Neat

Camping insurance FLEX +



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Do you wish to cancel your stay?
You must first notify the campsite with which you made your booking as soon as you become aware of the event preventing your departure.
You must then report your claim within 5 days at:
https://declare.neat.eu/campings-independants
Remember to gather the following information:

- Your policy number,
- The reason for your cancellation,
- Your identity document,
- Your home address,
- The telephone number where we can reach you,
- The reason for your claim,
- The booking confirmation email for your stay or the purchase invoice for your stay,
- The cancellation invoice provided by the campsite,
- Bank account details (RIB).

I. Preamble



The FLEX+ policy is a group insurance policy with optional individual enrollments (No. 4.001.532.235):

- **Taken out by NEAT** (hereinafter referred to as "The Managing Broker" or "Neat"), insurance brokerage company, SAS with a share capital of **106,032.48 €**, having its registered office at 16 Place des Quinconces, 33000 Bordeaux, registered with the Bordeaux Trade and Companies Register under number 913 676 581 and with ORIAS under number 22004644 - Intra-community VAT No.: FR69913676581 - Professional Indemnity Insurance and Financial Guarantee compliant with Articles L 512-6 and L 512-7 of the French Insurance Code,
- **With the Insurer Helvetia Global Solutions Ltd** (hereinafter referred to as "the Insurer" or "Helvetia"), a public limited company under Liechtenstein law, whose registered office is located at Aeulestrasse 60, 9490 Vaduz, Principality of Liechtenstein, registered in the Commercial Register of the Principality of Liechtenstein under number FL-0002.191.766-9, licensed as an insurance undertaking by the financial market authority of the Principality of Liechtenstein (FMA Liechtenstein). Helvetia is authorized to carry out insurance activities in France under the freedom to provide services, notified to the ACPR (ID Refassu: 224324). Helvetia is subject to supervision by the FMA Liechtenstein, Landstrasse 109, Postfach 279, 9490 Vaduz, Principality of Liechtenstein,
- **Distributed by** the Policyholder's distribution network having signed a distribution agreement with NEAT.

NEAT and Helvetia (as an insurance undertaking operating in France under the freedom to provide services) are subject to the supervision of the Autorité de Contrôle Prudentiel et de Résolution, 4 place de Budapest CS 92549 75436 Paris Cedex 09.

II. Schedule of benefits



INSURANCE COVERAGES	LIMITS AND DEDUCTIBLES
CANCELLATION WITH SUPPORTING DOCUMENTATION	Max. 5,000 € per person and 30,000 € per event. No deductible in the event of cancellation for medical reasons. For cancellation in the event of loss of identity documents or cancellation of paid leave by the employer, a deductible of 25% will apply. For other reasons, a deductible of 15 euros per file.
CANCELLATION WITHOUT SUPPORTING DOCUMENTATION	Reimbursement of cancellation fees up to the limit of 5,000 € per claim. Deductible of 30% of the total amount of the stay.
MODIFICATION FEES	Coverage up to a maximum of 2,000 € per person and 10,000 € per event.
LATE ARRIVAL	Reimbursement of unused land-based services pro rata temporis of the rental, up to a maximum of 4,000 € per rental or pitch, within the limit of 25,000 € per event. Deductible: 1 day.
CURTAILMENT EXPENSES	Reimbursement of unused land-based services pro rata temporis, including any cleaning costs of the rental, in the event of premature return. Coverage up to a maximum of 4,000 € per person and 25,000 € per event. Deductible: 1 day.
RENTAL DAMAGE	Reimbursement of damage up to the limit of 800 € per claim. Deductible and coverage trigger threshold: 60 €.
REPLACEMENT VEHICLE following a breakdown, an accident involving damage or a theft during the stay.	Coverage of a replacement vehicle of a category equivalent to the immobilized vehicle for a maximum duration of 3 consecutive days
PERSONAL PROPERTY LEFT BEHIND IN THE RENTAL: Reimbursement of shipping costs for personal property left behind in the rental	Coverage for the return of a single item, up to a maximum of 150 € per file.
VETERINARY MEDICAL EXPENSES AND DOG/CAT ASSISTANCE, including: ✓ Advice and notification of competent bodies in the event of running away/disappearance ✓ Recovery costs ✓ Rabies testing costs (in the event of disappearance abroad)	Coverage of a maximum of 2 veterinary consultations per stay, within the limit of 250 € for all Medical Expenses and Assistance coverages combined.

III

Scope and duration of your coverage



Effective date of coverages:

- CANCELLATION WITH SUPPORTING DOCUMENTATION AND CANCELLATION WITHOUT SUPPORTING DOCUMENTATION: the day the policy is taken out
- Left behind property: the day of departure from the place of stay
- Other coverages: the day of arrival at the place of stay

Expiration of coverages:

- CANCELLATION WITH SUPPORTING DOCUMENTATION AND CANCELLATION WITHOUT SUPPORTING DOCUMENTATION: the day the stay starts
- Left behind property: 10 days after the insured's return to their home
- Other coverages: the day of departure from the place of stay

Subscription deadline:

This policy must be taken out within a maximum of 72 hours following the purchase of the stay or at the latest before the cancellation scale takes effect. It will not be possible to declare a cancellation without supporting documentation if the policy was taken out when the stay began within 30 days after the booking date.

The period of validity of the coverages corresponds to the duration of the services sold by the organizer of the stay. **Under no circumstances may the duration of the coverage exceed 3 months starting from the day of departure for the place of stay.**

IV. Definitions



We, the Insurer
HELVETIA, A public limited company with a capital of 77,480,000.00 Swiss Francs - Address: Helvetia Global Solutions Ltd, Aeulestrasse 60, 9490 Vaduz, Liechtenstein. Undertaking governed by the French Insurance Code - Foreign company registered with the RCS - Registered office: 40 rue Dufourstrasse Saint Gallens, Saint Gallen, Switzerland. Company belonging to the Group Helvetia Holding SA registered under SIREN 775753072.

