

CONTRACTUAL CONDITIONS

LLOYDS

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07.2024

PRE-CONTRACTUAL INFORMATION

- A. The Underwriters and contractual partners of the Policyholder (hereafter: "the Policyholder") are underwriting members of the association of underwriters known as Lloyd's (hereafter: "the Underwriters"), having the following domicile, address and legal form:

Lloyd's	Lloyd's Versicherer, London	Head office: London / United Kingdom
One Lime Street	Zweigniederlassung für die Schweiz	Legal form: Association of Underwriters
London EC3M 7HA	Seefeldstrasse 7	
United Kingdom	8008 Zurich	
	Switzerland	

- B. The insurance contract is concluded with the assistance of the Lloyd's Broker. These are independent insurance intermediaries in the sense of Swiss legislation.
- C. The Policyholder can revoke the application to conclude the insurance contract or the declaration of acceptance thereof within 14 days from the date of such application or acceptance of the insurance contract by the Policyholder in writing or in another form enabling proof by text.
- D. The insurance contract includes among other things the following General Conditions, which contain nine separate provisions. The Policyholder is therefore explicitly requested and required to read carefully through the following information and the nine mainly short and easily understandable provisions. These refer *inter alia* to the following:

Number 1 deals with the general exclusions namely war and hostilities as well as certain losses resulting from ionising or radioactive radiation and in connection with nuclear installations or processes. In these cases, the contract offers no insurance coverage.

Number 2 requires, in accordance with the Swiss Federal Law concerning the Insurance Contract that the questions of the Underwriters in connection with the insurance proposal, whether in writing or in another form enabling proof by text must be answered truthfully. A breach of this duty may lead to the cancellation of and to the loss of rights under the insurance contract; here it should be noted that breaches of duty committed up to 31 December 2005 shall be judged in accordance with the (for the Policyholder or Insured) stricter law in force prior to 1 January 2006 (withdrawal from the contract, forfeiture of premium) applying hitherto.

Numbers 3 and 4 outline individual obligations or duties, which must be observed by the Policyholder or Insured following the occurrence of a loss. A breach of these may entail a loss of entitlement to indemnity.

Number 5 sets out the addresses of the Underwriters to which notices are to be sent by the Policyholder or Insured or the addresses of the Policyholder or Insured to which notices are to be sent by the Underwriters, so that these may have the foreseen effect in a timely manner. Changes of address must be reported without delay.

Number 6 is linked with Number 3 and stipulates the time and place for the payment of claims as well as the preconditions for these becoming due and to be able to be made against the Underwriters.

Numbers 7 and 8 explain how and where a possible legal action can be directed against the Underwriters.

Number 9, finally, refers to the provisions of the Swiss Federal Law concerning the Insurance Contract, which always then apply, should the relevant insurance contract establish no provisions to the contrary (for example in the General Conditions or in the Special Conditions).

- E. Lloyd's makes two data collections (client data and claims data) in connection with the processing of the insurance contract. The client data serve as evidence of whether an insurance is in existence at Lloyd's. The claims data serve the adjustment of claims. The parties which receive the data are the respective Lloyd's Brokers and the Underwriters; in the event of a claim, potentially also the loss adjusting firm appointed by the Underwriters and, as the case may be, the Swiss Lloyd's UVG Claims Office. The data may only be passed on to other third parties with the agreement of the party or parties so affected or based on a law. The data are stored in part electronically, in part in paper form and are destroyed after ten years.
- F. **IMPORTANT NOTICE:** The definitive wording is exclusively and only that of the nine named provisions themselves; the pre-contractual information does not form part of the contract.

GENERAL CONDITIONS

The following General Conditions form part of the insurance contract concluded with the Underwriters. They all override all other provisions of this contract which state differently unless individual of these General Conditions have been explicitly amended in the other contractual documentation or have been marked as being not applicable.

