Travel Insurance Program Travel, Travel Active, Business, Business Active

Insurance Class:	Voluntary health insurance	
Policyholder:	Adult natural person or legal entity	
•	Assistance company	
Beneficiary:	in case of self-payment – the Insured	
Insured:	An individual from birth to 90 years old inclusive	
	The following are not accepted for insurance:	
Insurance restrictions:	✓ individuals over 90 years old; ✓ disabled people of any group;	
insurance restrictions.	✓ persons who are hospitalized at the time of insurance;	
	✓ persons in isolation, wanted and under judicial supervision.	
	The object of insurance is the property interests of the Insured/Insured related to the expens to receive medical and service services in accordance with the insurance policy and the	
Object of insurance:	Insured, which arose as a result of an acute sudden illness or accident during his stay in the	
	insurance policy.	
	An insured event is a sudden, unforeseen and unintentional illness and/or accident that o	
Insured event:	of the insurance cover and in the territory of insurance, and as a result of which harm was Insured, resulting in the occurrence of expenses specified in the insurance program.	caused to the life and/or health of the
	10,000 dollars/euros	
	20,000 dollars/euros	
6	30,000 USD/EUR	
Sum insured:	50,000 dollars/euros 70,000 dollars/euros	
	\$100,000	
	In tenge at the exchange rate of the National Bank on the date of execution of the insuran	
Insurance premium and tariff:	It is approved by the decision of the authorized body of the Insurer, within the framework 59.4864%).	of the tariff for the class (0.3400% –
Procedure and terms of	37.400470).	
payment of the insurance	One-time, cash/non-cash payment.	
premium:		
Franchise:	Not provided.	1 1 1 1 1
	1. The insurance payment shall be made by the Insurer under the terms of the Insurance R 1) Assistance of the company, in case of the Insured's application to the Assistance;	ules in the event of an insured event:
	1) Assistance of the company, in case of the insured's application to the Assistance; 2) To the insured/person who has incurred expenses for the provision of medical services, including repatriation costs, in	
	cases provided for by the Insurance Rules.	
	2. The Insurer is obliged to notify them of the missing documents in writing or by e-mail/SMS within 3 (three) business days from the date of submission of the last of the required documents.	
	3. The insurer is fully or partially exempt from making the insurance payment in accorda	nce with the grounds provided for in
Insurance payment:	the Insurance Rules.	
F	4. The Insurer, after receiving all the necessary documents for making a decision, within 10 (ten) working days makes a decon the insurance payment or on the refusal to make the insurance payment. When making a decision to refuse to making insurance payment, the Insurer shall send a written reasoned notice to the Insured.	
	5. The amount of insurance payment is determined on the basis of the originals of receipts	
	in favor of the Assistance Company, which is a non-resident of the Republic of Kazak currency specified in the relevant receipts and invoices. The insurance payment in fav	
	tenge at the official exchange rate of foreign currencies of the National Bank of the Rep	
	payment for the services of the insured event.	
Information about the	The program provides for the issuance of insurance policies through the partners of BASEL IC JSC.	
insurance agent:		
The amount of the agent's fee:	It is approved by the decision of the authorized body of the Insurer, within the framework	of internal policy.
Validity period of the Insurance Policy:	From 1 day to 365 days	
	World:	
T	Category 1 – Mass tourism countries and countries outside the territories 2,3,4	
Insurance area:	Category 2 – Schengen countries and the European Union Category 3 - USA, Canada, Japan, Australia	
	Category 4 - Thailand	
Duration of insurance	24 hours a day.	
coverage:		
	Risks Expenses for the provision of emergency medical care (visit and consultation with a	Limits Within the insured amount
	doctor)	within the insuled almount
	Expenses for medicines. Limit per Insured:	50 \$/€
Digles governed by the	Expenses for the organization and provision of emergency inpatient care.	Within the insured amount
Risks covered by the insurance policy: Dental care costs. Limit per Insured:		50 \$/€
msurance poncy:		Within the insured amount
insurance poncy:	Expenses related to the medical evacuation of the Insured to the international port of	Within the instited amount
insurance poncy:	the country of permanent residence	
insurance poncy:		Within the insured amount Within the insured amount

Form of conclusion of the Insurance Policy:

The insurance policy is issued by issuing it on paper or in electronic form.

