"APPROVED" Minutes of the meeting of "01" February 2023 by the Decision of the Board of Directors of JSC Insurance Company "Basis"
"ORBIS" VOLUNTARY CAR INSURANCE PROGRAM
APPENDIX NO. 8 OF THE RULES OF VOLUNTARY INSURANCE OF ACAR TRANSPORTATION OF THE INSURANCE COMPANY "BASEL"
Almaty, 2023



"ORBIS" VOLUNTARY CAR INSURANCE PROGRAM

APPENDIX NO. 8 OF THE RULES OF VOLUNTARY INSURANCE OF ACAR TRANSPORTATION OF THE INSURANCE COMPANY "BASEL"

Insurance class:	Voluntary car insurance.
Insured:	Property is an individual or legal entity that is the owner (owner) of an insured vehicle (hereinafter ak), including a vehicle purchased on
	credit, on the right to rent or otherwise not contrary to the legislation of the Republic of Kazakhstan. 1. In case of theft, extortion/disinfection, complete loss/loss of the AC:
	1) Insured.
	If ak is purchased on credit:
Recipient:	1) Organization that issued a loan to the ACT pledge within the amount of debt under the loan/loan agreement 2) The Insured in a portion exceeding the amount of debt under the loan/loan agreement.
	2. In case of ak-absorpation:
	1) Special TSS (Special TSS*) - insurance payment is made without taking into account depreciation if the age of the Act is younger than
	7 years. 2) Insured - insurance payment is carried out taking into account depreciation depreciation:
	- if the AGE of the ACT is less than 7 years old, when the special CTS refuses to restore the ACT for any reason;
	- If the age of AK is more than 7 years old.
	*Special Insurance - the place where the Insurance ACT is serviced within the guarantee.
Insured:	The legal entity that is insured is persons on the basis of a power of attorney or a travel document. The person who is insured is the person who has been sent to the vehicle (hereinafter referred to as the ACT) on any legal basis.
	The ACT in the following categories is not accepted for insurance:
	✓ Ambulances;
	✓ Specially adapted or specially designated ACT for use by military and/or law enforcement agencies;
	 ✓ AK used within the closed (generally unavailable) area of the airport; ✓ Participation in sports competitions, training goals and test drives;
	✓ Ak for rental, leasing, rental and/or operating as a taxi.
	✓ Act of any category over 20 (twenty) years.
	The insurance program does not reimburse:
	1) Damage or liability for imported goods (including goods on the road) associated with the implementation of any type of business activity in the insured ACT under the policy;
Insurance restrictions:	2) AK damage for:
	✓ transportation of explosive substances, such as nitroglycerin, dynamite, or any other similar substances. If the substances
	themselves do not pose a risk of rupture, but are a component of substances at risk of rupture, they will not be removed from the
	list according to this Policy. ✓ works in rental, rental, leasing and/or taxi mode;
	3) An accident in the ACT;
	4) in addition to parking lots and parking lots, car warehouses and sites for storage in the ACT;
	5) damage to third parties;6) The failure of the ACT mechanisms to create an insurance situation.
	The failure of the Act mechanisms to create an insurance situation.
Insurance form:	The property interests of the Insured/Insured, depending on the ownership, use and/or power of the ACT, as well as the risk of its
insurance forms	damage or loss (loss) as a result of the insurance status specified in the insurance policy.
	The insurance status is recognized as the damage or collapse of the ACT as a result of the following events ("All risk"): 1) road traffic accident (hereinafter referred to as an accident);
Insurance status:	2) natural disasters, in particular: hurricanes (weather conditions, corresponding to 8 points on the Beufort scale - movement of air
	masses with wind speeds exceeding 60 km /h) or alloys, hailstones, floods, mudflows, landslides, rock falls, floods, underground water
	releases; 3) unlawful actions of third parties, including theft of mirrors, tires and drives
	4) embezzlement, theft;
	5) accidental external mechanical and (or) physical effect;
	6) random external effects of chemicals and (or) high temperatures;
	7) fire, explosion, spontaneous combustion. The amount of insurance for IT insurance is:
The amount of insurance, the insurance premium and the tariff from the insurance amount:	1) it is not edited on the day ofthe policy;
	2) The actual cost of this equipment (if any) purchased by the insured in conjunction with IT.