1. EXCLUSIONS

This insurance does not cover:

1.1 any loss directly or indirectly occasioned by the following events: war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, confiscation, nationalisation, requisition, destruction of or damage to property by or under the order of any Government or Public or Local Authority.

1.2 (a) damage to any property whatsoever as well as any loss or expense resulting or arising therefrom and any consequential loss,

(b) any legal liability of whatsoever nature,

directly or indirectly caused by or contributed to by or arising from:

(i) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel,

(ii) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

2. NON-DISCLOSURE

2.1 Acts of non-disclosure committed from 1 January 2006

If the Policyholder or any person (or firm) insured hereunder shall have made upon conclusion of this insurance a false declaration of a material fact which he knew or ought to have known and about which he has been asked in writing or in another form enabling proof by text, or if he omitted to declare such fact, the Underwriters shall in accordance with Article 6 of the Federal Law concerning the Insurance Contract be entitled to cancel the contract by a written declaration or in another form enabling proof by text within four weeks of such false declaration or omission coming to their knowledge.

The Underwriters shall in such event be freed also from all duty to indemnify losses already incurred whose occurrence or scope has been influenced by the omission to declare or the false declaration of the material fact. Insofar as the Underwriters may have already indemnified a loss or losses they shall be entitled to reimbursement.

Also following the conclusion or renewal of this insurance, the Underwriters shall be entitled to cancel this contract during all subsequent renewal periods, if the Policyholder or Beneficiary falsely declared or omitted to declare such information to the Underwriters

2.2 Acts of non-disclosure committed up to 31 December 2005

Acts of non-disclosure, which were committed up to 31 December 2005 but which were only discovered from 1 January 2006 are to be judged in accordance with Article 6 of the Federal Law concerning the Insurance Contract in its previous version, which was valid until 31 December 2005.

3. OBLIGATION IN CASE OF LOSS OR DAMAGE

The Policyholder and the Beneficiary shall in the event of loss and as a condition precedent to any rights or claims under this contract report to the Underwriters without delay the occurrence of the loss and shall give the Underwriters all information, proof and evidence in respect of the loss as the Underwriters may reasonably require from them and as may be in their power. The insurance contract can stipulate a specific time limit for the submission of the notice of loss.

4. FRAUDULENT CLAIMS

If the Policyholder or the Beneficiary makes any claim knowing the same to be false or fraudulent as regards the amount or otherwise, the Underwriters shall be released from all liability in respect of all claims made under this insurance by that claimant.

5. NOTICE

All notices which may be required to be sent by the Policyholder or the Beneficiary to the Underwriters shall be served in writing, or in another form enabling proof by text, on the address contained herein, or subsequently brought in writing to the attention of the Policyholder, or at the seat of administration for the entire Swiss business. All notices addressed by the Underwriters to the Policyholder or the Beneficiary shall be served on the address last communicated to the Underwriters.

6. DUE DATE AND PAYMENT OF CLAIMS

Claims shall become due for payment four weeks after the Underwriters have received the information concerning the loss and have been able to satisfy themselves as to the correctness of the claim (Article 41 of the Federal Law concerning the Insurance Contract). Claims shall be paid at the Swiss domicile of the Insured or of the Policyholder.

7. LITIGATION

Legal actions for the full claim must be directed against the General Representative for Switzerland at the expense of Underwriters subscribing to this insurance (Article 15a Insurance Supervision Act, ISA; Representative Action (Prozessstandschaft)).

8. JURISDICTION

In the event of any litigation, the Underwriters shall accept the jurisdiction of the court at their seat of administration for the entire Swiss business, Seefeldstrasse 7, 8008 Zurich, or at the Swiss domicile of the Policyholder or Beneficiary.

9. APPLICABLE LAW

As far as this contract provides nothing to the contrary, the provisions of the Swiss Federal Law concerning the Insurance Contract of 2 April 1908 shall be applicable.