Travel Insurance Program Travel + Covid 19, Travel Active + Covid 19, Business + Covid 19, Business Active + Covid 19

Insurance Class:	Voluntary health insurance	
Policyholder:	Adult natural person or legal entity	
	Assistance company	
Beneficiary:	in case of self-payment – the Insured	
Insured:	An individual from birth to 90 years old inclusive	
	The following are not accepted for insurance:	
Insurance restrictions:	✓ individuals over 90 years old;✓ disabled people of any group;	
	✓ persons who are hospitalized at the time of insurance;	
	✓ persons in isolation, wanted and under judicial supervision.	
	The object of insurance is the property interests of the Insured/Insured related to the expense to receive medical and service services in accordance with the insurance policy and the insur	
Object of insurance:	which arose as a result of an acute sudden illness or accident during his stay in the insurance	
	policy.	3 1
	An insured event is a sudden, unforeseen and unintentional illness and/or accident that occur	
Insured event:	the insurance cover and in the territory of insurance, and as a result of which harm was ca Insured, resulting in the occurrence of expenses specified in the insurance program.	aused to the life and/or health of the
	10,000 dollars/euros	
	20,000 dollars/euros	
	30,000 USD/EUR	
Sum insured:	50,000 dollars/euros	
	70,000 dollars/euros \$100,000	
	In tenge at the exchange rate of the National Bank on the date of execution of the insurance	contract
Insurance premium and	It is approved by the decision of the authorized body of the Insurer, within the framework	of the tariff for the class (0.3400% –
tariff:	59.4864%).	
Procedure and terms of	One time cosh/non cosh novment	
payment of the insurance premium:	One-time, cash/non-cash payment.	
Franchise:	Not provided.	
	1. The insurance payment shall be made by the Insurer under the terms of the Insurance Rul	es in the event of an insured event:
	1) Assistance of the company, in case of the Insured's application to the Assistance;	
	2) To the insured/person who has incurred expenses for the provision of medical serv	vices, including repatriation costs, in
	cases provided for by the Insurance Rules. 2. The Insurer is obliged to notify them of the missing documents in writing or by a mail/SMS within 3 (three) business days from	
	2. The Insurer is obliged to notify them of the missing documents in writing or by e-mail/SMS within 3 (three) business days from the date of submission of the last of the required documents.	
	3. The insurer is fully or partially exempt from making the insurance payment in accordance with the grounds pr	
Insurance payment:	Insurance Rules.	() 1: 1 1 1 · · ·
4. The Insurer, after receiving all the necessary documents for making a decision, within 10 (ten) workin on the insurance payment or on the refusal to make the insurance payment. When making a decision		
	insurance payment, the Insurer shall send a written reasoned notice to the Insured.	
	5. The amount of insurance payment is determined on the basis of the originals of receipts and invoices. The insurance payment	
	in favor of the Assistance Company, which is a non-resident of the Republic of Kazakh	
	currency specified in the relevant receipts and invoices. The insurance payment in favor of the Insured shall be at the official exchange rate of foreign currencies of the National Bank of the Republic of Kazakhstan as of the	
for the services of the insured event.		
Information about the	The program provides for the issuance of insurance policies through the partners of BASEL IC JSC.	
insurance agent:	The program provides for the assume of insurance policies through the partners of BASEL	ite ise.
The amount of the agent's fee:	It is approved by the decision of the authorized body of the Insurer, within the framework of	f internal policy.
Validity period of the Insurance Policy:	From 1 day to 365 days	
	World:	
	Category 1 – Mass tourism countries and countries outside the territories 2,3,4	
Insurance area:	Category 2 – Schengen countries and the European Union	
	Category 3 - USA, Canada, Japan, Australia Category 4 - Thailand	
Duration of insurance	24 hours a day.	
coverage:	Risks	Limits
	Expenses for the provision of emergency medical care (visit and consultation with a	Within the insured amount
	doctor)	Widini die insured amount
Risks covered by the	Expenses for medicines. Limit per Insured:	50 \$/€
insurance policy:	Expenses for the organization and provision of emergency inpatient care.	Within the insured amount
	Dental care costs. Limit per Insured:	50 \$/€
	Expenses related to the medical evacuation of the Insured to the international port of the	Within the insured amount
	country of permanent residence	

Insurance Company Basel JSC Travel Insurance Program

	Repatriation of the Insured to the country of permanent residence.	Within the insured amount
	Expenses for the return of insured children under 16 years of age in the event of hospitalization or death of an adult Insured	Within the insured amount
	Inpatient treatment coverage for symptomatic Covid-19	€30,000 for Schengen countries \$/€3,000 for remaining countries
Form of conclusion of the Insurance Policy:	The insurance policy is issued by issuing it on paper or in electronic form.	

