within the framework of the Comprehensive Insurance Contract for Persons Traveling Abroad, professional sports mean regular participation in sports where sport is the main activity of the Insured Person, and where the Insured Person holds a sports category or the title of Master of Sports/Candidate for Master of Sports, or participates in professional competitions or marathons.

Risk Group SE (Extreme Sports): Engaging in extreme sports, whether at an amateur or professional level. Within the framework of the Comprehensive Insurance Contract for Persons Traveling Abroad, extreme sports include, but are not limited to: mountaineering; mountain tourism (trekking) at altitudes from 2,000 to 4,500 meters; mountain biking; speleotourism (caving); diving (up to a depth of 15 meters); river rafting (including rafting, kayaking, catamaran rafting, etc.); sports diving; hunting; fishing in remote

or hard-to-reach areas; off-road trips on jeeps, quad bikes, motorcycles and other vehicles outside public roads; jumping from heights (including parachuting, rope-jumping, water jumps); flights using non-motorized aircraft; piloting aircraft; participation in vehicle or animal races (including car/motorcycle rallies and drifting).

Risk Group W1 (Work with Moderate Risk): Employment in positions with moderate professional risk, including: service, trade, public catering, and health care sectors; vehicle drivers (including truck drivers); security personnel (except personal bodyguards); agricultural workers (including harvesting); ballet or dance ensemble artists; mechanics; airfield service personnel; workers directly employed in production (passenger car industry, pulp and paper, machine-building, woodworking).

Risk Group W2 (Work with Increased Risk): Employment in positions with increased professional risk, including: construction workers (including high-rise/climbing work); security service employees and personal bodyguards; water rescuers and firefighters; divers; test pilots; circus artists, animal tamers/trainers, stunt performers; workers engaged in mineral extraction and development; workers handling explosives or toxic substances; professional fishermen (sea/ocean); professional hunters (land, rivers, lakes).

2.3. TERRITORY OF THE CONTRACT: specified in clause 3.2. of the Certificate

2.4. DURATION OF THE INSURANCE CONTRACT: specified in clause 3.1. of the Certificate.

2.4.1. The insurance contract shall enter into force from 12:00 am of the date of commencement of the Contract, provided that the Insurer signs it with an electronic signature (QES/UES with a qualified time stamp), but not earlier than the day following the day of receipt of the insurance premium in full, specified in clause 2. of the Certificate, to the Insurer's current account and shall be valid until 12:00 am of the day specified in the Certificate as the date of expiry of the Contract.

2.4.2. The Contract shall enter into force (commence) at 12:00 am on the date specified as the commencement date in the Contract/Certificate, but not earlier than the day following the day on which the full insurance premium, as specified in the Contract/Certificate, is received by the Insurer's current account or cash desk. The period prior to payment of the premium shall be included in the total term of the Contract; however, the insurance coverage shall not apply, and no indemnity shall be payable, for events occurring before the premium is paid in full.

2.4.3. In case of non-payment or partial payment of the insurance premium, the Contract shall commence at 12:00 am on the day following the date, on which the full insurance premium is received by the Insurer. The period prior to such payment shall be included in the total term of the Contract; however, no insurance coverage shall apply, and no indemnity shall be payable, for events occurring before full payment of the premium.

2.4.4. The Sum Insured and the insurance premium shall be determined by agreement of the Parties and specified in the Certificate.

2.4.5. The insurance premium shall be calculated by multiplying the Sum Insured by the applicable insurance tariff.

3. RIGHTS AND OBLIGATIONS OF THE PARTIES AND LIABILITY FOR NON-PERFORMANCE OR IMPROPER PERFORMANCE OF CONTRACTUAL TERMS

As defined in Section 3 of the General Insurance Terms and Conditions, "Rights and obligations of the parties and liability for non-performance or improper performance of the contractual terms".

4. PROCEDURE OF ACTIONS OF THE INSURED IN CASE OF AN INSURED EVENT

As defined in Section 6 of the General Insurance Terms and Conditions, "Procedure of Actions of the Insured in case of an insured event."

5. LIST OF DOCUMENTS REQUIRED FOR INSURANCE INDEMNITY PAYMENT

As defined in clause 7.6. Section 7 of the General Insurance Terms and Conditions, "Settlement Procedure and Indemnity Payment Conditions".

6. SETTLEMENT PROCEDURE AND INDEMNITY PAYMENT CONDITIONS

As defined in Section 7 of the General Insurance Terms and Conditions, "Settlement Procedure and Indemnity Payment Conditions"

7. INSURANCE EXCLUSIONS AND LIMITATIONS

7.1. As defined in Section 10 of the General Insurance Terms and Conditions, "Insurance Exclusions and Limitations".

7.2. In addition to clause 7.1 above, this Insurance Program establishes the following additional exclusions:
7.2.1. Active participation of the Insured Person in military or combat operations and their consequences (regardless of whether martial law has been declared), uprisings, civil commotion, or unauthorized strikes;
7.2.2. Consultations, examinations, or treatment related to diseases or disorders of the hearing organs, including earwax removal;
7.2.3. Diagnostics or treatment of injuries sustained within the territory of a ski resort.

8. GROUNDS FOR INDEMNITY DENIAL

As defined in Section 8 of the General Insurance Terms and Conditions, "Grounds for Indemnity Denial", and Section 7 of this Program, "Insurance Exclusions and Limitations".

9. PROCEDURE FOR AMENDMENTS, EARLY TERMINATION OR TERMINATION OF THE CONTRACT AND THEIR LEGAL CONSEQUENCES

9.1. As defined in Section 4 of the General Insurance Terms and Conditions, "Procedure for Amendments to the Insurance Contract, Early Termination or Termination, and Their Legal Consequences."

9.2. The Contract may be terminated early at the request of either the Insured or the Insurer.

Any Party intending to terminate the Contract early (except for termination due to non-payment of the insurance premium) shall submit a written or electronic notice no later than five (5) calendar days prior to the intended termination date.

For electronic communication, the information exchange and document signing may be carried out via the Insurer's electronic services using a simple electronic signature, the template of which is available on the Insurer's official website at: <https://ingo.ua/services>.

10. PROCEDURE FOR WITHDRAWAL FROM THE INSURANCE CONTRACT

As defined in Section 5 of the General Insurance Terms and Conditions, "Procedure for Withdrawal from the Insurance Contract."

11. PROCEDURE FOR DISPUTE RESOLUTION AND LIABILITY OF THE PARTIES

As defined in Section 11 of the General Insurance Terms and Conditions, "Procedure for Dispute Resolution and Liability of the Parties."

12. FINAL PROVISIONS

12.1. All matters not reflected in the Certificate and this Insurance Program shall be governed by the General Insurance Terms and Conditions and the applicable legislation of Ukraine.

12.2. In all matters not regulated by the Insurance Contract, the Insurer and the Insured shall be guided by the provisions of the General Insurance Terms and Conditions and the applicable legislation of Ukraine. In the event of any contradictions between the provisions of the General Conditions and the provisions of the Insurance Contract, the provisions of the Contract and its annexes shall prevail.

12.3. The amount of expenses directly related to the conclusion and execution of this Insurance Contract constitutes 40% (forty percent).

12.4. The Insured authorizes the Insurer to use the information specified in the Certificate, including telephone call records, and other information and documents received from the Insured in the course of settling insured events under this Contract, including for the relations with individuals and legal entities, state authorities, and for the resolution of disputes (claims, lawsuits, applications) related to the fulfillment of obligations under this Contract.

12.5. The Insurer guarantees that information and documents received from the Insured, including telephone call records, shall be used only for the purposes and to the extent necessary to fulfill obligations stipulated by this Contract and the legislation of Ukraine, and in compliance with the restrictions established by the Constitution of Ukraine, the Laws of Ukraine "On Information", "On Insurance", "On Financial Services and Financial Companies" and other relevant legislative acts regulating the information and insurance secrecy.

12.6. In accordance with Part 2 of Article 7 of the Law of Ukraine "On Financial Services and Financial Companies", the Insured certifies that the Insurer has provided (and the Insured has been made familiar with) all information required by this Law.

12.7. In accordance with Article 7 of the Law of Ukraine "On Financial Services and Financial Companies", the details of the authority exercising state regulation of financial services markets, as well as consumer protection authorities, are as follows:

12.7.1. NATIONAL BANK OF UKRAINE (for submitting written applications): 11-b Instytutska Str., Kyiv-8, 01601, tel.: 0 800 505 240, e-mail: nbu.gov.ua.

12.7.2. Consumer Protection Department of the State Service: Ivan Drach Str., 10/8, tel./fax: (044) 486-54-86, (044) 486-40-27.

12.8. In accordance with NBU Resolution No. 175 dated 20 December 2023, information on the mechanisms for protecting the rights of consumers of services of JSIC "INGO" has been approved and published on the official website of JSIC "INGO":

https://ingo.ua/cms/image/uploads/Povidomlennya_pro_zahist_prav_spozhyvachiv_Ingo_0712fa8682.docx?v=1707741988717, Procedure for handling claims, complaints, applications, requests, and proposals submitted to JSC 'Insurance Company INGO' by consumers (including citizens, policyholders, insured persons, and third parties)

https://ingo.ua/cms/image/uploads/Dlya_podannya_skarg_af247f228a.doc?v=1707741940416

12.9. The Parties agree to use corporate e-mail addresses (domain ingo.ua) for sending/receiving any electronic messages related to this Contract and for the settlement of insured events, including through QES and/or simple electronic signatures. Copies of documents may be submitted electronically, provided that originals are submitted no later than the expiry date of the Contract.

12.10. All notices and communications shall be deemed duly submitted if sent by one of the following methods:

- ✓ to the e-mail address specified by the Insured in the application when concluding the Contract;
- ✓ by SMS to the phone number specified in the Contract;
- ✓ by registered mail to the addresses specified in the Contract;
- ✓ by courier delivery to the addresses specified in the Contract (delivery costs borne by the sending Party);
- ✓ by electronic communication services to the e-mail address/link specified in the Contract or insurance application;
- ✓ by audio calls to/from the Insurer's Contact Center;
- ✓ through services for exchanging and signing electronic documents, using a qualified electronic signature (QES) and/or simple electronic signature;
- ✓ by sending copies of documents via messengers, in cases agreed by the Parties, with subsequent submission of original documents.

12.11. In accordance with the Law of Ukraine "On Prevention and Counteraction to the Legalization (Laundering) of Proceeds of Crime, Financing of Terrorism and Financing of the Proliferation of Weapons of Mass Destruction", the Insurer has the right to request, and the Client (or the Client's representative) is obliged to provide, all information and official documents necessary for due diligence and for compliance with legislative requirements in this field.