**LLOYD'S GENERAL CONDITIONS FOR PERSONAL
ACCIDENT INSURANCE
Form K (Switzerland)
NMA 1740A-4**

1. Subject and Extent of Insurance

Underwriters will pay compensation if the Assured at any time during the Period of Insurance shall sustain, anywhere in the world, bodily injury caused by accidental violent, external and visible means. If the accident is only partially the cause of the bodily injury, the compensation is due only for an adequately reduced proportion which if the occasion arises will be assessed by a medical expert. If the Insurance covers only non-occupational accidents, the journey to and from the Assured's place of occupation or business is insured.

2. Included in the Insurance are also:

Damage to health caused by: accidental ingestion or inhaling of substances which by their nature are damaging to the body or the inhaling of gas or fumes, accidental drowning, twisting, spraining and tearing of muscles and tendons, infection of wounds caused by an accident. Damage to health through heat and light to which the Assured has been exposed as a result of an insured accident as well as damage to health caused by freezing, heatstroke and UV-radiation, except for sunburn is also covered.

3. Exclusions

Unless agreed to the contrary, there are excluded from this Insurance accidents:

- 3.1 consequent on actions of war, whether such actions take an effect within or outside the territory of a nation at war, or consequent on invasion or civil war or civil disturbance.
- 3.2 resulting from disturbances of all kinds and from measures taken for their defence, unless the Assured proves that he was not actively engaged on the side of the person or persons who have caused the disturbances or was not engaged in inciting or provoking an assault.
- 3.3 sustained whilst the Assured is engaged in or taking part in naval, military or air force service or operations, other than service in the Swiss Army and Air Force (including active service) in peace time
- 3.4 whilst the Assured is engaged in or taking part in races with motor vehicles or motor boats and whilst training on the race track;
- 3.5 whilst travelling by air as a pilot, pilot instructor, pilot pupil, member of the crew or parachutist
- 3.6 whilst parachute jumping.
- 3.7 resulting from suicide or attempted suicide or intentional self injury or from the Assured's own intentional criminal act or other intentional offence or sustained whilst the Assured is in a state of insanity.
- 3.8 directly or indirectly resulting from disease or from any cause other than an accident within the scope of this Insurance or from medical or surgical treatment or the taking of drugs, except where such treatment is rendered necessary by bodily injury caused by an accident within the scope of this Insurance.
- 3.9 caused by ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.

4. **Compensations**

The compensations for which coverage is provided herein are as stated in the Schedule of this Policy, and for which an insured amount has been inserted.

5. **Death**

- 5.1 If the accident causes the Assured's death within two years from the day of the accident, the Underwriters will pay the compensation after deduction of any amounts which may have already been paid by them for permanent disablement of the Assured, resulting from the same accident. Persons who purposely cause the Assured's death through any kind of criminal action are excluded from compensation under this Insurance.
- 5.2 If the same event causes the death of the Assured and of his spouse and if children or adopted children of minor age are left behind or children who must be supported by them, the insured compensation for death shall be doubled and paid equally between the aforementioned children.

6. **Permanent Disablement**

- 6.1 The degree of permanent disablement shall be ascertained only when the Assured's condition can be expected to be permanent, but not later than two years after the accident. If the accident causes the Assured's death within two years after the accident, no compensation for permanent disablement is due.
- 6.2 The following percentages of the insured amount stated in the schedule for permanent disablement shall be paid for permanent total or permanent partial disablement (Scale A):

Loss of both arms, both hands, both legs at or above the knee joint, an arm and a leg at or above knee joint, or a hand and a leg at or above knee joint		100%
Complete paralysis		100%
Incurable and total alienation of the mind		100%
Loss of sight of both eyes		100%
Loss of sight of one eye		30%
Permanent total deafness in both ears		60%
Permanent total deafness in one ear		15%
Loss of an arm or of a hand	right 70%	left 60%
Loss of thumb	right 22%	left 18%
Loss of an index finger	right 15%	left 12%
Loss of any other finger	right 8%	left 6%
Loss of a leg below knee joint		50%
Loss of a leg at or above knee joint		60%

It is agreed that "loss" shall include "total loss of use". In the case of partial disablement the above percentages shall be reduced in proportion. If it is proved that the Assured is left-handed, the figures for right and left are reversed.