Serious bodily injury
Sudden deterioration of health resulting from the sudden action of an external cause not intentional on the part of the victim, certified by a competent medical authority, leading to the issuance of a prescription for medication for the benefit of the patient and implying the cessation of all professional or other activity.

Fortuitous event
Unintentional, unforeseeable, irresistible, and external event.

Terrorist attack
Any act of violence, constituting a criminal or illegal assault carried out against persons and/or property in the country in which you are staying, intended to seriously disturb public order through intimidation and terror, and covered by the media. This "terrorist attack" must be recorded by the French Ministry of Foreign Affairs or the Ministry of the Interior.
If several terrorist attacks take place on the same day, in the same country, and if the authorities consider them to be one and the same coordinated action, this event will be considered as one and the same event.

Insured
Natural person or groups duly insured under this contract and hereinafter referred to as "you". For Assistance and Insurance coverages, these individuals must have their domicile in France, in the DOM-ROM COM and sui generis collectivities, or in Europe.

Injury
Sudden impairment of health resulting from the sudden action of an external cause unintentional on the part of the victim, certified by a competent medical authority.

Natural disaster
Abnormal intensity of a natural agent not resulting from human intervention. Phenomenon, such as an earthquake, volcanic eruption, tidal wave, flood, or natural cataclysm, caused by the abnormal intensity of a natural agent, and recognized as such by public authorities.

Domicile
For Insurance cover, the primary and habitual place of residence in France, in the DOM-ROM COM and sui generis collectivities, or in Europe is considered as domicile. In the event of a dispute, the tax domicile constitutes the domicile.

DROM
(Overseas Departments and Regions), COM (Overseas Collectivities) and sui generis collectivities: Guadeloupe; Martinique, French Guiana, Reunion, French Polynesia, Saint Pierre and Miquelon, Wallis and Futuna, Mayotte, Saint Martin, Saint Barthélemy, New Caledonia.

EXCLUSION
Everything that is expressly never covered by the Insurance Policy

Epidemic
Abnormally high incidence of a disease during a given period and in a given region.

Abroad
All countries outside your country of domicile.

Europe
Europe means the following countries: Germany, Andorra, Austria, Belgium, Bulgaria, Cyprus, Croatia, Denmark, Spain, Estonia, Finland, Metropolitan France, Gibraltar, Hungary, Greece, Ireland, Italy and Islands, Liechtenstein, Latvia, Lithuania, Luxembourg, Malta, Principality of Monaco, Norway, Netherlands, Poland, Portugal, Romania, United Kingdom, Slovakia, Slovenia, Czech Republic, San Marino, Sweden, and Switzerland.

Events covered by insurance
- Cancellation
- Late arrival
- Trip interruption
- Forgotten item
- Replacement vehicle

Provision of services
The assistance services covered under this agreement can only be triggered with the prior approval of the Insurer. Consequently, no expenditure made on their own authority by the Beneficiaries may be reimbursed by the Insurer.

Deductible
Portion of the loss left to the Insured's charge provided for in the policy in the event of compensation following a claim. The deductible may be expressed as an amount, percentage, day, hour, or kilometer.

Illness
Sudden and unforeseeable impairment of health certified by a competent medical authority.

Serious illness
Sudden and unforeseeable impairment of health certified by a competent medical authority resulting in the issuance of a prescription for medical treatment for the patient and entailing the cessation of any professional or other activity.

Maximum per event
Where the cover applies to multiple insureds who are victims of the same event and insured under the same special terms, the insurer's cover is in any case limited to the maximum amount provided under this cover regardless of the number of victims. Subsequently, indemnities are reduced and paid proportionally to the number of victims.

Family members
Your legal or de facto spouse or any person bound to you by a civil union (Pacs), your ascendants or descendants or those of your spouse, your fathers-in-law, mothers-in-law, brothers, sisters, including the children of the spouse or cohabiting partner of one of your direct ascendants, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, or those of your spouse. They must be domiciled in the same country as you unless stipulated otherwise in the policy.

Nullity
Any fraud, falsification, or false statement and false testimony likely to trigger the covers provided for in the agreement shall result in the nullity of our commitments and the forfeiture of the rights provided for in said agreement.

Valuables
Pearls, jewelry, watches, worn furs, as well as any sound and/or image reproduction device and their accessories, hunting rifles, fishing equipment, portable computers.

Pandemic
Epidemic spreading across a vast territory, crossing borders, and qualified as a pandemic by the World Health Organization (WHO) and/or by the competent local public authorities of the country where the claim occurred.

Quarantine
Isolation of the person, in case of suspected illness or proven illness, decided by a local competent authority, in order to avoid a risk of propagation of said illness within an epidemic or pandemic context.

Covered trip
Trip for which you are insured and have paid the corresponding premium, with a maximum duration of 90 consecutive days.

Claim
Random event likely to trigger the coverage of this policy.

Territory
Worldwide.

V Description of coverages

"All causes except" cancellation and modification fees

Cancellation with supporting documents

We reimburse deposits or any sums retained by the trip organizer, within the **limits and after deduction of any applicable deductible, as shown in the schedule of benefits**, when you are required to cancel your entire trip prior to departure (outbound). The reason for your cancellation must be sudden, unforeseeable, and beyond your control.

Modification fees

In the event of a change to your travel dates, we reimburse the fees incurred by postponing the dates of the covered trip as contractually provided for in the terms of sale.
In any case, the amount of this indemnity may not exceed the amount of cancellation fees due as of the date the event causing the modification occurred.
Cancellation and modification benefits cannot be combined

What we exclude:

In addition to the exclusions listed in Chapter VI. WHAT ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OF OUR COVERAGES? we cannot intervene if the cancellation results from:

- **any circumstance that merely detracts from the enjoyment of your trip;**
- **the mere fact that the destination of your trip is advised against by the French Ministry of Foreign Affairs;**
- **any event for which the tour operator could be held liable under Law No. 92-645 of July 13, 1992;**
- **complications of pregnancy beyond the 6th month.**

- **An event, illness, or accident that was the subject of an initial diagnosis, relapse, aggravation, or hospitalization between the date of booking the trip and the date of taking out the insurance policy,**
- **Any circumstance merely detracting from enjoyment,**
- **Pregnancy and, in any case, voluntary termination of pregnancy, childbirth, in vitro fertilization and their consequences, as well as complications due to the state of pregnancy beyond the 28th week,**
- **Failure to obtain required vaccinations,**
- **Default of any kind, including financial, of the carrier making the fulfillment of its contractual obligations impossible,**
- **Lack or excess of snow,**
- **Any medical event of a psychological, psychic, or psychiatric nature that did not result in hospitalization exceeding 3 consecutive days after taking out this Policy,**
- **Pollution, the local sanitary situation, natural disasters subject to the procedure referred to in Law No. 82.600 of July 13, 1982, as well as their consequences,** meteorological or climatic events,
- **The consequences of criminal proceedings brought against you,**
- **Any event occurring between the date of booking the trip and the date of taking out the insurance policy.**
- **The lack of fortuity,**
- **An intentional act and/or an act punishable by Law, the consequences of alcohol-induced states and the use of drugs, any narcotic substance mentioned in the Public Health Code, and medications and treatments not prescribed by a doctor,**
- **The mere fact that the geographic destination of the trip is advised against by the Ministry of Foreign Affairs of the insured's country,**
- **An act of negligence on your part,**
- **Any event for which liability or coverage could fall upon the trip organizer in application of the applicable Tourism Code,**
- **The non-presentation, for any reason whatsoever, of documents essential to the trip, such as passport, driver's license, national ID card, visa, travel tickets, vaccination record, except in the event of theft within 48 hours prior to departure.**
- **An input error when booking your trip.**
- **Resulting from a refusal of paid leave by your employer occurring after the date of** booking your trip
- **Illness or an accident affecting neither yourself nor any Family Member**

The "all cause except" Cancellation cover does not cover the inability to depart related to the closure of borders, material organisation, accommodation conditions or security at the destination.

What amount do we cover?

We cover the amount of cancellation fees incurred on the date of the event that may trigger the cover, in accordance with the General Terms and Conditions of sale of the travel organiser, up to the maximum limit and subject to the deductible indicated in the schedule of benefits.
Administrative fees, gratuities, visa fees, taxes, cleaning fees as well as the premium paid for taking out this policy are never refundable.

Within what time frame must you report the claim?

- Medical reason: you must report your claim as soon as it is established and have a competent medical authority certify that the severity of your state of health is such as to contraindicate your stay. If your cancellation is subsequent to this contraindication to stay, our reimbursement will be limited to the cancellation fees applicable on the date of the contraindication (calculated in accordance with the travel organiser's scale of charges).
- For any other cancellation reason: you must report your claim as soon as you become aware of the event that may trigger the cover. If your trip cancellation is subsequent to this date, our reimbursement will be limited to the cancellation fees applicable on the date of the event (calculated in accordance with the travel organiser's scale of charges).

What are your obligations in the event of a claim?

Your claim notification must be accompanied by:

- In the event of illness or accident, a medical certificate stating the origin, nature, severity and foreseeable consequences of the illness or accident,
- In the event of death, a death certificate and family record book (livret de famille),
- In other cases, any supporting document.

You must provide us with the medical documents and information necessary for the assessment of your file using the pre-printed envelope addressed to the medical advisor that we will send you upon receipt of the claim notification, as well as the medical questionnaire to be completed by your doctor.
If you do not hold these documents or information, you must obtain them from your doctor and send them to us. You must also send us—the communication of these addi-

tional documents having to be made using a pre-printed envelope addressed to the medical advisor—any information or documents that may be requested from you in order to justify the reason for your cancellation, and in particular:

- All photocopies of prescriptions for medicinal products, tests or examinations, as well as any documents proving their dispensing or performance, and in particular health insurance claim forms including, for prescribed medicinal products, a copy of the corresponding price tags,
- Statements from the Social Security or any other similar organisation, relating to the reimbursement of treatment costs and the payment of daily allowances,
- The paid invoice for the debit balance that you are required to pay to the travel organiser or that the latter retains,
- Your insurance policy number,
- The registration form issued by the travel agency or the organiser,
- In the event of an accident, you must state the causes and circumstances thereof and provide us with the names and addresses of the liable parties, as well as, where applicable, of witnesses.
- In the event of denied boarding: a supporting document issued by the transport company that denied you boarding, or by the health authorities; in the absence of this supporting document, no compensation will be possible).
- And any other necessary document.

Furthermore, it is expressly agreed that you accept in advance the principle of an examination by our medical advisor. Therefore, if you object to it without legitimate grounds, you would forfeit your rights to cover.
It is expressly agreed that you release your doctor from medical confidentiality towards this medical advisor. On pain of forfeiture of rights, the Insured claiming cover must provide all contractually required documents and may not rely, except in cases of force majeure, on any reason preventing their submission. If you object to it without valid reason, you would risk losing your rights to cover. By express agreement, you acknowledge our right to make the activation of cover conditional upon compliance with this condition.

No-justification cancellation

What do we cover?

The "No-justification cancellation" cover allows you to obtain a reimbursement for your stay without having to provide supporting evidence proving the cause of the cancellation. You will, however, always be asked for a reason.
The cancellation cover applies to the entire stay.
We reimburse you for the amount of cancellation fees invoiced in accordance with the terms of the cancellation scale set out in the campsite's general terms and conditions.
Administrative fees, gratuities, visa fees, taxes, cleaning fees as well as the premium paid for taking out this policy are never refundable.

The compensation paid under this cover may under no circumstances exceed the price of the Stay declared when taking out this Policy, within the limits specified in the Schedule of Benefits and after deduction of a deductible, the amount of which is specified in the Schedule of Benefits.

Within what time frame must the claim be reported?

- 1/ As soon as the illness first appears or as soon as you become aware of the event triggering the cover, you must **IMMEDIATELY notify your campsite.**
- 2/ Furthermore, you must report the claim to **NEAT – 16 place des quinconces 33000 Bordeaux or: https://declare.neat.eu/campings-independants**

You will systematically be asked for:

- The original paid purchase invoice for the stay,
- The original invoice of the fees remaining at your expense following cancellation with the campsite,
- Bank account details (RIB),
- And a supporting document proving the family relationship with the Insured (if needed).

Under the "no-justification" Cancellation cover, trips whose performance is rendered impossible as a result of the following are excluded:

- Any default, including financial default, of the campsite.
- **Cancellation by the campsite of all or part of the services planned during the stay**

Late arrival

What do we cover?

We guarantee you reimbursement pro rata temporis for the unused period resulting from taking possession more than 24h late of the rented accommodation or hotel room, as a result of one of the events listed in the cancellation cover.
Cover cannot be combined with cancellation cover
In addition to the exclusions listed in the section "WHAT

ARE THE GENERAL EXCLUSIONS APPLICABLE TO ALL OUR COVERS?", we cannot intervene if the cancellation results from:

- **1. Any default, including financial default, of the campsite.**
- 2. **Cancellation by the campsite of all or part of the services planned during the stay**
- **3. Absence of fortuitous event, which includes:** 1) **Events, illnesses or accidents that were the subject of a first diagnosis, relapse, or aggravation occurring prior to the date of accession to this policy and making the trip impossible for the insured.** 2) **Accidents and illnesses whose origin is known prior to taking out the policy, except for unforeseeable deterioration of health.** 3) **Events occurring between the date of booking the trip and the date of taking out this agreement.** 4) **Cancellations resulting from a refusal of paid leave by the employer occurring after the date of purchase of the stay** 5) **Pollution, local health situation, natural disasters subject to the procedure referred to by Law No. 82.600 of 13 July 1982 as well as their consequences,** meteorological or climatic events, 6) **Illness or an accident concerning neither yourself nor one of your family members.**

What are your obligations in the event of a claim?

You must:

- Send to NEAT all documents necessary for building the file and thereby prove the merits and the amount of the claim.

In all cases, the detailed invoices from the organiser showing the land services and the transport services will systematically be requested from you.
Without the communication to our medical advisor of the medical information necessary for the assessment, the claim cannot be settled.

Curtailment costs

What do we cover?

If you must interrupt the stay covered by this contract, we undertake to reimburse the unused "outdoor hospitality services" (excluding administration fees, the insurance premium, and any taxes) as well as any cleaning costs for the rental, for which you cannot claim reimbursement, replacement, or compensation from the service provider, in the event that you are obliged to leave and return the rented pitch/accommodation to the establishment following:

- Serious illness, serious accident, or death of yourself, your de jure or de facto spouse, your ascendants or descendants up to the 2nd degree, fathers-in-law, mothers-in-law, sisters, brothers, brothers-in-law, sisters-in-law, sons-in-law, daughters-in-law, your legal guardian, or a person habitually living under your roof, or the person accompanying you during your stay, expressly named and insured under this contract.
- Serious illness, serious accident, or death of your professional replacement named at the time of subscription, of the person responsible for the care of your minor children during your stay, or of a disabled person of whom you are the legal guardian living under the same roof as you, whether or not you are their legal guardian.
- Serious damage from fire, explosion, water damage, or caused by natural forces to your business or private premises and requiring your imperative presence to take necessary protective measures.
- Theft on your business or private premises provided that the extent of this theft requires your presence.

What are your obligations in the event of a claim?

You must send to NEAT all documents necessary to compile the file and thus prove the validity and the amount of the claim.
In all cases, the original itemized invoices from the tour operator showing the land-based services and the transport services will systematically be requested from you.

What we exclude:

In addition to the exclusions listed under the heading "What are the general exclusions applicable to all of our coverages?", interruptions resulting from the following are not covered:

- **Aesthetic treatment, a cure, voluntary termination of pregnancy, in vitro fertilization and its consequences;**
- **A psychological or mental or depressive illness without hospitalization of less than 3 days;**
- **Epidemics or pandemics.**

Without providing our medical advisor with the medical information necessary for assessing the claim, the file cannot be settled.
It is expressly agreed that you release your physician from medical confidentiality with respect to this medical advisor. Under penalty of forfeiture of coverage, the Insured claiming coverage must submit all contractually required documents without being able to plead, except in cases of force majeure, any reason preventing their

production. If you refuse without a valid reason, you risk forfeiting your rights to coverage. By express agreement, you acknowledge our right to make coverage conditional upon compliance with this requirement.

Tenant's damage

What do we cover?

We cover the pecuniary consequences of property damage caused to the entrusted movable property located inside the rented accommodation and belonging to the owner of the accommodation concerned, according to the threshold and within the limits set out in the Schedule of Benefits.

What are your obligations in the event of a claim?

- 1. As soon as you become aware of the event giving rise to coverage, you must IMMEDIATELY notify your campsite.
- 2. You must report your claim to NEAT by telephone at **05 54 54 25 22**, by post at 16 place des quinconces 33000 Bordeaux , electronically at **sinistre@neat.eu** or via the form at the following address: **https://declare.neat.eu/campings-independants** , within five business days of becoming aware of it, except in cases of fortuitous event or force majeure.

After this period, if we suffer prejudice as a result of the late declaration, you lose all right to compensation.

Replacement vehicle

The "Replacement vehicle" cover applies if you find yourself in difficulty following the immobilization of your vehicle due to a breakdown, a physical damage accident, or theft during the covered stay.
If the immobilization of the vehicle exceeds 24 hours or the repair time exceeds 8 hours or the stolen vehicle is not recovered within 48 hours, we provide a replacement vehicle of an equivalent category to the immobilized vehicle for a **maximum duration of 3 consecutive days**, and in all cases only during the period of immobilization.

What we exclude

In addition to the general exclusions stated in the common provisions under the heading "GENERAL EXCLUSIONS" below, we cannot intervene to cover the pecuniary consequences of the tenant's civil liability towards the owner arising from:

- **Property damage caused to the rented accommodation following a Fire, an Explosion, or water damage originating in the accommodation occupied by the Insured.**
- **Property damage caused to neighbors and third parties following a Fire, an Explosion, or water damage originating in the accommodation rented by the Insured and which the owner is required to compensate.**

Conditions of provision:

- the category of the replacement vehicle is equivalent to the immobilized vehicle;
- the replacement vehicle must be returned to the rental agency where it was made available;
- you must fulfill the conditions required by the vehicle rental companies;

Personal effect left behind in the rental

What do we cover?

Upon presentation of the shipping invoice for the Forgotten item and up to the limit stated in the Table of Benefits, we will reimburse the shipping costs of the Forgotten item from the rental location to the Home.
The coverage applies to a single Forgotten item per rental, it being specified that the said Forgotten item must comply with the following weight and dimensions:

What we exclude

In addition to the exclusions listed under the heading "What are the general exclusions applicable to all of our coverages?", we cannot intervene or indemnify if the immobilization is consecutive to:

- **running out of fuel and fuel errors;**
- **a flat tire;**
- **loss, leaving behind, theft, or breakage of keys with the exception of key breakage in the steering** lock of the vehicle;
- **repeated breakdowns of the same nature caused by failure to repair the vehicle after an initial intervention by our services within the month preceding the event;**
- **air conditioning problems and breakdowns;**

- **bodywork damage not resulting in the immobilization of the vehicle, unless otherwise contractually stipulated;**
- **consequences of the vehicle's immobilization to carry out maintenance operations;**
- **breakdowns of alarm systems not factory-installed.**

Our coverage excludes reimbursement of:

- **fuel costs;**
- **items and personal belongings left in and/or on the vehicle;**
- **customs and vehicle storage costs except those subject to prior approval by the**
- **assistance service;**
- **transported goods and animals**
- **costs of repairs and towing of vehicles, spare parts;**
- **any expenses other than the provision of a replacement vehicle within the limits set out**
- **in the table of coverage amounts.**

Our coverage excludes from the Replacement Vehicle cover the immobilization of the following vehicles:

- **motorcycles under 125 cm3;**
- **mopeds, scooters;**
- **luggage trailers with a maximum authorized**
- **gross vehicle weight of more than 750 kg;**
- **non-standard manufactured trailers and all trailers other than those intended for the transport of luggage, as well as boat trailers, vehicle transport trailers.**
- Maximum weight: less than 10 kilograms
- Maximum dimensions: the sum of the length, width, and height of the package must not exceed 150 centimeters.

Under no circumstances can the Insurer be held liable for:

- delays attributable to the transport organizations contacted for the delivery of the Forgotten item.
- breakage, loss, damage, or theft of the Forgotten item during transit;
- consequences resulting from the nature of the Forgotten item;
- refusal of authorization for shipment of the Forgotten item by national or international customs services.

What we exclude

In addition to the exclusions listed under the heading "What are the general exclusions applicable to all of our coverages?", we exclude:

- **Any item subject to national, European, and international regulations on dangerous goods, such as notably defined by the regulations of the International Civil Aviation Organization (ICAO);**
- **All items containing explosives, ammunition, gases, solid and liquid flammable materials, oxidising, toxic, and/or infectious substances, corrosive or radioactive products, lithium batteries and cells;**
- **All items which, due to their nature, packaging, or wrapping, may present a hazard to personnel, third parties, the environment, the safety of transport vehicles, or damage other transported items, machinery, vehicles, or property belonging to third parties;**
- **Counterfeit articles and/or articles contrary to the laws and regulations in force;**
- **Narcotics or any other illicit substance;**
- **Firearms;**
- **Items requiring temperature-controlled transport;**
- **Publications or audiovisual media prohibited by any applicable law or regulation;**
- **Dead or living animals;**
- **Any content whose transport by postal shipment is likely to violate human dignity, the integrity, or the respect of the human body, particularly funeral ashes and relics;**
- **Banknotes, negotiable instruments, payment cards, and coins that are legal tender and discharge of debt intended for circulation in France, and precious metals;**
- **Precious stones, pearls, identity documents, and any other valuables;**
- **Items whose transport constitutes a commercial operation and those intended for sale;**
- **Motor vehicles, automotive accessories, gardening equipment, items containing liquids, furniture;**
- **Household appliances or computer equipment and accessories, hi-fi equipment, musical instruments.**

What amount do we cover?