	It and additional equipment are confirmed by the documents for the procurement of IT and additional equipment. The insurance premium is calculated from the total amount of recovery received by adding the amount of raw fuel and additional
	equipment
	Insurance rate - approved by the decision of the authorized body of the insurer within the tariff for the class (0.104% - 16.8939%).
	If the loss exceeds 70% of the net premiums found, the Insurer has the right to revise the insurance rate after 6 months on the side of
Procedure and terms for payment of	an increase in the insurance rate by 10%. Within 3 (three) days from the date of the policy, the Insured pays an insurance premium to the bank account or to the insurer's cash
insurance premiums:	register with a cash/non-cash lump sum.
Franchise, unconditional:	Within the framework of the internal policy, it is approved by the decision of the authorized body of the Insurer (0% - 10% of the
	insurance amount). Insurance is accepted by the Act, which has the following special requirements of insurance:
Special insurance requirements	Insurance is accepted by the Act, which has the following special requirements of insurance: 1. AK age less than 7 years:
	1.1. Insurance payment is carried out without accounting for depreciation;
	1.2. Insurance payment will be made on the basis of a special HSS account
	1.3. Insurance payments for the "accident" insurance are made as follows (these requirements are determined on the basis of the
	application-questionnaire of the Insured):
	1.3.1. Submitting documents of the traffic police;
	1.3.2. If the amount of damage does not exceed 500 000 (five hundred thousand) tenge, do not submit documents of the traffic police;
	1.3.3. Regardless of the amount of damage, documents of traffic police bodies are not presented. If, for some reason, the Insured is unable to provide an account for the payment and the Special ACT of the TSCS, then the insurance
	payment is based on the report on the damage assessment carried out by the insurer, taking into account depreciation.
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AK over 7 years old: Insurance payment is made on the basis of a report on the damage assessment carried out by the insurer. The special requirements of insurance are determined by the Insured in the application-questionnaire for insurance, which is an integral part of the policy made. 1. The benefit is carried out in the amount of actual damage to the recipient, but not more than the total amount of insurance established on the Policy, taking into account the requirements of the established franchise and the section "Special Claims". 2. In any case, the Insured /Insured is obliged to call and wait for traffic police officers, regardless of the age of the Act, and to register the facts of the incident in the manner prescribed by the legislation of the Republic of Kazakhstan: if there is a fault of third parties and damage to the life and health of persons; if the other participants of the event are required to contact the competent authorities. 3. The amount of damage is determined on the basis of: On the basis of the detailed account of the Special Psalm, not taking into account the Act of Failure and depreciation for the Act referred to in paragraph 1 of the section "Special Requirements"; On the basis of the report on the appraisal submitted by the Insurer for the ACT referred to in paragraph 2 of the section "Special Claims" 4. The insurer decides to pay the insurance payment or refuse to pay the insurance payment no later than 15 (fifteen) working days from the date of receipt of the full package of documents provided for in the Policy. 5. In case of consideration of the insurance situation and determine sufficiency of the documents required to make a decision, the period of consideration of documents for the implementation of the insurance payment is suspended for the period of their correction/submission, on which the Insurer informs the Insured/Insured/Profiteer in writing within 5 (five) working days from the date of determining the need to correct the documents/their inadequisition or refusal to pay the insurance payment. the deadline for making a decision is renewed from the date of submission of the corrected / missing documents to the Insurer. 6. The insurance payment includes compensation for repair and (or) replacement of damaged parts and body parts of the ACT registered by the Representative of the Insurer, damaged as a result of the insurance situation, and if the Insurer has not registered damages and damaged parts, as well as hidden defects of the ACT, the Insurer is obliged to arrange a review of the vehicle with the participation of the Insurer. 7. Under the insurance policy, the Insurer is entitled to reimburse the Profit recipient in the following circumstances: In case of expropriation/theft of AC - the total amount of insurance, deduction of the amount of the franchise specified in the Policy, taking into account the stamps specified in the section "Special Claims": According to the insurer's choice in the case of a full yak: - The total amount of insurance at the deduction of the specified franchise on the policy, as well as the value of the sale able-to-be substitution and disposal waste determined by the Insurer or the Insurer, taking into account the requirements specified in the section "Special Claims". The report on the assessment of the cost of spare parts and waste suitable for sale is carried out at the expense of the Insured; Procedure and requirements for - The total amount of insurance deducted from the franchise specified in the insurance policy, taking into account the requirements payment of insurance payments: specified in the section "Special Claims" in the case of the provision of spare parts and disposal waste suitable for sale to the Insurer. Acceptance and transfer is carried out after the act has been concluded. In order to transfer the ACT to the Insurer, it is necessary to exclude it from the registration in the authorized state body for road safety and customs. In case of partial damage to the ACT, the cost of restoring and repairing the ACT, determined taking into account the requirements specified in the section "Special requirements". 