Any permanent disablement not enumerated above shall be paid for in proportion to the degree of permanent disability as compared with the categories enumerated above, but without taking into account the occupation of the Assured.

- 6.3 For psychological and nervous disturbances, compensation for disablement is due only inasmuch as they result from a physical illness of the nervous system resulting from the accident.
- 6.4 If the progressive Scale B of disablement is insured, the compensation shall be assessed as follows:
- up to and including 25% disablement: 100% of the amount insured for permanent disablement;
 - in excess of 25% up to and including 50% disablement: 200% of the amount insured for permanent disablement;
 - excess of 50% disablement: 300% of the insured amount for permanent disablement.

7. Daily Compensation

- 7.1 In case of the Assured becoming temporarily totally disabled, the Underwriters will pay the Daily Compensation stated in the Schedule. In case of temporary partial disablement, the amount of compensation will be reduced in proportion to the degree of the Assured's working capacity.
- 7.2 The Daily Compensation is limited to a total period of two years after the accident
- 7.3 No Daily Compensation shall become payable until the amount thereof has been ascertained. The Underwriters may however at their discretion make payments on account.
- 7.4 Total disablement means disablement which entirely prevents the Assured from attending to all his business or occupations of any kind and every kind or if he has no business or occupation from attending to all his usual duties.
- 7.5 Partial disablement means disablement which prevents the Assured from attending to a part of his business or occupation, or if he has no business or occupation from attending to a part of his usual duties, and any compensation for partial disablement will be proportionate to the degree of disability.

8. Hospital Daily Compensation

- 8.1 The Underwriters will pay the compensation stated in the Schedule during the Assured's necessary stay in hospital, clinic or during a necessary spa cure caused by the accident and independent from payments of Daily Compensation under para. 7 or of Medical Expenses under paragraph 9.
- 8.2 Hospital Daily Compensation will be paid for all stays in hospital up to two years duration within two years' from the date of the first admission. The first admission must commence within 12 months from the date of the accident, otherwise no Hospital Daily Compensation is due.

9. Medical Expenses

- 9.1 Medical Expenses means expenses properly incurred as a result of an accident for medical, dental, surgical, therapeutic, X-ray treatment, massage, nursing, medical supplies, transport by ambulance, hospital expenses and expenses for health cures provided the cure is made in a place approved by Underwriters. Expenses for transportation by air in an emergency are included if unavoidable for medical or technical reasons.

- 9.2 In addition coverage shall be provided for the purchase of new dentures and bridges, spectacles, hearing aids and orthopaedic aids as well as expenses for their repairs or replacement (replacement value) if they have been damaged or destroyed by an accident which caused the medical expenses covered under paragraph 9.1.
- 9.3 Compensation for Medical Expenses is limited to a total period of two years after the accident.
- 9.4 If Medical Expenses are insured hereunder in addition to medical expenses insured with a Health Insurance or the compulsory PA Insurance, then Underwriters will only pay the excess over the part thereby insured. However, deductibles and costs payable to the Health Insurance and compulsory PA Insurance will not be refunded by the Underwriters.
- 9.5 If Medical Expenses are insured hereunder with an agreed excess, the amount of the excess will be deducted from the expenses described in 9.1 and 9.2 and can also be set off against other payments due from the Underwriters under this Insurance.

GENERAL PROVISIONS

10. Duty to Notify

If the Assured on the conclusion of this Insurance has made a false declaration of a material fact which he knew or ought to have known or if he did not declare such a fact, the Underwriters are free of all liability if within four weeks after knowing of the false declaration they give notice of cancellation.

