



INSURER	CIA. EUROPEA DE SEGUROS, S.A. (CIF: A-28008480)
CONTRACTING PARTY	UGR – UNIVERSIDAD DE GRANADA (CIF Q-1818002-F)
POLICY No.	07631000365
PERIOD OF COVERAGE	2014/2015 SCHOOL YEAR

INSURANCE CERTIFICATE MANDATORY ACCIDENT AND TRAVEL ASSISTANCE
POLICY No. 07631000365

COVERAGE AND LIMITS PER POLICY HOLDER

<u>RISKS COVERED</u>	<u>SUMS INSURED PER PERSON</u>
1. LUGGAGE:	
1.1 MATERIAL LOSS	€ 300.00
2. ACCIDENTS	
THE MAXIMUM COMPENSATION IN CASE OF AN ACCIDENT WILL BE € 3,000,000.00, REGARDLESS OF THE NUMBER OF INSURED PARTIES AFFECTED.	
2.1. ACCIDENTS DURING THE DEVELOPMENT OF ACTIVITIES WITHIN THE SCOPE OF MATRICULATION OF THE UGR	
▪ IN CASE OF DEATH	€50,000.00
▪ IN CASE OF PERMANENT DISABILITY	€50,000.00
▪ HEALTHCARE IN SPAIN PER ACCIDENT	€ 6,000.00
3. ASSISTANCE	
3.1 MEDICAL, SURGICAL, PHARMACEUTICAL AND HOSPITALISATION EXPENSES	
▪ Expenses incurred abroad due to an illness or accident that occurred abroad	€60,000.00
3.2 EXTENSION OF STAY IN A HOTEL; 60 Euros/day to a limit of	€ 600.00
3.3 REPATRIATION OR MEDICAL TRANSPORT IN THE CASE OF INJURIES DUE TO AN ACCIDENT OR ILLNESS	Unlimited
3.4 REPATRIATION OR TRANSPORT IN THE EVENT OF DEATH	Unlimited
3.5 TRAVEL FOR ONE ACCOMPANYING PERSON IN THE EVENT OF HOSPITALISATION	Unlimited
3.6 ACCOMMODATION EXPENSES FOR A COMPANION; 60 Euros/day to a limit of	€ 600.00
3.7 RETURN TRIP OF THE POLICY HOLDER IN THE EVENT OF THE DEATH OF A NON-INSURED FAMILY MEMBER	Unlimited
3.8 TRANSMITTING MESSAGES	Included
4. CIVIL LIABILITY	
4.1 PRIVATE CIVIL LIABILITY	€60,000.00
5. PECUNIARY LOSS	
5.1 LOSS OF CLASES	€1.200,00
5.2 LOSS OF REGISTRATION	€1.800,00

INSTRUCTIONS TO BE FOLLOWED IN CASE OF AN ACCIDENT OR LOSS:

- 1 - **Baggage:**
 - In case of theft, provide a copy of the report submitted to the local Police or Authorities, detailing the circumstances.
 - In case of damage or loss caused by the carrier, provide the original certification issued by the Carrier, which must state the events as they happened.
- 2 - **Accidents:**
 - Communicate the incident as soon as possible to Cia. Europea de Seguros.
- 4 - **Civil Liability:**
 - Submit a letter stating the events in detail and provide all the documents submitted by the victims, indicating their names and addresses. You should not accept, negotiate or reject any claim without the express authorisation of the INSURER.
- 5- **Pecuniary Loss:**
 - Report the event as soon as possible to the INSURER, providing medical report detailing circumstances, consequences and treatment prescribed to the INSURED as a result of the accident.
 - Provide proper proof that such amounts have been previously paid by the INSURED.

VERY IMPORTANT: CLAIMS RELATING TO THE RISKS MENTIONED ABOVE WILL BE SUBMITTED AFTER RETURNING FROM THE TRIP BY CONTACTING:
AVDA. DE LA VEGA, 24-28108 ALCOBENDAS - TELEPHONE: 91.387.46.97 Fax: 91.387.46.98
- 3 - **Assistance:**
 - Assistance must be requested by telephone, stating the name of the insured party, the insurance policy number, location and a contact telephone number together with a description of the problem that has arisen.
 - Invoices for services that have not been requested to Cia. Europea de Seguros will not be accepted, except if unavoidable circumstances are demonstrated.

FROM SPAIN, CALL 91 344.11.55
FROM ABROAD, CALL 34-91-344.11.55

This Terms & Conditions extract is for information purposes only and does not replace the Policy's General and Specific Terms & Conditions, which will prevail in the event of any discrepancy.
The Policy's General Conditions are available at Cia. EUROPEA DE SEGUROS, S.A. or at UNIVERSIDAD DE GRANADA (CIF Q-1818002-F)