We cover the amount of the shipping costs for the Forgotten Object, up to the maximum indicated in the Table of Coverage Amounts.

What are your obligations in the event of a claim?

After having contacted your host, found and arranged for the forgotten object to be sent, you must send us your claim, within 10 business days of the shipment, except in cases of fortuitous event or force majeure, which must be accompanied by:

- your policy number,
- a copy of the rental agreement,
- and the invoice for the shipping costs issued by the transport company retained for the delivery of the Forgotten Object.

Veterinary care costs and dog/cat Assistance

Veterinary care costs

We reimburse you up to **250 €** per event, subject to a maximum of 2 consultations per stay. In addition, we provide you with a list of veterinary clinics based on local availability.

Assistance in case of loss or runaway

Your pet has run away from your home or has gone missing (lost, stolen).
By contacting our service by telephone (indicated above), we can provide you with:

- Advice and the steps to take to enable you to quickly find your covered pet,
- A list of veterinarians (independent or clinics).

We contact for you the organisations around your home likely to assist you in finding your pet (gendarmerie, S.P.A. shelters, town hall, etc.) and cover any recovery costs.
If the disappearance occurred abroad, and your pet has been missing for a period of more than 48h, we reimburse you for a rabies screening test.
In all cases, the maximum intervention of the Insurer amounts to **250 €** for **all Veterinary Care Costs and Assistance coverage.**

VI. General exclusions applicable to all our coverages



We cannot intervene when your requests for coverage or benefits are the consequence of damages resulting from:

- Benefits that have not been requested during the stay or that have not been arranged by us, or in agreement with us, do not entitle you, retroactively, to a reimbursement or compensation,
- Catering and hotel expenses, except those specified in the text of the coverages,
- Damages caused intentionally by the Insured and those resulting from their participation in a crime, an offence, or a brawl, except in case of self-defence,
- Criminal convictions and their consequences,
- The use of narcotics or drugs not medically prescribed,
- The state of alcohol impregnation,
- Customs duties,
- Participation as a competitor in a competitive sport or in a rally entitling to a national or international ranking which is organised by a sports federation for which a licence is issued, as well as training for such competitions,
- The practice, on a professional basis, of any sport,
- Participation in endurance or speed competitions or events and their preparatory trials, on board any land, water, or air conveyance,
- Consequences of non-compliance with recognised safety rules related to the practice of any recreational sports activity,
- Costs incurred after the return from the stay or the expiry of the coverage,
- Accidents resulting from your participation, even on an amateur basis, in the following sports: motor sports (regardless of the motor vehicle used), aerial sports, high mountain mountaineering, bobsleigh, hunting dangerous animals, ice hockey, skeleton, combat sports, speleology, snow sports involving an international, national, or regional ranking,
- The intentional non-compliance with the regulations of the visited country or the engagement in activities not authorised by local authorities,
- Official bans, seizures, or constraints by law enforcement,
- The use of air navigation devices by the Insured,
- The use of weapons of war, explosives, and firearms,
- Damage resulting from an intentional or fraudulent fault of the Insured pursuant to Article L.113-1 of the French Insurance Code,
- Suicide and attempted suicide,
- Epidemics and pandemics, unless otherwise stipulated in the coverage, pollution, natural disasters,
- Civil or foreign war, riots, strikes, popular movements, acts of terrorism, hostage-taking,
- The disintegration of the atomic nucleus or any irradiation from a source of energy presenting a radioactive nature.
- Absence of uncertainty

THE INSURER cannot under any circumstances be held liable for failures or delays in the performance of its obligations resulting from force majeure, or events such as civil or foreign war, riots or popular movements, lockouts, strikes, attacks, acts of terrorism, piracy, storms and hurricanes, earthquakes, cyclones, volcanic eruptions or other cataclysms, the disintegration of the atomic nucleus, the explosion of devices and radioactive nuclear effects, epidemics, the effects of pollution and natural disasters, the effects of radiation, or any other fortuitous event or force majeure, as well as their consequences.
It is also agreed that the opening of a file for a cancellation whose reason has already been processed for the same trip in a previous file will not be processed.

What is the geographical coverage of the contract?

The coverages and/or services subscribed under this policy apply to claims occurring within the European Union.

Complaints handling

In case of disagreement or dissatisfaction with the implementation of the coverages in this information notice, we invite you to make this known to NEAT,
by writing to: **reclamation@neat.eu**
You have the option to refer the matter in writing to the Médiateur de France Assureurs (FA) after exhausting the internal complaint procedures of NEAT and, in any event, two (2) months after your first complaint filed against NEAT, whether or not you have received a response from it.
The mediator is a person external to NEAT who performs their mission in complete independence. This referral is free of charge.

La Médiation de l'Assurance
TSA 50110 75441 Paris Cedex 09
http://www.mediation-assurance.org

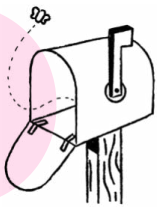
Within three weeks of receiving your request, the Mediator will inform you whether or not it is admissible. The mediator will then issue a reasoned opinion within three (3) months following the notification of the admissibility of the request. The referral procedure to the mediator and the "Mediation Charter" of France Assureurs can be consulted on the website: france-assureurs.fr.

Appendix to Article A. 112-1 of the French Insurance Code:

You have a right of cancellation for this contract during a period of thirty (calendar) days from its conclusion, free of charge and without penalties. However, if you benefit from one or more insurance premiums offered to you, such that you do not have to pay a premium for one or more months at the start of the contract's performance, this period only begins to run from the payment of all or part of the first premium.