All questions asked by the Underwriters in the proposal form are agreed to relate to material facts. Non-disclosure on conclusion or renewal entitles the Underwriters to such cancellation during subsequent renewal periods.

If the Assured shall engage in any other occupation than disclosed in the proposal form he has to give written notice thereof to the Underwriters and if in the opinion of the Underwriters greater risk is incurred he has to obtain their permission in writing (subject to the payment of such premium as the Underwriters may require as the condition of giving such permission); otherwise no claim shall be payable in respect of any accident arising out of or in the course of such occupation and the Underwriters are, within 14 days after having received notice, entitled to cancel the Insurance.

11. SUVA Insurance

If during the period of Insurance the Assured becomes subject to a compulsory PA Insurance, he has to advise the Underwriters immediately. The compensation hereunder for Medical Expenses will be adjusted with retroactive effect to the day the Assured commenced the compulsory PA Insurance, against pro rata return of premium (condition 9.4 will apply)

12. Claims

- 12.1 Immediate notice must be given to the Underwriters of any accident to the Assured which causes or may cause a claim within the meaning of this Insurance and the Assured must as early as possible place himself under the care of a duly qualified medical practitioner.

Immediate notice must be given to the Underwriters in the event of the death of the Assured resulting from an accident within the meaning of this Insurance.

In no case will the Underwriters be liable to pay compensation to the Assured unless the medical adviser or advisers appointed by the Underwriters for the purpose shall be allowed so often as may be deemed necessary to undertake a medical examination of the Assured.

- 12.2 The Underwriters reserve all legal rights to reduce the compensation if a claim is due to gross negligence committed by the Assured.
- 12.3 If the Assured shall make any claim knowing the same to be false or fraudulent as regards amount or otherwise this Insurance shall become void and all claims hereunder shall be forfeited.
- 12.4 Claims arising from this Insurance expire two years after the events have taken place which have caused the claim. Repudiated claims expire, if no legal action is taken within two years after the date of the accident.
13. If the Insurance has been concluded with a Renewal Offer Clause, Underwriters will not refuse renewal during the period agreed in the Clause because the Assured is older than 70 years, provided the Assured accepts to pay an adequately adjusted premium which Underwriters may wish to charge.
14. All communications, which the Assured or Beneficiary have to make to the Underwriters, shall be given in writing to the address contained herein or to the place of registration advised subsequently in writing to the Assured or to the Mandataire General's office which is responsible for all of Lloyd's Swiss business. All notices addressed by the Underwriters to the Assured or Beneficiary shall be served to the address last known to the Underwriters.
15. Claims have to be paid at the domicile of the Assured or Beneficiary.
16. Legal actions for the full amount of a claim may be directed against the Underwriters subscribing to this Insurance. The defendant Underwriters have therein to be named "Lloyd's Underwriters, London, subscribing to policy No. **B0702/BB011440C/PA13**..... represented by their Mandataire General for Switzerland.
17. In case of any litigation, the Underwriters shall accept the jurisdiction of the court at their Seat of Administration for the entire Swiss business, Seefeldstrasse 7, 8008 Zurich, or at the Swiss domicile of the Assured or Beneficiary. Lloyd's Underwriters' Mandataire General for Switzerland shall be authorised to represent the Underwriters in any litigation with the right for substitution in legal proceedings.
18. As far as this Insurance contains nothing to the contrary, the provisions of the Federal Law concerning the insurance contract of the 2nd April, 1908, are applicable.

NMA1740A-4

ILLNESS ENDORSEMENT NO. 1 (SWITZERLAND)
(FOR ILLNESS INSURANCE OF 12 MONTHS OR MORE)
NMA -1612

EUROPLEX No B0702/BB011440C/PA13/

In consideration of the additional premium stated in the Schedule, which shall not be subject to any Long Term Discount, and notwithstanding anything contained herein to the contrary it is hereby agreed that, if the Assured shall be disabled by illness declaring itself at any time during the period of this Endorsement whilst the Assured is within the geographical limits specified in this Endorsement, the Underwriters will pay to the Assured according to the Schedule of Compensation payable in respect of illness set out in this Endorsement; nevertheless this Insurance extends to cover disablement by illness declaring itself during the currency of this Endorsement whilst the Assured is anywhere in the world provided that the illness was contracted within the geographical limits specified in this Endorsement.