Travel Insurance Program SPORT

Insurance Class:	Voluntary health insurance
Policyholder:	Adult natural person or legal entity
Beneficiary:	Assistance company in case of self-payment – the Insured
Insured:	An individual born up to and including 90 years of age
Insurance restrictions:	The following are not accepted for insurance: ✓ individuals over 90 years old; ✓ disabled people of any group; ✓ persons who are hospitalized at the time of insurance; ✓ persons in isolation, wanted and under judicial supervision.
Object of insurance:	The object of insurance is the property interests of the Insured/Insured related to the expenses of the Insured/Insured/Beneficiary to receive medical and service services in accordance with the insurance policy and the insurance program chosen by the Insured, which arose as a result of an acute sudden illness or accident during his stay in the insurance territory specified in the insurance policy.
Insured event:	An insured event is a sudden, unforeseen and unintentional illness and/or accident that occurred during the period of validity of the insurance cover and in the territory of insurance, and as a result of which harm was caused to the life and/or health of the Insured, resulting in the occurrence of expenses specified in the insurance program.
Sum insured:	10,000 dollars/euros 20,000 dollars/euros 30,000 USD/EUR 50,000 dollars/euros 70,000 dollars/euros \$100,000 In tenge at the exchange rate of the National Bank on the date of execution of the insurance contract
Insurance premium and tariff:	It is approved by the decision of the authorized body of the Insurer, within the framework of the tariff for the class (0.3400% – 59.4864%).
Procedure and terms of payment of the insurance premium:	One-time, cash/non-cash payment.
Franchise:	Not provided.
Insurance payment:	 The insurance payment shall be made by the Insurer under the terms of the Insurance Rules in the event of an insured event: Assistance of the company, in case of the Insured's application to the Assistance; To the insured/person who has incurred expenses for the provision of medical services, including repatriation costs, in cases provided for by the Insurance Rules. The Insurer is obliged to notify them of the missing documents in writing or by e-mail/SMS within 3 (three) business days from the date of submission of the last of the required documents. The insurer is fully or partially exempt from making the insurance payment in accordance with the grounds provided for in the Insurance Rules. The Insurer, after receiving all the necessary documents for making a decision, within 10 (ten) working days makes a decision on the insurance payment or on the refusal to make the insurance payment. When making a decision to refuse to make an insurance payment, the Insurer shall send a written reasoned notice to the Insured. The amount of insurance payment is determined on the basis of the originals of receipts and invoices. The insurance payment in favor of the Insured shall be payable in the foreign currency specified in the relevant receipts and invoices. The insurance payment in favor of the Insured shall be payable in tenge at the official exchange rate of foreign currencies of the National Bank of the Republic of Kazakhstan as of the date of payment for the services of the insured event.
Information about the insurance agent:	The program provides for the issuance of insurance policies through the partners of BASEL IC JSC.
The amount of the agent's fee:	It is approved by the decision of the authorized body of the Insurer, within the framework of internal policy.
Validity period of the Insurance Policy:	From 1 day to 365 days
Insurance area:	World: Category 1 – Mass tourism countries and countries outside the territories 2,3,4 Category 2 – Schengen countries and the European Union Category 3 - USA, Canada, Japan, Australia Category 4 - Thailand
Duration of insurance coverage:	24 hours a day.

Insurance Company Basel JSC Travel Insurance Program

	Expenses for the provision of emergency medical care (visit and consultation with a doctor)	Within the insured amount
	Expenses for medicines. Limit per Insured:	50 \$/€
Risks covered by the	Expenses for the organization and provision of emergency inpatient care.	Within the insured amount
insurance policy:	Dental care costs. Limit per Insured:	50 \$/€
	Expenses related to the medical evacuation of the Insured to the international port of the country of permanent residence	Within the insured amount
	Repatriation of the Insured to the country of permanent residence.	Within the insured amount
Form of conclusion of the Insurance Policy:	The insurance policy is issued by issuing it on paper or in electronic form.	

