Important Conditions of the Contract

- ✓ Important conditions of the present Contract represent incomplete information on the insurance terms;
- ✓ Alongside with the Important Conditions of the Contract the Insurance Contract comprises also as its integral part the following, posted on the web-sites https://credobank.ge/ and https://credobank.ge/ and https://imedil.ge/legal-info/ge:
- Standard Conditions of the Contract;
- Claim Form:
- Information Sheet;
- Insurance policy and card issued to the customer also represent a part of the Accident Insurance Contract.
- 1. Information on the Insurance Company and the contract type:
- ✓ JSC "Insurance Company Imedi L" (identification number: 204919008);
- ✓ The accident insurance contract covers the customer's death as a result of an accident, which originates the obligation of issuance/compensation of the insurance amount according to the terms of the Contract.
- 2. Information on the period of validity of the Insurance Contract, insurance premium, terms of termination of the Contract, claim form, terms and exclusions regulating clauses:
- ➤ The insurance period and insurance premium amount stipulated by the Contract are specified in the accident insurance policy.
- ➤ The insurer shall be free from its obligations until the first or one-time insurance premium is timely paid.
- ➤ The grounds for termination of the accident insurance contract may be:
 - a) full fulfillment of the obligations assumed by the insurer.
 - b) written statement of the policy holder/insured;
 - c) a preliminary written agreement between the parties;
 - d) without any grounds, at the initiative of the policy holder/insured within 14 (fourteen) calendar days from the conclusion of the contract, and in the case of a life insurance contract within 30 (thirty) calendar days from its conclusion (the policy

holder/insured must apply to JSC "Credo Bank" with the aforementioned request), if receiving the service is directly and clearly requested before the expiration of the contract;

- e) other cases defined by the contract;
- f) if, after the entry into force of this accident insurance contract, it is established that the customer is/was mentally ill before the entry into force of the insurance or became ill after the entry into force of the insurance, or requires permanent care and supervision.
- Any kind of claim by the customer/beneficiary to the insurer can only be submitted in writing. The claim submission form is attached to the accident insurance contract as Annex #2. The customer's claims are considered by the Insurer's Department for Protection of the Insured persons'/customers' Interests, which ensures the provision of a written response to the customer/beneficiary within 30 calendar days of receiving the relevant written claim. The response to the customer can be provided to the e-mail address specified by the customer in the claim form. (The claim form is also available on the following websites of the insurer: https://credobank.ge/ and https://imedil.ge/legal-info/ge;
- Exceptions to the accident insurance contract are specified in Article 4 of the contract, and the prerequisites for insurance compensation are specified in Article 4 of these Important Terms.
- ➤ Name and address of the Supervisory Authority of the Insurer: LEPL "Insurance State Supervision Service of Georgia", Tbilisi, Vake-Saburtalo District, #3 Levan Mikeladze Street.

3. Information on financial expenses and amounts specified by the Accident Insurance Contract:

Under the Accident Insurance Contract, except for the obligation of payment of the insurance premium, the following financial expenses may be originated for the customer:

✓ In the event of the customer's withdrawal from the accident insurance contract before the expiration of the contract, the issue of payment of the insurance premium to the insurer is regulated as follows: if the policy holder/insured does not use the insurance service during the insurance period, the unearned premium paid shall be returned to the policy holder/insured, and in the event of use of the insurance, the unearned premium shall not be subject to return to the policy holder/insured.

- ✓ If, after the entry into force of the accident insurance contract, it is determined that the customer is/was physically ill before the entry into force of the insurance or became ill after the entry into force of the insurance, or requires permanent care and supervision, the insurance will be automatically canceled and the unearned premium paid will be returned to the customer in full only if he/she has not used the discount provided for in this insurance contract during the active insurance period. In case of using the discount by the customer, the insurance premium, both earned and unearned, is subject to payment in full and on a one-off basis. In addition, for the avoidance of doubt, the insurer will not pay compensation for the insured event.
- ✓ In the event of the death of the customer during the insurance period, the beneficiary shall be obliged to fully cover the unpaid insurance premium stipulated in the contract before the insurer issues the insurance compensation. Otherwise, the insurer shall be entitled to deduct such insurance premium from the compensation amount.

4. Information on franchise and pre-conditions of compensation of insured events specified by the Insurance Contract:

No franchise is provided for by the accident insurance contract.