VII

Provisions common to all covers



Right of cancellation

The exercise of the right of cancellation is subject to the following four conditions:

- 1. You took out this contract for non-professional purposes;
- 2. This contract supplements the purchase of a good or service sold by a supplier;
- 3. The contract from which you wish to cancel has not been fully performed;
- 4. You have not reported any claim covered under this contract.

In this situation, you may exercise your right to cancel this contract by letter or any other durable medium sent to the insurer of the contract. The insurer is required to refund the premium paid, within a period of thirty days from your cancellation.

In addition, to avoid multiple insurance coverage, you are invited to verify that you do not already benefit from a coverage covering one of the risks covered by the contract you took out.

Model cancellation letter:

> "I, the undersigned, (Last Name, First Name and Address), hereby cancel my enrolment in the **insurance contract.** Done on (Date and Place), Signature".

When you exercise your option to cancel, the Insurer is required to refund, where applicable, the amount of the premium paid within a period of 30 days from the date the right of cancellation is exercised.

However, the full premium remains due to the Insurer if you exercise your right of cancellation when a claim triggering the contract's coverage has occurred during the 30-day cancellation period.

Please note: The right of cancellation does not apply to travel or luggage insurance policies or similar short-term insurance policies with a duration of less than one month.

Multiple insurance

In accordance with Article L. 121-4 of the French Insurance Code (Code des assurances), we reserve the right to require you, in the event of any claim for compensation, to declare the existence of any other insurance covering the same risk and to state for each: the name of the insurer, the policy number, and the insured sum.

If multiple insurances have been taken out fraudulently or deceitfully, we reserve the right to seek the nullity of this contract and to claim damages, in accordance with Article L. 121-3 of the French Insurance Code.

Data collection

The Insured acknowledges being informed that the Insurer processes their personal data in accordance with the applicable regulations on personal data protection and that, furthermore:

- The answers to the questions asked are mandatory and that, in the event of false statements or omissions, the consequences for them may be the nullity of the contract enrolment (Article L 113-8 of the French Insurance Code) or the reduction of indemnities (Article L 113-9 of the French Insurance Code),
- The processing of personal data is necessary for the enrolment and performance of their contract and coverages, for the management of commercial and contractual relations, or for the compliance with applicable legal, regulatory, or administrative provisions.
- The data collected and processed is retained for the time necessary for the performance of the contract or the legal obligation. This data is then archived in accordance with the periods provided for by the statutory limitation provisions.
- The recipients of data concerning them are, within the limit of their duties, the Insurer's departments responsible for the placement, management, and performance of the Insurance Contract and coverages, its delegates, agents, partners, subcontractors, and reinsurers within the framework of the performance of their duties.

It may also be disclosed, where applicable, to professional bodies as well as to any persons involved in the contract such as lawyers, loss adjusters, court officers and ministerial officers, trustees, guardians, and investigators.

Information concerning them may also be disclosed to the Policyholder, as well as to any persons authorized as Authorized Third Parties (courts, arbitrators, ombudsmen, relevant ministries, supervisory and regulatory authorities, and all

public bodies authorized to receive it, as well as audit departments such as statutory auditors, internal auditors, and internal control departments).

- In its capacity as a financial institution, the Insurer is subject to legal obligations arising mainly from the Monetary and Financial Code with regard to anti-money laundering and combating the financing of terrorism and, in this respect, it implements a contract monitoring process that may lead to the drafting of a suspicious transaction report or an asset freeze measure.

Data and documents concerning the Insured are retained for a period of five (5) years from the closure of the contract or the termination of the relationship.

- Their personal data may also be used in connection with processing to fight against insurance fraud, which may lead, where appropriate, to registration on a list of persons presenting a fraud risk.

Such registration may result in an extension of the processing time of their file, or even the reduction or refusal of the benefit of a right, a benefit, a contract, or a service offered.

In this context, personal data concerning them (or concerning persons who are parties or interested in the contract) may be processed by any authorized persons working within the entities of the Insurer's Group in the fight against fraud. This data may also be intended for the authorized staff of organizations directly affected by fraud (other insurance organizations or intermediaries; judicial authorities, ombudsmen, arbitrators, court officers, ministerial officers; third-party bodies authorized by a legal provision and, where applicable, victims of fraudulent acts or their representatives).

In the event of a fraud alert, the data is retained for a maximum of six (6) months to qualify the alert and then deleted, unless the alert proves relevant. In the event of a relevant alert, data is retained for up to five (5) years from the closure of the fraud file, or until the end of the legal proceedings and applicable statutory limitation periods.

For persons registered on a list of suspected fraudsters, the data concerning them is deleted after a period of 5 years from the date of registration on this list.

- In its capacity as an Insurer, it is entitled to process data relating to offenses, convictions, and security measures either at the time of taking out the contract, during its performance, or in connection with litigation management.
- Personal data may also be used by the Insurer in connection with processing operations carried out by it, the purpose of which is research and development to improve the quality or relevance of its future insurance and/or assistance products and service offerings.
- Personal data concerning them may be accessible to certain employees or service providers of the Insurer located in countries outside the European Union.
- The Insured has, upon proof of their identity, a right of access, rectification, deletion, and objection regarding the processed data. They also have the right to request restriction of the use of their data when it is no longer necessary, or to retrieve the data they provided in a structured format when such data is necessary for the contract or when they consented to the use of this data.

They have the right to define directives concerning the fate of their personal data after their death. These directives, which may be general or specific, relate to the retention, erasure, and disclosure of their data after their death.

These rights may be exercised with the Data Protection Representative Officer of NEAT, by email at **dpo@neat.eu** or by post at NEAT – DPO – 16 place des quinconces 33000 Bordeaux. After having submitted a request to the Data Protection Representative Officer and failing to obtain satisfaction, you have the option of referring the matter to the CNIL (Commission Nationale de l'informatique et des Libertés). The complete and current version of Helvetia's data processing policy can be consulted at the following address:
https://www.helvetia.com/global/specialtylines/en/home/services/privacy.html

Subrogation

The Insurer is subrogated, up to the amount of the indemnities paid and services provided by it, to the rights and actions of the Insured, against any person responsible for the events that prompted its intervention. Where the benefits provided in performance of the agreement are covered in whole or in part by another company or institution, the Insurer is subrogated to the rights and actions of the Insured against that company or institution.

Statute of limitations

Pursuant to Article L 114-1 of the French Insurance Code (Code des assurances), any action arising from this policy is time-barred two years after the event giving rise to it. This period is extended to ten years for death covers, with actions by beneficiaries being time-barred at the latest thirty years after this event.

However, this period shall only run:

- In the event of concealment, omission, false or inaccurate declaration regarding the risk incurred, from the day on which the Insurer became aware of it;
- In the event of a claim, only from the day on which the interested parties became aware of it, if they prove that they were unaware of it until then.

When the action of the Insured against the Insurer is caused by a third party's recourse, this limitation period shall run only from the day on which this third party took legal action against the Insured or was indemnified by the latter.

This limitation period may be interrupted, in accordance with Article L 114-2 of the French Insurance Code (Code des assurances), by one of the following ordinary causes of interruption:

- recognition by the debtor of the right of the person against whom the prescription was running (Article 2240 of the French Civil Code);
- a legal claim, even in summary proceedings, until the proceedings are extinguished. The same applies when it is brought before a court lacking jurisdiction or when the act of bringing the matter before the court is annulled due to a procedural defect (Articles 2241 and 2242 of the French Civil Code). The interruption is null and void if the claimant withdraws their claim or allows the proceedings to lapse, or if their claim is definitively dismissed (Article 2243 of the French Civil Code);
- a provisional measure taken pursuant to the French Code of Civil Enforcement Procedures (Code des procédures civiles d'exécution) or an act of forced execution (Article 2244 of the French Civil Code).

It is recalled that:

Service of process made upon one of the joint and several debtors by a legal claim or by an act of forced execution, or the recognition by the debtor of the right of the person against whom the prescription was running, interrupts the limitation period against all the others, even against their heirs. Conversely, service made upon one of the heirs of a joint and several debtor or the recognition by this heir does not interrupt the limitation period with respect to the other co-heirs, even in the case of a mortgage debt, if the obligation is divisible. Such service or recognition only interrupts the limitation period, with respect to the other co-debtors, for the share for which this heir is liable. To interrupt the limitation period for the whole, with respect to the other co-debtors, service must be made upon all the heirs of the deceased debtor or recognition given by all these heirs (Article 2245 of the French Civil Code).

Service made upon the principal debtor or their recognition interrupts the limitation period against the guarantor (Article 2246 of the French Civil Code).

The limitation period may also be interrupted by:

- The appointment of an expert following a claim;
- The sending of a registered letter with acknowledgement of receipt (sent by the Insurer to the Insured regarding the action for payment of the premium, and sent by the Insured to the Insurer regarding the settlement of the claim indemnity).

Dispute resolution

Any dispute arising between the Insurer and the Insured relating to the determination and settlement of benefits shall be submitted by the most diligent party, failing amicable settlement, to the competent jurisdiction of the domicile of the Insured in accordance with the provisions set forth in Article R 114-1 of the French Insurance Code (Code des assurances).

False declarations

When they change the subject of the risk or diminish our perception of it:

- Any concealment or intentionally false declaration on your part entails the nullity of the policy. The premiums paid remain our property and we shall be entitled to demand payment of the premiums due, as provided for in Article L 113.8 of the French Insurance Code (Code des Assurances).
- Any omission or inaccurate declaration on your part where bad faith is not established entails the cancellation of the policy 10 days after the notification sent to you by registered letter and/or the application of the reduction of indemnities under the French Insurance Code (Code des Assurances) as provided for in Article L 113.9.

Supervisory authority

The authority responsible for the supervision of Helvetia is the Autorité de Contrôle Prudentiel et de Résolution (ACPR) – 4, place de Budapest – CS 92 459 – 75 436 Paris Cedex 9.

Proof agreement

The Policyholder accepts the dematerialisation of relations, as from the signing of the Insurance Policy by means of an electronic process and subject to the collection of the first insurance premium. This acceptance is valid for all subsequent insurance transactions relating to the Policy. The Insurer and the Policyholder expressly agree that any document concluded electronically according to the implemented electronic process constitutes (i) the original of said document, (ii) literal evidence within the meaning of Article 1316-1 of the French Civil Code having the same probative value as a handwritten document on paper and may validly be enforced against the Parties and capable of being produced in court, as literal evidence, in the event of disputes, (iii) proof of the content of said document, of the identity of the Policyholder and of their consent to the obligations and legal and factual consequences arising from the document concluded electronically.

Competent courts – applicable law

In accordance with applicable regulations, the place of taking out this insurance policy (corresponding to the place of receipt by the insurer of your acceptance of the offer to take out the insurance product) is deemed to be located in France. As such, the interpretation and performance of the General Conditions and Special Conditions are governed by the French Insurance Code (Code des assurances), without prejudice to mandatory rules that may be more protective of the policyholder and which may be enacted by the law of the country in which they have their habitual residence. In the event of a dispute arising in connection with the interpretation or performance of the Policy, the courts located in France or in the Member State of the European Union in which the policyholder of the insurance policy has their habitual residence shall have sole jurisdiction to resolve such dispute.