8. If such expenses are necessary or are made to comply with the insurer's instructions, the Insurer reimburses the costs incurred by the Insurer in order to comply with the Act, to avoid or reduce losses from the beginning of the insurance situation. 9. Full liability of the ACT (constructive cost) is established at the time of liquidation of the ACT in case of inconsistencies of repair shall be determined or the amount of damage is equal to or exceeds 80% of the actual value of the ACT established on the date of the Policy. 10, After payment of insurance for any insurance case, the insurance premium is not refunded in case of early termination of the insurance policy. 11, If the vehicle is partially destroyed (with the exception of risks: theft , theft of the vehicle, complete liquidation), the amount of insurance after the transaction is deducted automatically without additional payment of the insurance premium if the age of the dead is up to 7 years old. The number of claims for recovery of the amount of insurance is determined by the Policy. If the age of ABis less than 7 years after the implementation of the insurance tin case of partial itision (with the exception of risks: theft, theft, complete destruction of IT), the amount of insurance insurance is less than 7 years. To pay one of the necessary insurance premiums for reconstruction. 12, If the actual damage shall be equal to or exceed500 000 (five hundred thousand) tenge, determined in the act of defect and detailed account for payment, The insurer has the right to make an insurance payment of no more than 500,000 (five hundred thousand) tenge, while the burden of incorrect preliminary assessment of the amount of damage is assigned to the Insured/Insured. applies if you select subparagraph 1.3.2 of paragraph 1.3. 13. In cases in which the insured is compensated by third parties who are the parties responsible for the insurance situation or other insurers with a double insurance agreement, the insured will compensate only the difference between the amount of the insurance payment and the amount of compensation the Insured receives from third parties. In this case, the Insurer has the right to claim the return of the overpaid amount of the insurance payment in that part of the damages incurred (compensated) by third parties. 14, Insurance payment on the condition of insurance "Expropation /theft" is made not earlier than 2 (two) months after the extorte/theft, but after the end of the period of preliminary investigation by the authorities of the Ministry of Internal Affairs of the Republic of Kazakhstan. If the insurance payment for "expulsion /theft" insurance is found, the Insured is obliged to return the received insurance payment to the Insurer within 30 working days. If the insurer refuses the ACT, he is obliged to transfer it to the Insurer, and also gives him the documented ownership rights. Under the insurance policy, the following cases are not considered to be insurance cases and are not reimbursed: Loss of the commodity type of AK; Damage to the property of the insured/insured and/or passenger who was in the ACT at the time of insurance; Natural wear and corrosion of THE; mechanical/electrical defects and (or) fractures during operation; loss or damage of the adhesive or IT coating (protective coatings and film in the case and glass/optics, glued to factory LKP/Glass); damage caused when violating the warning against entering or parking outside the fenced and (or) designated area with special signs (signs) (construction sites, mudslide-threatened areas, etc.), in case of damage as a result of the threats warned by the ACT; The grounds for exempting the insurer damages caused to the ACT as a result of insurance cases listed on the insurance policy caused by any disruptions, technical defects from the insurance payment are: or factory defects; Damage caused by the fire as a result of the installation of additional equipment, which was not provided at the production plant; Costs incurred by the insured/insured/profiteer to determine the cost of the damage to the ACT. 2. If the insurance situation occurs due to the following circumstances, the Insurer is exempt from paying the insurance payment: Technical condition and equipment of the Insured /Insured use of the EC with a technical defect included in the list of defects and requirements prohibited from using the ACT; driving an ACT by a person without a valid driver's license;

Control of the ACT by an alcoholic, drug or toxic or other intoxicated person;

- ✓ Transportation of dangerous substances and prohibited items in the ACT by the Insured/ Insured;
- ✓ Immediate loss or theft of property located in the ACT during or after the insurance status;
- ✓ Theft and expulsion of the ACT with the keys left therein (together or separately) and (or) with the control panel of the signal system and/or the certificate of state registration of the ACT;
- ✓ Refusal of the insurer/ insurer from the right to make a claim to the person responsible for the beginning of the insurance status of the profiteer, as well as refusal to submit to the Insurer the necessary documents for the right to make a claim to the Insurer. If the insurance payment was made by the person responsible for the insurance situation or the Insurer for which the double insurance contract was concluded, the Insurer has the right to claim a full or partial refund;
- Events that occurred during the period of use of the AK for the purpose of competitions, bets, sports events, training, test drive, rental, leasing or rental.
