

In case of discrepancy and / or contradiction between the version in this language and the version in Spanish, the version in Spanish prevails.

POLICY NUMBER: 55 - 2001463 POLICYHOLDER: MOMA HOTEL S.L.
 TAX IDENTIFICATION NUMBER OF POLICY HOLDER: B-17706649
 POLICYHOLDER'S ADDRESS: AVDA. DEL MAR, 5 – 08398 SANTA SUSANNA (BCN)

INSURANCE'S VALIDITY DATE: 25/05/2021 DURATION: ANNUAL EXTENDABLE
 INSURANCE'S BROKER: 02 – 17549 - ASSEGURIS MEDITERRANEUM CORR. ASSEG. S.L.

"SPECIAL ARAG HOTELS/ACCOMMODATION" TRAVEL ASSISTANCE INSURANCE

	Cover	Limit
7.1	Medical and health care - Spain - Dental expenses	3.500 € 250 €
7.2	Repatriation or medicalised transport of ill or injured parties	Total cost
7.3	Repatriation or transport of other Insured Parties	Total cost
7.4	Travel for a relative or companion in the event of hospitalisation	Total cost 500 € (50 € + 10 days)
7.4.1	- Travel expenses	
7.4.2	- Accommodation expenses for a travelling relative or companion in the event of hospitalisation	
7.4.3	- Accommodation expenses for a non-travelling relative or companion in the event of hospitalisation	
7.5	Convalescence in a hotel	1.500 € (150 € x 10 days)
7.6	Repatriation or transport of a deceased Insured Party	Total cost
7.7	Early return due to the death of a relative	Total cost
7.8	Early return due to the hospitalisation of a relative	Total cost
7.9	Early return due to a serious incident affecting the Insured Party's home or work premises	Total cost
7.10	Services purchased and not enjoyed due to hospitalisation	500 €
7.11	Dispatch of a professional driver	Total cost
7.12	Remotal medical consultant service	ARAG service
7.13	Reimbursement for holidays no enjoyed	500 €

THE OBJECT OF THIS INSURANCE POLICY COMPRISES ALL THE ITEMS INCLUDED IN THE GENERAL POLICY SCHEDULE WITH THE ESTABLISHED LIMITS

INSURED PARTIES: Travellers who hire a minimum stay of 5 nights away from their usual residence with the insurance policyholder. Their names, destinations and the duration of their stay must be registered with ARAG before the start of the stay..

Geographical scope:



The cover established in this Policy is valid for incidents that take place exclusively in Spain.

Notifying ARAG of travel plans:

The insurance policyholder will provide ARAG with the information related to the travellers (names, geographical scope, duration of the trips and cost of the reservation insured) prior to beginning the trip. Moreover, the insurance policyholder will make all the documentation related to the parties insured by this contract available to ARAG so that the latter may verify the accuracy of the traveller information provided by the insurance policyholder.

PAYMENT OF PREMIUMS TO ARAG: The Insurance Policyholder will pay the corresponding premiums to ARAG on a monthly basis via direct debit upon reception of the invoice.

THE PROVISION OF SERVICES: The services set forth in this policy will be provided by the company **ARAG S.E., SUCURSAL EN ESPAÑA.**

For emergency services, **ARAG** will give the Insured Party supporting documentation regarding his/her rights as a policyholder and instructions and emergency phone numbers.

To reach **ARAG** by phone, call **93 300 10 50** from Spain or **34 93 300 10 50** from abroad. Reverse-charge calls will be accepted.

- The Policyholder is aware of and expressly accepts the limiting clauses in this policy and confirms that he/she has received the General Schedule together with this document.

INFORMATION TO THE INSURED

Prior to signing this contract, the Policyholder has received the following information, in compliance with the provisions of Article 96 of Act 20/2015 of 14 July, on the Organisation, Supervision and Solvency of Insurance and Reinsurance companies, and Articles 122-126 of its regulations:

- The Insurer is ARAG SE, a German company whose registered office is in Düsseldorf, at ARAG Platz no.1, the Bundesanstalt für Finanzdienstleistungsaufsicht (BaFin) being responsible for supervising and monitoring of its activity. It is authorised to operate in Spain under the right of establishment through its branch ARAG SE, Sucursal en España, with Tax ID number W0049001A, and registered offices in Madrid, Calle Núñez de Balboa, 120; it is listed in the Registro administrativo de la Dirección General de Seguros y Fondos de Pensiones under reference E-210.

