

# INSURANCE CERTIFICATE FOR CANCELLATION OF SEASONAL RENTALS

The present certificate of the group contract mentioned below gives right to the coverages defined below for reservations not exceeding 90 days.

In case of lawsuit, the only french insurance certificate will be valid

## COVERAGE

### 1 - CANCELLATION OF STAY

The insurer covers the reimbursement of amounts paid by the insured as deposits in case of cancellation of the stay for the following reasons :

- a) Serious illness, injury or death of the RESERVEE, their spouse or one of their descendants, ascendants, son in laws, daughter in laws or other persons designated on the rental contract.

By serious illness or injury, we mean any alteration of health or any bodily harm which prevents the person from living their home or hospital, place of treatment from the date of the beginning of the rental and justified by a certificate stating the person's incapacity to work and a medical certificate mentioning the above ban and in the case of a cure, justification of the reimbursement of the medical fees by the legal health coverage without salary restrictions, as well as the receipt of cancellation of the cure by the thermal establishment.

- b) Claims entailing important residence damage, either in the principal, secondary place of residence or the company belonging to the RESERVEE, which arrive before the departure and which absolutely require his/her presence at the place of the claim on the day of departure.

- c) When the taking of "possession" of the rental is preventing following the firing or transfer of the RESERVEE or their spouse, as long as the notification of the employer is after the effective date of the contract.

- d) When the RESERVEE is prevented from going to the rental place due to road blocks or train strikes or blocks on the planned date of arrival and within 48 hours following that day, certified by the Mayor's office of the city of the rental.

- e) If the RESERVEE has to cancel their reservation within 48 hours preceding or following the contractual date of the beginning of the rental due to:

1° Lack or excessive snow for the period from December 15 to April 1<sup>st</sup> of the following year.

This coverage can be taken into account only after the published snow bulletin from an organism recognized as being able to deliver such a bulletin, concerning the station itself or the closest station as the crow flies.

This will be established in case of lack of or excessive snow in the ski station of the rental, if in the 48 hours preceding or following the beginning of the rental, more than 2/3 of the ski slopes are closed due to the before mentioned bulletin.

2° Ban of sites due to pollution or epidemics

Risk of pollution, oil slicks, or epidemics will be considered as covered for the present contract when the site has been totally banned within a limit of 5 km of the rental by communal or prefect authorities during the rental period. This coverage is limited to 304.900 € by claim for the below mentioned contract no matter the number of trips canceled or interrupted which can be paid under the present coverage, if the number of the amount of claims is in excess of the amount of coverage, the insurer will split out the amount for all claims.

### 2 - INTERRUPTION OF STAY

The insurer reimburse the RESERVEE the amount of the rental not used following the interruption of stay, due to one of the reasons mentioned above in a,b and e 2 in the coverage 1 - Cancellation of stay.

## COMMUNICATION OF THE CONTRACT

The insurer may consult the entire text of the contract free of charge at the Rental Agency or Reservation Service.

## EXCLUSIONS

Are excluded from the coverage of this contract, damage directly or indirectly due to:

- Foreign war (it is the insured's responsibility to prove that the claim results from something else).
- Civil war (it is the insured's responsibility to prove that the claim results from something else).
- Any direct or indirect effect from explosions, heat emission, irradiations due to the transmutation of the atom's core, or radioactivity, as well as claims due to effects of radiation provoked by the artificial acceleration of particles.
- Use of medical drugs not prescribed by a doctor.
- Practice of a sport as a professional.
- An intentional act of the insured: suicide or attempted suicide.
- Cosmetic, psychiatric or psychotherapeutic treatment.
- Medical ban from cures.
- Illness or accident due to pregnancy and in general any alteration of health where the first symptoms appear before the reservation of the stay.
- Redundancy for serious professional misdemeanour.

## IN CASE OF A CLAIM

Except in case of force majeure, the insured must notify within 5 days when they are aware of the claim:

**ACE Européan Group Limited**  
**LE COLYSEE 8 AVENUE DE L ARCHE**  
**92419 COURBEVOIE CEDEX**

**TEL 33(0) 1 55 91 45 45**

They must furnish the copy of the dually signed rental document or proof of the agreement or an invoice which clearly indicates the dates of the stay, the price of the rental, the deposit amounts, a medical certificate indicating the nature of the ailment, a death certificate or the refusal of payment by the Sécurité Sociale or any other necessary justification. The insured will allow the consulting doctor of the insurer to access the medical file, otherwise, the coverage will not be granted.

## EFFECTIVE DATE OF THE CONTRACT

For a valid contract, the joining coupon must be sent to the rental agency, or the Reservation service with the payment of the premium insurance payable to SERVICE ET ANNULATION and with the first rental payment by the reserve.

The effective date of the contract will be upon receipt of all these documents by the agency or reservation service and for the duration indicated on the rental contract.

(séjour réservé auprès de)	RESERVATAIRE
<p><b>CHALET - HOTEL</b> <b>LA MARMOTTE</b> <b>***</b> <b>74260 LES GETS</b> <b>Tel : 04 50.75.80.33</b> <b>Tax : 04 50.75.83.26</b></p>	<p><b>Non et Prénoms du Réservataire</b> : .....</p> <p><b>Adresse</b> : .....</p> <p><b>Noms et Prénoms des personnes accompagnantes</b> .....</p> <p><b>Location du</b> ..... <b>au</b>.....</p> <p><b>MONTANT DE LA PRIME D'ASSURANCE T.T.C.</b></p> <p><b>Prix du séjour</b> : ..... € x 3,50 % =</p> <p><b>ASSISTANCE</b> : OUI / NON (*) si OUI ajouter</p> <p>* Rayer la mention inutile <b>TOTAL du chèque</b> : ..... <b>6€10</b></p>