Pre-condition of issuing of insurance compensation in case of occurring of the insured event:

- ➤ The insured event is regulated by the contract and the information/documentation related to the insured event, specified in the contract, shall be submitted by the beneficiary to the insurer in full, within the time frame and in the form agreed/specified in the contract (according to Article 13 of the Standard Conditions of the Contract).
- ➤ In the event if the beneficiary does not provide the Insurer with all documents connected with the insured event according to the procedure, terms and in the form determined by the contract, the Insurer shall be released from the obligation of issuing of the insurance compensation.
- ➤ The insurance shall automatically terminate upon the commencement of service in a military or other similar formation by the user during a war or similar military operation. The insurance shall be renewed after the customer notifies the insurer of the abandonment of the said service.
- ➤ The insurance does not apply to mentally ill persons and to those who require permanent care and supervision (persons who require the assistance of others for necessary daily activities);

➤ If, after the entry into force of this insurance, it is determined that the customer is/was mentally ill before the entry into force of the insurance or became ill after the entry into force of the insurance, or requires permanent care and supervision, the insurance shall be deemed automatically cancelled. Herewith, for the avoidance of doubt, the insured event shall not be compensated by the insurer.

5. Form and deadlines for sending a notification to the insurer, submitting a claim, regulating the insured event, and issuing compensation upon occurrence of an insured event:

- ✓ In case of death of the insured person as a result of an accident, the beneficiary is obliged to contact the insurer's call center within 48 hours after the death of the insured person and provide information about the occurrence of the insured event, and within 30 calendar days after the death of the insured person to provide the insurer with the documents specified in Paragraph 13.2 of the contract:
- ✓ Insurance compensation shall be issued within 30 calendar days after submission of the necessary documents to the insurer, on the basis of the report corresponding to the insured event defined in clause 8.4;
- ✓ Non-Georgian language documents can be submitted to the insurer only translated into Georgian, notarized.

6. The importance of the obligation of the customer to provide information to the insurer and the legal consequences of violating this obligation:

- ✓ The insurer is entitled to refuse to issue insurance compensation if the insurer has not been provided with accurate and detailed information about the insured event in a timely manner, except for cases when it is established that the insurer has become aware of the said information.
- ✓ When concluding an insurance contract, the customer must notify the insurer of all circumstances known to him/her that are of essential importance for the occurrence of the danger or the event provided for by the insurance and that may serve as a basis for the insurer to refuse the contract, taking into account Article 808 of the Civil Code of Georgia.
- 7. List of exceptions specified in the contract: According to the contract, the following cases of accidental death are not covered/compensated:

- ✓ if death is directly or indirectly was caused or resulted from events such as: war, conquest, war/military actions of any kind, civil war, uprising, revolution, strike, confiscation or nationalization of any State body, the actions of any person who acts on behalf of any organization or independently and aims to overthrow governments "de jure" or "de facto", or to influence it by terrorist or forceful methods;
- ✓ if death directly or indirectly was caused or occurred as a result of ionizing radiation, radioactive pollution of the environment, or ignition of nuclear fuel;
- ✓ if death directly or indirectly was caused or occurred as a result of the insured being under the influence of alcoholic substances; or if the insured was under the influence of narcotic, psychotropic or toxic substances at the time of the insured event;
- ✓ if death is directly or indirectly was caused or occurred as a result of suicide or attempted suicide of the insured, intentional self-harm;
- ✓ if the death occurred as a result of the murder of the insured, in which the beneficiary or any person interested in receiving compensation for the death acts before us as a direct or indirect, direct or indirect participant;
- ✓ if the death of the insured occurred as a result of mental illness or obfuscation of the insured:
- ✓ if death is directly or indirectly caused or resulted from the presence of the insured, his entry or exit from any air vehicle/aircraft, except for traveling on a licensed multi-engine air transport operated by a licensed air carrier;
- ✓ if death is directly or indirectly was caused or occurred as a result of the insured's service in the armed forces or the police or participation in their actions;
- ✓ if death is directly or indirectly was caused or occurred as a result of the insured's participation in speed competitions of any kind and means;
- ✓ if the insured's death occurred as a result of AIDS or HIV infection;
- ✓ if death directly or indirectly occurred as a result of the insured putting himself in danger at his own request, except in cases where such action is aimed at saving a person's life;

- ✓ if death directly or indirectly was caused or occurred as a result of the insured's compliance with the terms of the bet, acrobatic tricks, setting a record or attempting to do so;
- ✓ if death occurred as a result of complications related to childbirth or pregnancy in whole or in part;
- ✓ if death directly or indirectly was caused or occurred as a result of the insured's professional sports (competitions, training, performances);
- ✓ if death directly or indirectly was caused or occurred as a result of the insured's practicing the following amateur sports: martial arts, scuba diving, parachuting or hang gliding, rock climbing, mountaineering, caving.

The insurer shall not also reimburse the costs of medical services paid by the Beneficiary to the insurer in order to file a claim and/or obtain appropriate evidence in connection with the insured event.

Note: These important conditions represent the standard conditions of the accident insurance contract, which may be subject to change in each specific case, in accordance with the agreement between the parties. Changes agreed upon between the parties will be reflected in the accident insurance contract.