The Insurer declares that, in the event of its liquidation, Spanish regulations with regard to liquidation will not be applied.

- The law applicable to the Insurance Contract is Spanish, in particular, Act 50/1980 of 8 October, on Insurance Contracts.

- In the event of any dispute with the Insurer, the Policyholder or Insured may seek redress through arbitration or through the ordinary Spanish courts of law.



Please note that ARAG SE, Sucursal en España offers its insured customers the following Customer Service contact numbers depending on the procedures they wish to carry out:

- For submitting complaints and/or claims to the company, the ARAG S.E. Sucursal en España has a Customer Service Department at c/ Roger de Flor, 16, 08018-Barcelona, email: dac@arag.es, website: www.arag.es to attend to and resolve complaints by insured persons in connection with their legally recognised rights and interests. The Department will resolve the issue within two months from the date on which the complaint was submitted.
- In the event of disagreement with the resolution adopted by the Customer Service Department, or if a period of two months has passed without a response being received, the claimant may contact the Servicio de Reclamaciones de la Dirección General de Seguros y Fondos de Pensiones at Paseo de la Castellana, 44, 28046 - Madrid, or the website: www.dgsfp.mineco.es and the telephone number 902 19 11 11.
- You can view the Report on the insurer's solvency and financial situation at <https://www.arag.com/company/financial-figures>.
- By providing bank details for payment of the insurance premium, the Policyholder/Insured party authorises the relevant amount to be charged to the account detailed in this document, or to any other account notified to the Insurer for this purpose, throughout the duration of the Contract,

INFORMATION REGARDING DATA PROCESSOR

Data processor	ARAG SE, Sucursal en España C/ Núñez de Balboa 120 28006 – MADRID NIF – W00490001A
Data protection officer contact details	dpo@arag.es C/Roger de Flor 16 08018 Barcelona
Purpose of processing	Underwriting and execution of the insurance contract
Authentication	Execution of the insurance contract
Recipients	No data will be transferred to third parties unless: prior consent is given, it is an obligation provided for in regulations, or for legitimate interest.
International transfers	May be necessary, during certain assistance services, for the execution of the contract.
People's rights	Individuals can access, rectify or delete their data, oppose their processing and request their limitation of transfer by sending their request to: lop@arag.es
Additional information	Additional and detailed information on data protection can be viewed on our website: http://www.arag.es

Data processor



The entity responsible for processing personal data is ARAG SE, Sucursal en España, whose NIF is W0049001A and registered address is C/ Núñez de Balboa no. 120, 28006 Madrid. Email: atencioncliente@arag.es Webpage: www.arag.es. You can contact the Data Protection Office at dpo@arag.es.

Purpose and recipients

The information provided will be processed for the purpose of establishing, managing and developing contractual relationships between you and the data processor, as well as for the prevention of fraud.

We will also process your personal data to inform you about our products and for quality control purposes in the provision of the guarantees of your insurance contract.

We will not pass on your personal data to third parties except in the following cases: applicable regulations oblige us to, for legitimate interests or with prior consent from the owner of the data.

Your data will be accessible to ARAG SE, Sucursal en España third-party collaborators who intervene in the formalities arising from underwriting the insurance and the effective provision of its guarantees.

If you need assistance and you are outside the European Union, we may need to transfer your personal data to other countries in order to effectively fulfil the guarantees of your insurance contract.

Your data will be kept during the validity of the insurance contract. After its termination, they will be blocked during the legally required periods for the purpose of determining any liability arising from their processing. Once the statutory limitation periods have elapsed, the data will be deleted.

Authentication

The legal basis for processing your personal data is the execution of the insurance contract you have signed with this insurance company. Providing your data is essential for the formalisation of this insurance contract, which is not possible without them.

The legal basis for processing the data for direct marketing and satisfaction surveys is a legitimate interest in meeting your expectations as a customer and improving the quality of the service received. You can oppose the processing of your data at any time in the manner described in the Rights section.

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Rights

You have the right to access your personal data subject to processing, as well as request the rectification of inaccurate data or, where appropriate, request its deletion when the data is no longer necessary for the purposes for which it was collected. You can also exercise your rights of opposition and limitation to the processing and transfer of the data.