This Endorsement is not subject to any long term agreement.

This Endorsement is subject otherwise to the provisions of the Insurance to which it is attached (except that Exclusion 3.3 and Exclusion 3.6 shall not apply to this Endorsement) and, in addition this Endorsement shall not cover disablement arising out of pregnancy or any illness or indisposition peculiar to the female sex or, in the case of either sex, out of venereal disease. References therein to "accident" shall be understood to mean "accident or illness" and in relation to illness any time limits shall run from the date the illness declares itself.

It is hereby mutually understood and agreed that the Assured has no illness insurance in force which has not been advised to the Underwriters and that no other illness insurance will be effected by the Assured during the currency of this Endorsement without the agreement of the Underwriters.

SCHEDULE OF COMPENSATION PAYABLE IN RESPECT OF ILLNESS

- | | |
|---|---|
| 1. Permanent Total loss of sight of both eyes by any causes other accident. | 100% of the sum insured under this Insurance in respect of Permanent Total Disablement by accident. No compensation is paid for Permanent Partial loss of sight. |
| 2. Permanent Total Disablement by Paralysis | 100% of the sum insured under this Insurance in respect of Permanent Total Disablement by accident. No compensation is paid for Permanent Partial Disablement by Paralysis. |
| 3. Temporary Total Disablement by Illness of any kind. | 100% of the daily indemnity insured under this Insurance in respect of Temporary Total Disablement by accident, not exceeding consecutive for any single disablement and excluding the first of disablement. No compensation is paid for Temporary Partial Disablement by Illness. |
| 4. Medical Expenses. | Medical Expenses incurred by the Assured as the result of illness, not exceeding 15 per cent of the total amount of any claim admitted under item 3. |

Geographical Limits:

Worldwide

Period of this Endorsement:

As per policy period

Additional Premium:

Included in the policy period

DISAPPEARANCE CLAUSE
(Personal Accident)

IN CONSIDERATION of the premium paid hereon it is hereby agreed that, subject to all the terms, limitations, conditions and exclusions of this Insurance except as specifically provided herein, if the insured person disappears during the currency of this Insurance and his/her body is not found within one year after his disappearance, and sufficient evidence is produced satisfactory to the Underwriters that leads them inevitably to the conclusion that the sustained accidental bodily injury and that such injury caused his/her death. Underwriters shall forthwith pay the death benefit under this Insurance provided that the person or persons to whom such sum is paid shall sign an undertaking to refund such sum to the Underwriters if the insured person is subsequently found to be living.

6/12/62
NMA1442

Your personal information notice

Who we are - We are the Lloyd's underwriter(s) identified in the contract of insurance and/or in the certificate of insurance.

The basics - We collect and use relevant information about you to provide you with your insurance cover or the insurance cover that benefits you and to meet our legal obligations.

This information includes details such as your name, address and contact details and any other information that we collect about you in connection with the insurance cover from which you benefit. This information may include more sensitive details such as information about your health and any criminal convictions you may have.

In certain circumstances, we may need your consent to process certain categories of information about you (including sensitive details such as information about your health and any criminal convictions you may have). Where we need your consent, we will ask you for it separately. You do not have to give your consent and you may withdraw your consent at any time. However, if you do not give your consent, or you withdraw your consent, this may affect our ability to provide the insurance cover from which you benefit and may prevent us from providing cover for you or handling your claims.

The way insurance works means that your information may be shared with, and used by, a number of third parties in the insurance sector for example, insurers, agents or brokers, reinsurers, loss adjusters, sub-contractors, regulators, law enforcement agencies, fraud and crime prevention and detection agencies and compulsory insurance databases. We will only disclose your

personal information in connection with the insurance cover that we provide and to the extent required or permitted by law.

Other people's details you provide to us - Where you provide us or your agent or broker with details about other people, you must provide this notice to them.

Want more details? - For more information about how we use your personal information please see our full privacy notice(s), which is/are available online on our website(s) or in other formats on request.

Contacting us and your rights - You have rights in relation to the information we hold about you, including the right to access your information. If you wish to exercise your rights, discuss how we use your information or request a copy of our full privacy notice(s), please contact us, the agent or broker that arranged your insurance. And will provide you with our contacts:

RVA Associati SA
Via Maggio 1A, CP 1829
CH-6901 Lugano
+41 91 260 02 02
info@rvasa.ch

LLOYD'S

LMA 9151

La Sua nota informativa personale

Chi siamo - Siamo il sottoscrittore/i sottoscrittori di Lloyd's indicati nel contratto di assicurazione e/o nel certificato di assicurazione.

Informazioni essenziali - Noi raccogliamo e utilizziamo le informazioni pertinenti relative a Lei al fine di fornirLe la Sua copertura assicurativa o la copertura assicurativa di cui Lei si avvale e per ottemperare ai nostri obblighi di legge.

Queste informazioni comprendono dettagli come il Suo nome, l'indirizzo e i dati di contatto, nonché eventuali altre informazioni che raccogliamo in relazione alla copertura assicurativa di cui Lei si avvale. Queste informazioni possono comprendere anche dati più sensibili come, ad esempio, informazioni sul Suo stato di salute ed eventuali condanne penali.

In alcuni casi, potremmo aver bisogno del Suo consenso per elaborare certi tipi di informazioni che La riguardano (compresi dati sensibili sul Suo stato di salute ed eventuali condanne penali). Se abbiamo bisogno del Suo consenso, glielo chiederemo separatamente. Lei non dovrà dare il Suo consenso e potrà ritirarlo in qualunque momento. Tuttavia, se Lei non darà il Suo consenso, o se lo ritirerà, ciò potrebbe incidere sulla nostra capacità di fornire la copertura assicurativa di cui Lei si avvale e potrebbe impedirci di fornirLe la copertura o di gestire le Sue domande di indennizzo.

Per come funziona l'assicurazione, le Sue informazioni potrebbero essere condivise con vari soggetti terzi operanti nel settore assicurativo e da loro utilizzate. Ad esempio, assicuratori, agenti o broker, riassicuratori, liquidatori, subfornitori, autorità di regolamentazione, autorità giudiziarie,

organismi preposti alla prevenzione e al rilevamento delle frodi e del crimine e database assicurativi obbligatori.

Divulgheremo le Sue informazioni personali solo in relazione alla copertura assicurativa che forniamo e nella misura richiesta o permessa dalla legge.

I dati su altre persone da Lei forniti a noi -

Nel caso in cui Lei fornisca a noi, al Suo agente o broker i dati relativi ad altre persone, Lei dovrà fornire a tali persona la presente nota informativa.

Desidera ulteriori informazioni? - Per ulteriori informazioni su come utilizziamo le Sue informazioni personali, consulti le nostre note informative complete, disponibili online sui nostri siti o, su richiesta, in altri formati.

Come contattarci e i Suoi diritti - Lei ha dei diritti in relazione alle informazioni che noi conserviamo su di Lei, tra cui il diritto di accesso alle Sue informazioni. Se desidera esercitare i Suoi diritti, parlare di come utilizziamo le Sue informazioni o richiedere una copia delle nostre note informative complete, può contattare noi, l'agente o il broker che ha organizzato la Sua assicurazione e loro le forniranno i nostri dati di contatto:

RVA Associati SA
Via Maggio 1A, CP 1829
CH-6901 Lugano
+41 91 260 02 02
info@rvasa.ch

LLOYD'S

LMA 9151