Travel Insurance Program SPORT + Covid 19

Insurance Class:	Voluntary health insurance
Policyholder:	Adult natural person or legal entity
Beneficiary:	Assistance company in case of self-payment – the Insured
Insured:	An individual from birth to 90 years old inclusive
Insurance restrictions:	The following are not accepted for insurance: ✓ individuals over 90 years old; ✓ disabled people of any group; ✓ persons who are hospitalized at the time of insurance; ✓ persons in isolation, wanted and under judicial supervision.
Object of insurance:	The object of insurance is the property interests of the Insured/Insured related to the expenses of the Insured/Insured/Beneficiary to receive medical and service services in accordance with the insurance policy and the insurance program chosen by the Insured, which arose as a result of an acute sudden illness or accident during his stay in the insurance territory specified in the insurance policy.
Insured event:	An insured event is a sudden, unforeseen and unintentional illness and/or accident that occurred during the period of validity of the insurance cover and in the territory of insurance, and as a result of which harm was caused to the life and/or health of the Insured, resulting in the occurrence of expenses specified in the insurance program.
Sum insured:	10,000 dollars/euros 20,000 dollars/euros 30,000 USD/EUR 50,000 dollars/euros 70,000 dollars/euros \$100,000 In tenge at the exchange rate of the National Bank on the date of execution of the insurance contract
Insurance premium and tariff:	It is approved by the decision of the authorized body of the Insurer, within the framework of the tariff for the class (0.3400% – 59.4864%).
Procedure and terms of payment of the insurance premium:	One-time, cash/non-cash payment.
Franchise:	Not provided.
Insurance payment:	 The insurance payment shall be made by the Insurer under the terms of the Insurance Rules in the event of an insured event: Assistance of the company, in case of the Insured's application to the Assistance; To the insured/person who has incurred expenses for the provision of medical services, including repatriation costs, in cases provided for by the Insurance Rules. The Insurer is obliged to notify them of the missing documents in writing or by e-mail/SMS within 3 (three) business days from the date of submission of the last of the required documents. The insurer is fully or partially exempt from making the insurance payment in accordance with the grounds provided for in the Insurance Rules. The Insurer, after receiving all the necessary documents for making a decision, within 10 (ten) working days makes a decision on the insurance payment or on the refusal to make the insurance payment. When making a decision to refuse to make an insurance payment, the Insurer shall send a written reasoned notice to the Insured. The amount of insurance payment is determined on the basis of the originals of receipts and invoices. The insurance payment in favor of the Assistance Company, which is a non-resident of the Republic of Kazakhstan, shall be payable in the foreign currency specified in the relevant receipts and invoices. The insurance payment in favor of the Insured shall be payable in tenge at the official exchange rate of foreign currencies of the National Bank of the Republic of Kazakhstan as of the date of payment for the services of the insured event.
Information about the insurance agent:	The program provides for the issuance of insurance policies through the partners of BASEL IC JSC.
The amount of the agent's fee:	It is approved by the decision of the authorized body of the Insurer, within the framework of internal policy.
Validity period of the Insurance Policy:	From 1 day to 365 days
Insurance area:	World: Category 1 – Mass tourism countries and countries outside the territories 2,3,4 Category 2 – Schengen countries and the European Union Category 3 - USA, Canada, Japan, Australia Category 4 - Thailand

Insurance Company Basel JSC Travel Insurance Program

Duration of insurance coverage:	24 hours a day.	
	Risks	Limits
	Expenses for the provision of emergency medical care (visit and consultation with a doctor)	Within the insured amount
	Expenses for medicines. Limit per Insured:	50 \$/€
Risks covered by the	Expenses for the organization and provision of emergency inpatient care.	Within the insured amount
insurance policy:	Dental care costs. Limit per Insured:	50 \$/€
	Expenses related to the medical evacuation of the Insured to the international port of the country of permanent residence	Within the insured amount
	Repatriation of the Insured to the country of permanent residence.	Within the insured amount
	Inpatient treatment coverage for symptomatic Covid-19	€30,000 for Schengen countries \$/€3,000 for remaining countries
Form of conclusion of the Insurance Policy:	The insurance policy is issued by issuing it on paper or in electronic form.	