You can exercise your rights by writing to the data processor, ARAG SE, Sucursal en España, by email lopd@arag.es or if you prefer, by post addressed to C/ Roger de Flor, 16, 08018, Barcelona (include "Attention to: 'Data protection'" on the envelope). Please include or attach a copy of your ID or passport. In the event that your above rights request is not complied with, you can submit a complaint to the Spanish Data Protection Agency (www.agpd.es).

Third party(s)' personal data

Regarding other individuals' personal data that must be given to ARAG SE, Sucursal en España, in order to formalise this policy, they must be informed - prior to the communication of their data - of the information contained in the preceding paragraphs.

General Schedule

Introduction

This insurance contract is governed by the provisions of these General Conditions and the policy's Particular Conditions, in accordance with that established in Law 50/1980 of October 8 on Insurance Contracts, and Law 20/2015, of July 14, on the organisation, supervision and solvency of insurance and reinsurance entities.

Definitions

In this contract, the following definitions apply:

Insurer

ARAG S.E., Sucursal en España, which assumes the risk set forth in the policy.

Policyholder

The individual or legal entity that, together with the Insurer, undersigns this contract, and to whom the obligations derived from it correspond, save where, due to their nature, they must be met by the Insured Party.

Insured Party

The individual listed in the Schedule who, in the absence of the Policyholder, assumes the obligations arising from the contract.

Relatives

The following people will be considered relatives of the Insured Party: his/her spouse, de facto partner or long-term live-in partner; first- and second-degree blood ascendants or descendants (parents, children, grandparents, grandchildren); and the siblings and in-laws of both.

Policy

The contractual document containing the regulatory conditions of the insurance. The policy is made up of the following: the General Conditions; the Policy Schedule indicating the risk; and the supplements or appendixes that are issued with the policy to complement or modify it.

Premium

The price of the insurance. The invoice will also include the legally applicable surcharges and taxes.

1. Object of the insurance

With this Travel Assistance insurance contract, while staying at the hotel indicated in the Schedule (a minimum stay of 5 nights), the Insured Party will be entitled to the different assistance benefits that make up the traveller protection system, which includes medical and health services, as well as various complementary benefits.

2. Insured Parties.

The titleholder, Policyholder of the insured interest, and the individuals listed in the Schedule in the case of a Collective Policy.

3. Contract validity

The duration of Fixed Term Policies shall be that set forth in the Schedule.

To benefit from the coverage, the Insured Party may not be away from his/her usual residence on a trip for more than 30 nights. Also a minimum stay of 5 nights is necessary to benefit from the coverage included in this policy.

4. Geographical scope

The cover established in this Policy is valid for incidents that take place exclusively in Spain. The benefits covered by this policy shall apply when the Insured Party is outside the municipal district of his/her usual residence.

5. Payment of premiums

The insurance policyholder must pay the premium as soon as the contract is formalised. Any subsequent premiums shall be paid on their corresponding due dates.



Should the Schedule fail to designate a specific place for payment of the premium, it shall be construed that it is to be made at the insurance policyholder's residence.

Should the policyholder fail to pay the first annual instalment of the premium, the coverage shall not take effect and the Insurer may terminate the contract or demand payment of the agreed premium. Should the policyholder fail to pay any successive annual instalments, the policy coverage shall be revoked one month after the expiry date. **In any case, coverage shall take effect 24 hours after the day the Insured Party pays the premium.**

The Insurer may claim payment of the outstanding premium within six months, starting from the due date.

6. Information about the risk

The Insurance Policyholder must, prior to formalizing the contract, declare to ARAG all those circumstances known to him/her that might influence the assessment of the risk, in accordance with the questionnaire he/she shall be asked to complete. The Policyholder is released from this duty if ARAG does not present him/her with a questionnaire or if, although this is presented, the circumstances in question which could influence the risk assessment are not covered thereby.

The Insurer may terminate the contract within one month from the date on which it learns of any withholding or misrepresentation of information in the Policyholder's declaration.

Throughout the duration of the contract, the Policyholder must inform the Insurer of any changes to the factors and circumstances made known in the aforementioned questionnaire that increase risk and are of such a nature that, had they been known to the Insurer when the contract was drawn up, it would not have been executed or would have been executed under more burdensome conditions.

If ARAG becomes aware of increased risk, it may propose modifications to the contract or terminate it within one month.

If there is a decrease in the risk, the Insured Party is entitled to the proportional reduction in the price of the premium starting with the next annual instalment.