- 3. The following actions of the Insurer may be the basis for the insurer's refusal to make insurance payments:
- ✓ Providing the insurer with false information about the ACT, insurance risk, insurance status and its consequences when creating an insurance policy;
- ✓ Deliberate failure of the insured/insured to take measures to minimize the damage caused by the insurance situation;
- ✓ Impediment of the insurer/insurer to the Insurer to investigate the circumstances of the occurrence of the insurance status and determine the extent of the damage;
- ✓ Insured/Insured's inability to notify the Insurer of an increase in insurance risk;
- Failure of the insurer/insured to fulfill the requirements of the Insurer on the issuance of the ACT to verify the technical condition of the insurance policy during the period of its application, failure to provide the Insurer with access to damaged ACT (before and/or after repair) or its waste, or damaged parts, parts and accessories, additional equipment or their waste, except when they may be completely destroyed;
- if the Insured/Insured has fled from the location of the insurance event:
- ✓ if the Insured/Insured/Profiteer does not provide the documents and information necessary to determine the reasons, nature, and relationship of the insurance situation to its outcome, or if visibility suggests false evidence;
- Receiving due damages from the person responsible for the damage shall be received by the Insured/Insured/Profit recipient;
- ✓ Failure of the Insurer to notify the Insurer of the beginning of the insurance situation in due course, except in cases where the insurer / Insured was unable to do so for a reason and confirmed it with the documents;
- actions of the Insured/Insured/Profiteer, who are in connection with the insurance situation in accordance with the procedure established by the legislative acts, recognized as a malicious crime or administrative violations;
- √ violation of policy requirements within the framework of this Program;
- Other conditions provided for by the legislation of the Republic of Kazakhstan.
- 1, To consider the issue of insurance payment, the Insured /Insured is obliged to submit to the Insurer an application for insurance payment and the following documents, depending on the type of insurance status:
 - ✓ Application for the beginning of the insurance status (event), indicating the policy information;
 - ✓ A copy of the certificate of state registration of the ACT;
 - \checkmark a copy of the driver's license of the person who was driving the ACT at the time of the accident;
 - A copy of the document confirming the legal management of the ACT (power of attorney and/or travel paper (for legal entities);
 - Documents confirming the incurred expenses of the Insured/Insured in order to avoid or reduce losses incurred in the event
 of an insurance situation (if any);
 - ✓ To confirm the amount of damage shall be based on the requirements specified in the section "Special requirements":
 - a detailed account for the payment and the photo of damage to the CSS/Special TSS, provided by the responsible person, as a result of the insurance situation, including the full list of necessary works, replacement/repair able parts, parts and their cost, certified by the person responsible and the seal of the enterprise;
 - Report on the damage assessment carried out by the appraiser submitted by the insurer;
 - documents confirming the right to receive insurance payments (power of attorney, certificate of inheritance rights, etc.);
 - Documents ensuring the issuance of insurance to the Insurer within the amount of insurance paid from the right of claim against the person responsible for the damage caused by the insurer (copy of the identity card of the person responsible for the accident, application for the right to claim, protocol of response, explanations, etc.).
 - At the time of the accident: documents of the internal affairs bodies: protocol on violations of the traffic rules, administrative offenses resolution, scheme of the accident, addition to the protocol on violations of the traffic rules, explanations of the participants of the accident to the internal affairs bodies, protocols/conclusions of medical examination of the participants of the accident, a court decision, which entered into force, a criminal case on the fact of the accident and the decision on the case, if the materials were transferred to the court a court verdict or other procedural document issued by the court, which entered into force of the law.