Travel Insurance Program Multy Travel, Multy Travel Active, Multy Business, Multy Business Active

Insurance Class:	Voluntary health insurance
Policyholder:	Adult natural person or legal entity
Beneficiary:	Assistance company in case of self-payment – the Insured
Insured:	An individual from birth to 90 years old inclusive
Insurance restrictions:	The following are not accepted for insurance: ✓ individuals over 90 years old; ✓ disabled people of any group; ✓ persons who are hospitalized at the time of insurance; ✓ persons in isolation, wanted and under judicial supervision.
Object of insurance:	The object of insurance is the property interests of the Insured/Insured related to the expenses of the Insured/Beneficiary to receive medical and service services in accordance with the insurance policy and the insurance program chosen by the Insured, which arose as a result of an acute sudden illness or accident during his stay in the insurance territory specified in the insurance policy.
Insured event:	An insured event is a sudden, unforeseen and unintentional illness and/or accident that occurred during the period of validity of the insurance cover and in the territory of insurance, and as a result of which harm was caused to the life and/or health of the Insured, resulting in the occurrence of expenses specified in the insurance program.
Sum insured:	10,000 dollars/euros 20,000 dollars/euros 30,000 USD/EUR 50,000 dollars/euros 70,000 dollars/euros In tenge at the exchange rate of the National Bank on the date of execution of the insurance contract
Insurance premium and tariff:	It is approved by the decision of the authorized body of the Insurer, within the framework of the tariff for the class (0.3400% – 59.4864%).
Procedure and terms of payment of the insurance premium:	One-time, cash/non-cash payment.
Franchise:	Not provided.
Insurance payment:	 The insurance payment shall be made by the Insurer under the terms of the Insurance Rules in the event of an insured event: Assistance of the company, in case of the Insured's application to the Assistance; To the insured/person who has incurred expenses for the provision of medical services, including repatriation costs, in cases provided for by the Insurance Rules. The Insurer is obliged to notify them of the missing documents in writing or by e-mail/SMS within 3 (three) business days from the date of submission of the last of the required documents. The insurer is fully or partially exempt from making the insurance payment in accordance with the grounds provided for in the Insurance Rules. The Insurer, after receiving all the necessary documents for making a decision, within 10 (ten) working days makes a decision on the insurance payment or on the refusal to make the insurance payment. When making a decision to refuse to make an insurance payment, the Insurer shall send a written reasoned notice to the Insured. The amount of insurance payment is determined on the basis of the originals of receipts and invoices. The insurance payment in favor of the Assistance Company, which is a non-resident of the Republic of Kazakhstan, shall be payable in the foreign currency specified in the relevant receipts and invoices. The insurance payment in favor of the Insured shall be payable in tenge at the official exchange rate of foreign currencies of the National Bank of the Republic of Kazakhstan as of the date of payment for the services of the insured event.
Information about the insurance agent:	The program provides for the issuance of insurance policies through the partners of BASEL IC JSC.
The amount of the agent's fee:	It is approved by the decision of the authorized body of the Insurer, within the framework of internal policy.
Validity period of the Insurance Policy:	1 year (180 days stay) 1 year (90 days stay) 1 year (60 days stay) 6 months (45 days stay)

Insurance Company Basel JSC Travel Insurance Program

	3 months (30 days stay) 1 month (15 days stay)	
Insurance area:	World: Category 1 – Mass tourism countries and countries outside the territories 2.3 Category 2 – Schengen countries and the European Union Category 3 - USA, Canada, Japan, Australia	
Duration of insurance coverage:	24 hours a day.	
	Risks	Limits
	Expenses for the provision of emergency medical care (visit and consultation with a doctor)	Within the insured amount
	Expenses for medicines. Limit per Insured:	50 \$/€
Dialra agrand by the	Expenses for the organization and provision of emergency inpatient care.	Within the insured amount
Risks covered by the insurance policy:	Dental care costs. Limit per Insured:	50 \$/€
	Expenses related to the medical evacuation of the Insured to the international port of the country of permanent residence	Within the insured amount
	Repatriation of the Insured to the country of permanent residence.	Within the insured amount
	Expenses for the return of insured children under 16 years of age in the event of hospitalization or death of an adult Insured	Within the insured amount
Form of conclusion of the Insurance Policy:	The insurance policy is issued by issuing it on paper or in electronic form.	