7. Items covered

In the event of an incident covered by this policy, as soon as it is notified through the procedure set forth in Article 10, ARAG guarantees the following services:

7.1. Medical and health care

Up to the limit established in the Policy Schedule, ARAG will bear the expenses of the intervention of medical professionals and establishments required to care for the Insured Party, when ill or injured, provided that said intervention is carried out in accordance with the Insurer's medical team.



The following services are expressly included, whenever so required based on the seriousness of the case (without this list being exhaustive):

- a) Treatment by emergency medical teams.
- b) Complementary medical tests.
- c) Hospitalisations, treatments and surgical operations.
- d) Supply of medication during hospitalisation or refund of the cost thereof for injuries or illnesses not requiring hospitalisation. **Subsequent payment for any medicines or pharmaceutical costs arising from any condition that becomes chronic in nature is excluded from this cover.**

In the event of a life-threatening emergency resulting from an unforeseeable complication of a chronic, congenital or pre-existing illness, ARAG will **only bear the costs of initial emergency treatment carried out within the first 24 hours following hospitalisation.**

The costs covered on this basis may in no case exceed 10% of the sum insured for medical and health coverage.

Except in the event of a proven emergency or force majeure, it will be the Insurer who decides, through its medical team, which medical centre the Insured Party will be sent to depending on their injury or illness.

In the event of illnesses or accidents occurring within the scope of the contracted coverage, if the prognosis of the Insurer's medical team is that, in view of the seriousness of the Insured Party's case, long-term treatment is needed, ARAG will transfer the Insured Party to his/her usual place of residence so that he/she may receive this treatment through the usual healthcare means at his/her place of residence. If the Insured Party does not agree to the above-mentioned transfer, the Insurer's obligations with regard to payment for the services covered hereunder will cease immediately.

Long-term treatment will be understood as any treatment lasting more than 60 days from the date the diagnosis was made.

Moreover, **up to limit established in the Policy Schedule**, ARAG will bear the costs of professional intervention for acute dental problems, which are understood to be those that, due to infection, pain or trauma, require emergency treatment.

7.2. Repatriation or medicalised transport of ill or injured parties

In the event of an accident or sudden illness of the Insured Party, ARAG will be responsible for:

- a) The costs of ambulance transfer to the nearest clinic or hospital.
- b) Checks by its Medical Team, in contact with the doctor treating the injured or sick Insured Party, to determine the appropriate measures for the best course of treatment to be followed and the ideal means for any transfer to another more appropriate hospital or the Insured's home.

c) The costs of transferring the injured or ill person, by the most suitable form of transport, to the specified hospital or his/her usual place of residence.

The means of transport used will be decided on a case-by-case basis by the ARAG Medical Team depending on the urgency and seriousness of the case.

Exclusively in Europe, and always according to the criteria of ARAG's Medical Team, a specially equipped medical aircraft may be used.

If the Insured Party is admitted to a hospital far from his/her home, ARAG will cover the costs of transferring the patient to his/her normal place of residence in due course.

Should the Insured Party reside outside of Spain, he/she shall be repatriated to their country of origin.

7.3. Repatriation or transport of other Insured Parties

When, in application of the 'Repatriation or medicalised transport of ill or injured parties' or 'Repatriation or transport of a deceased Insured Party' coverage one of the Insured Parties has been repatriated or transported due to accident or death, and this impedes their spouse, first-degree ascendants or descendants, siblings or companion from continuing with the journey by the initially planned means, ARAG will bear the cost of their transport to their usual residence or the place of hospitalisation.

Should the aforementioned individuals reside outside of Spain, they shall be repatriated to their country of origin.

7.4. Travel for a relative or companion in the event of hospitalisation

7.4.1. Should the state of the ill or injured Insured Party require hospitalisation **for more than five days**, ARAG will provide one of his/her family members or the person designated by the Insured Party, with round-trip plane (economy class) or train (first class) tickets so that they can accompany him/her.

7.4.2. ARAG will pay, **against the presentation of the corresponding invoices**, an amount equal to the companion's living expenses, **always within the limits indicated in the Schedule of this contract.**

7.4.3. If the Insured Party travels with a companion, thereby making the transport laid out in section 7.4.1. unnecessary, ARAG will pay, **against the presentation of the corresponding invoices**, an amount equal to the companion's living expenses, **always within the limits indicated in the Schedule of this contract.**

7.5. Convalescence in a hotel

Should the ill or injured Insured Party be unable to return home on medical advice, ARAG will pay the hotel costs arising from the extension of the stay, **up to the limits indicated in the Schedule of this contract.**



7.6. Repatriation or transport of a deceased Insured Party

In the event of the death of the Insured Party, ARAG will organise and bear the costs of the transportation of the body to the site of its burial in the country of origin. This includes the costs of post-mortem arrangements in accordance with the legal requirements.

Burial and funeral ceremony costs are not included.

ARAG will bear the costs of the return of the other Insured Parties **when they cannot do so using the initially planned means.**

Should the Insured Party reside outside of Spain, he/she shall be repatriated to their country of origin.

7.7. Early return due to the death of a relative

If any of the Insured Parties should have to interrupt a trip due to the death of a relative, as defined in this policy, ARAG will bear the cost of a round-trip journey, by plane (economy class) or train (first class), from the Insured's location to the place of burial.

Alternatively, the Insured may opt for two plane tickets (economy class) or train tickets (first class) to his/her usual residence.

7.8. Early return due to the hospitalisation of a relative

If one of the Insured Parties is obliged to suspend his/her trip due to the hospitalisation of a relative, as defined in this policy, as the result of an accident or serious illness that requires his/her **hospitalisation for at least 5 five days, provided this has taken place after the departure date of the trip**, ARAG will cover the cost of transporting the Insured Party to his/her usual place of residence.

ARAG will also pay for a second ticket for the travel of the person accompanying the Insured Party on the same journey, **provided this second person is insured under this policy.**

7.9. Early return due to a serious incident affecting the Insured Party's home or work premises

ARAG will provide the Insured Party with a ticket to return to his/her home if he/she is obliged to cancel the trip due to serious damage to his/her main or second residence or the work premises of the Insured, **provided that he/she is the direct owner or carries out an independent profession therein.** The damage must have been caused by fire, **requiring the intervention of the fire brigade**; theft, duly confirmed and reported to the police; or by severe flooding. In all these cases, the presence of the Insured Party must be required, as these situations can not be resolved by an immediate family member or person of trust. The event that justifies the early return **must have taken place after the departure date of the trip.**

Moreover, if the Insured Party is travelling accompanied **by another person who is also insured by this Policy**, ARAG will cover their return ticket.

The maximum economic limit of this cover is stipulated in the Policy Schedule.

7.10. Services purchased and not enjoyed due to hospitalisation

If, as a result of their hospitalisation, the Insured Party misses some of the services initially contracted, such as excursions, meals or any other similar service, ARAG will compensate this loss **up to the limits established in the Schedule**, based on the losses suffered.

These circumstances must be verifiable via the presentation of documentation related to the trip reservation.

7.11. Dispatch of a professional driver

ARAG will dispatch a professional driver to transport the vehicle and its occupants to their place of residence or destination—provided that, in the second case, doing so does not exceed the number of days to be used—and no other occupant can take the place of the driver, in the following cases:

- When due to illness or accident the Insured Party has been transferred or repatriated or is unable to drive (according to medical criteria).
- When the Insured Party dies.
- When the insured driver is detained or arrested by the competent authority as a result of a traffic accident.

7.12. Remote medical consultation service

Should the Insured Party require medical treatment for mild illnesses, ARAG may provide a remote medical consultation with a healthcare professional. This service may consist of a video or phone consultation, and images and files may be exchanged through any of the procedures made available to the Insured Party.

If the treating doctor deems it necessary, it may even be possible to remotely prescribe the appropriate medication, always in accordance with the provisions of current health and personal data protection regulations.

Consultations will be provided only when the Company deems it necessary for nonsevere pathologies, such as abrasions, allergies, arthritis pain, asthma, bronchitis, bruising, colds and flu, mouth ulcers, cough, diarrhoea, low fevers, minor infections, insect bites, minor lacerations, conjunctivitis, rashes, upper respiratory tract infections, sinusitis, minor skin inflammations, sore throat, sprains, styes, minor urinary tract infections, fungal infections, vomiting, and any other symptoms that professionals consider appropriate to treat using this system, provided they are not severe.

This type of consultation shall never replace face-to-face consultations that require a physical examination.

The service cannot be provided in cases of medical emergencies that require an immediate visit to a hospital, for appointments requested outside the established hours, or if the pathology in question is severe or chronic.

7.13. Reimbursement for holidays not enjoyed

This cover shall apply exclusively when, after having started his/her trip, the Insured Party is forced to end it early and return to his/her place of residence due to the causes of repatriation or early return covered by this policy.

The reimbursement for holidays not enjoyed may not exceed the sum obtained from dividing the amount insured under the concept of 'Reimbursement for holidays not enjoyed' by the actual number of days the contracted trip should have lasted, multiplied by the number of days remaining until the end of the trip at the time the Insured Party is repatriated due to any of the reasons described above, up to the limits established in the Schedule.

8. GENERAL EXCLUSIONS (from all coverage)

The contracted coverage does not include:

- a) Voluntary acts caused by the Insured Party or in which there is wilful misconduct or gross negligence on the part of the latter.
- b) Any ailments or chronic, congenital and/or pre-existing illnesses, as well as the consequences thereof, that the Insured Party has before the start of the trip, except those expressly covered.
- c) Death by suicide, or injury or illness resulting from attempted suicide or caused intentionally by the Insured Party to him/herself and all those resulting from criminal acts committed by the Insured Party.
- d) Pathological illnesses or states arising from the consumption of alcohol, psychotropic substances, hallucinogens or any drug or substance of similar nature.
- e) Cosmetic treatment and the supply or replacement of hearing aids, contact lenses, glasses, artificial limbs and prostheses in general, as well as expenses arising from childbirth and pregnancy or any type of mental illness.
- f) Injuries or illnesses resulting from the Insured Party's participation in bets, competitions or sporting events, or the practise of sports and/or adventure activities not expressly covered.
- g) Any eventualities which may be caused, directly or indirectly, by nuclear energy, radioactive radiation, natural disasters, acts of war, riots or acts of terrorism.
- h) Any injuries resulting from the professional practise of any sport.
- i) The rescue of people from the desert and/or sea.
- j) Any type of medical or pharmaceutical fee lower than that stipulated in the Policy Schedule.



k) Use of an air ambulance, except in Europe and always in accordance with the opinion of the Insurer's Medical Team.

9. Limits

ARAG shall be liable for the aforementioned expenses, within the established limits and up to the maximum amount purchased for each case. Events arising from a single cause and having occurred at the same time shall be considered a single incident.

ARAG is obliged to pay the compensation unless the incident giving rise to the claim involves bad faith by the Insured Party.

For cover that involves payment of monetary compensation, ARAG is bound to pay the indemnity upon conclusion of the investigations and expert reports required to establish the existence of the incident. In all cases, ARAG shall pay, within 40 days from receipt of the declaration of the incident, the minimum amount of what it may owe, according to the circumstances known to it. If ARAG has not paid this compensation within three months from the incident for reasons that cannot be justified or that are attributable to it, compensation will be increased by a percentage equal to the legal interest rate in force at that time and increased in turn by 50%.

10. Reporting an incident

In the event of an incident that may give rise to the provision of a service covered under this policy, **the Insured Party must obligatorily inform ARAG via its emergency telephone service**, indicating the name of the Insured Party, the policy number, the place and phone number of their location, and the type of assistance needed. This call may be a reverse charge call.

11. Additional provisions

The Insurer will not assume any obligation concerning benefits that have not been requested or that have not been carried out with their previous agreement, except in duly justified cases of force majeure.

When, during the provision of the services, the direct intervention of ARAG is not possible, it will be obliged to refund the Insured Party for any duly certified expenses resulting from such services within a maximum period of 40 days from the submission thereof.

In any case, the Insurer reserves the right to request that the Insured Party present documents or reasonable evidence to make the payment of the requested compensation.

12. Subrogation

Up to the amount paid out in compliance with the obligations resulting from this Policy, ARAG is automatically subrogated in the rights and actions that may correspond to the Insured Party and their heirs, as well as other beneficiaries, against natural or legal third parties as a consequence of the incident that is the reason for the assistance provided.



In special cases, ARAG may be entitled to exercise this right against land, river, sea or air transport companies with regard to the total or partial refund of the cost of tickets not used by the Insured Party.

13. Limitation period

The limitation period for any actions resulting from this insurance agreement shall be two years, with regard to insurance for damages and five years with regard to insurance for people.

14. Note

Should the content set out in this policy differ from the insurance proposal or from the agreed provisions, the Insurance Policyholder may file a complaint with the Company for the rectification of any existing discrepancies within one month from delivery of the policy. Should said period elapse without any claim having been placed, the terms of the policy will apply.