 - ✓ statement from the Issuer on the implementation of insurance payouts with the provision of requisitions;
 - ✓ <u>in case of natural disasters:</u> documents of fire control bodies or investigative bodies (including fire act, conclusion of fire-technical expertise on causes of fire, etc.); documents of hydrometeorological or seismological services, ministry of emergency situations or other authorized bodies whose competence includes the task of registration /investigation of these cases:
 - illegal actions of third parties, including extorment and theft of the Act: a statement to the internal affairs authorities on the facts of the incident, the decision of the internal affairs authorities to initiate a criminal case or refuse to initiate a criminal case, resolutions on the procedural move of the criminal case, after the completion of a preliminary investigation the criminal case or the indictment (if there is damage caused by the unlawful actions of third parties), the decision to suspend the court's decision (verdict). When deciding whether to make an insurance payment, the Insurer has the right to require the Insurer to provide certificates from the internal affairs authorities that the ACT is on the list of those who have been driven or stolen; He has the right to demand that the originals of all documents on the registration of the ACT, the certificate of registration of the ACT or the order on the withdrawal of the ACT, when filing an application for theft (certified by the seal of the authorized body), the keys of the ACT and the keys of the signaling system are issued.
 - in other unexpected events copies of acts of fire and law enforcement agencies, results of fire-technical expertise; a copy of the protocol of inspection of the scene; other documents made by special authorized bodies (commissions) that investigate, classify and account for events considered as insurance cases, or confirm the fact of the beginning of the insurance situation:
- 2. The burden of collecting and submitting documents confirming the facts and circumstances of the incident, the damage caused as a result of the incident, as well as the costs associated with the evaluation is assigned to the Insured.
- 3. Documents of the competent authorities must be presented in the original or in copies certified by the seal and signature of the responsible person of the authorized body who issued this document.
- 4. Acceptance of documents under the declared insurance status is carried out by the Insurer by providing the Insurer with a certificate of accepted documents.
- 5. If, without additional requested documents, the Insurer is unable to make a unilateral decision on the availability or absence of insurance status and the amount of damage to the insured ACT, the list and number of documents required for consideration and decision on an event with insurance status signs may be reduced or supplemented at the insurer's discretion.

Documents necessary to consider the issue of payment of insurance

JSC Insurance Company "Basel" Voluntary car insurance program "ORBIS"

Information about the insurance agent/broker:	The program provides for the registration of policies through the partners of JSC "SC "BASEL".
The amount of the specified agent reward in gross% is:	Within the framework of the internal policy, it is approved by the decision of the authorized body of the Insurer.
Insurance area:	Except for the CIS, military and war zones.
Term of insurance policy:	The term of insurance is 12 months, according to the application of the insured person - less than one year. The policy will take effect from the date of payment of the insurance premium and will be valid until the end of the term of the Policy or until the insurance amount is exhausted, depending on which one came first.
Form of insurance policy creation:	The policy is issued in paper or electronic form.
Application form:	The questionnaire can be submitted in paper or electronic form and is an integral part of the policy.
Car check:	Before the completion of the policy, the Insurer has the right to verify the ACT by performing an ACT verification act. At the request of the insurer, the Insurer is obliged to submit to the Insurer for consideration of the ACT before concluding the insurance contract or at the time of the insurance event.
Additional requirements:	 Depending on the insurance options, the Insurer has the right to select additional functions under the Policy. providing the service of an evac up to 20 000 tenge; providing technical assistance on the road: start the car engine when the battery charge is exhausted; wheal replacement and inflate; heating of cars and locks; fuel supply (delivery of fuel is carried out free of charge, the cost of fuel is paid by the Supplier by cheque); Evacuation of vehicles in case of accident/fracture. In accordance with subparagraphs 1) -2) of paragraph 1, services are provided free of charge once a year. Provide additional protection for the risk of "damage to tires and/or drives". Early termination of the Contract on the initiative of the Insured is carried out only in the presence of a written application of the Insured. In this case, the Insured shall deduct 10% of the amount of the insurance premium from the date of application of conditional early termination to the Insurer and return to the Insured part of the insurance premium that has not expired. Conditional early termination is possible from the day of application to the next day. If the Insurer has made any insurance payment to the Insured, in this case the insurance premium will not be refunded to the Insured. The part of the premium that must be returned to the insured is calculated by concluding an Agreement between the parties on the termination of the contract from the date of application for conditional termination to the Insurer. The insurance premium is refunded within 5 (five) working days. For promotional purposes, the Company reserves the right to use the following names to form AK insurance versions under this Insurance Program: