

VIVA⁹



Coverages and services
Product: Travel Protection
Assistance

Services Provided by
 **telasist**

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The assistance services related to the TRAVEL PROTECTION ASSISTANCE product by ABC Asistencia SA de CV, hereinafter Telasist, are governed by current Mexican legislation and by what is agreed in these General and Specific Conditions of the full refund product that constitute a unitary whole of the service, which is only provided in cases of unforeseen urgent situations.

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- **A. DEFINITIONS.** The terms set forth below shall have the following meanings for all purposes of this insurance policy.

ACCIDENT. ACCIDENT means an event arising from an external, sudden, fortuitous and violent cause that causes death or bodily injury to the INSURED, provided that it occurs within the period of validity of the policy and that death occurs within 90 (ninety) days following the date of the accident and as a consequence of it. Injuries intentionally caused by the INSURED will not be considered ACCIDENTS.

AIRLINE. Any commercial airline legally authorized for the scheduled air transportation of passengers. Airlines and/or private flights operated as charter flights are not considered in this definition and, therefore, will not be covered by this insurance.

INSURED. Each member of the INSURED COLLECTIVE, subject to the risks covered by the respective policy.

INSURANCE COMPANY AND/OR INSURANCE COMPANY. Entity that issues the insurance and assumes the contractual responsibilities defined in the policy.

- **SURA Insurance, S.A. de C.V.**
- **ABC Assistance S.A. DE C.V.**

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BENEFICIARIES. Persons who receive the BENEFIT covered by the different coverages contracted, in the event of an accident.

BENEFIT. This is the compensation to which the Beneficiary is entitled, if the claim for the loss is admissible in accordance with the provisions of this policy.

BAG OR WALLET. Clothing accessory whose main function is to carry a small number of objects of frequent personal use, commonly provided with a closure and handle. Included in this definition is what is commonly known as a backpack, purse, wallet, bag or handbag.

DAMAGE: Deterioration, mistreatment or structural impairment of the Insured's Luggage

BREAKDOWN: Structural damage when the affected object has lost or diminished its functionality, therefore, the aesthetic effects are not covered by this insurance.

LUGGAGE: Personal items that the Insured carries for use during his Trip, such as: clothing, footwear, beauty and hygiene items, entertainment items, sporting goods, medicines, books, as well as any other item intended for the purely personal use of the Insured, provided that they can be transported regularly in accordance with the policies of public transport operators and the corresponding immigration authorities, without requiring a permit or a special procedure for their transportation. Also considered Baggage are objects intended to transport articles for the personal use of the Insured, such as: suitcases, trunks, backpacks and garment bags, among others.

PERSONAL ITEMS: Clothing, personal effects and other items that are the property of the Insured; including cell phones, laptops and tablets.

LOST: Loss or disappearance of luggage theft means the act committed by any person or through which he or she takes possession of the luggage. Illegally, with the intention of dominating, the belongings or property of the insured without his consent, using physical and/or moral violence.

LOOTING: Opening of luggage and removal of personal items contained therein.

TRIP: The route taken by the Insured from the moment he/she leaves his/her place of permanent residence or the place of origin of his/her Trip, towards his/her Trip destination, the places through which he/she transits or makes connections to reach his/her Trip destination(s), the stay at said destination(s) and the return to his/her permanent residence or the place of origin of his/her Trip, including all activities carried out on said route and during the stay at his/her destination(s) and in intermediate places.

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Likewise, for the Insured to be considered to be on a Trip, his/her destination must be at least 100 kilometers away from his/her place of permanent residence or the place of origin of his/her Trip.

CERTIFICATE: For individual certificates of collective insurance;

a) Coverage: By acquiring assistance services, Cardholders will have the benefits of the collective personal accident insurance that TAS has contracted for Cardholders with Ace Seguros, S.A., or any other company that TAS determines at any time.

b) Policy cover: Document containing the general identification data and outline of the rights and obligations of the parties.

COLLECTIVE: Any group of persons who belong to the same company or who maintain a common link or interest that is lawful, prior to and independent of the conclusion of the insurance contract;

a) General conditions: Set of basic principles established by ABC ASISTENCIA, together with the respective Insurance Companies unilaterally, and which regulates the legal and operational provisions of the Insurance Contract.

CONTRACTOR: The natural or legal person who enters into the Collective Insurance contract with the INSURANCE COMPANY;

a) Coordination: administrative and operational activity provided by "ABC" that involves synchronizing different actions and defining the most appropriate way of grouping the available resources to comply with the affiliate's request in relation to assistance services and their relationship with coverage with insurance companies.

DEDUCTIBLE. This is the sum of money or percentage established in the insurance policy as not compensable by the Company, and is the minimum limit that the claim must exceed in order to be subject to compensation by the Company. It applies exclusively to the Medical Expense Reimbursement coverage.

ASSISTANCE COMPANY: ABC ASISTENCIA, S.A. DE C.V. located at Eje Central Lázaro Cárdenas No. 913, Col. Vertiz Narvarte, Benito Juárez, Mexico City, CDMX, C.P. 03600, - For the purposes of this document it will also be referred to as "ABC".

ENDORSEMENT: Document that modifies: the bases, terms and conditions of the policy; and forms an integral part of the latter.

VALID START DATE: date from which the assistance services offered by "ABC" will be available to the beneficiary.

MEMBER. Any person who forms part of the INSURED COLLECTIVE;

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That it has been declared before the execution of the Contract or registration of the insured in the policy (as applicable), and/or;

That its existence is determined in a medical record through the diagnosis of a legally authorized physician prior to the date of the contract or the date of the insured's registration to the policy (as applicable), and/or;

Pre-existing conditions: any disease or condition will be considered pre-existing:

That it has been declared before the execution of the Contract or registration of the insured in the policy (as applicable), and/or;

Diagnosed prior to the date of the contract or the date the insured is registered under the policy (as applicable), through laboratory tests, cabinet tests or any other recognized diagnostic means, and/or;

For which, prior to the date of the contract or registration of the insured in the policy (as applicable), documentary proof of expenses have been incurred to receive a medical diagnosis or treatment. Same conditions that are not applicable as an integral part of the accident coverage are therefore excluded.

Validity period for one-way flight assistance: period during which the member is entitled to assistance services. From the purchase of the trip until 3 days after the trip has been completed.

Roundtrip assistance period: period during which the member is entitled to assistance services. From the purchase of the trip until 3 days after completing the return trip.

Price: Price of the Assistance that the Passenger must pay as compensation for the Services.

Product: TRAVEL PROTECTION ASSISTANCE whose characteristics are described in these "General Terms and Conditions", by the Specific Conditions.

Supplier: Company or legal entity specialized in the areas detailed herein, which, representing "ABC", assists the affiliate in any of the services described in these general conditions.

Group insurance regulations: Regulations for Group Insurance for Life Operations and Collective Insurance for Accident and Illness Operations.

Reference: Updated and reliable information concerning the services, which is provided by "ABC" through different communication channels to the beneficiary upon request.

Services: To provide the service, the member must provide the airline ticket number or folio and the date of travel.

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Assistance situation: event where the beneficiary is faced with a situation that involves an urgent or emergency situation or requires assistance and meets the terms and limitations established in this document, provided that they have taken place during the period of validity and within the territorial scope of validity.

Group insurance: An insurance contract whose purpose is to insure a Group against risks arising from the operation of accidents and illnesses provided for in articles 7, section II and 8, sections III, IV and V of the General Law of Mutual Insurance Institutions and Societies.

a) Services: The benefits, coverage and assistance services included in this product.

Insured amount This is the maximum liability limit of SURA and ABC, agreed upon for each coverage and applicable for an accident occurring within the validity of the policy.

Foreign Territory Any territory located outside the Mexican Republic

Medical emergency: A health condition that requires immediate medical attention to prevent the condition of a person, organ, or function from worsening. While not necessarily immediately life-threatening, a medical emergency could progress to an emergency if prompt treatment is not received.

Medical emergency: Critical health situation that requires immediate medical intervention to save a person's life, prevent permanent damage, or avoid rapid deterioration of health.

Validity. The validity period will begin with the purchase of the assistance and ticket and will coincide with the date indicated on the Voucher as the start of the validity period of the service, from 00 (zero) hours on the day indicated as the start of validity, and will extend until the same day of the flight and one hour before the time indicated on the ticket as the flight date and time. A condition for the validity of the Voucher is that it is paid for in advance of the start of validity. The end of the validity period will imply the automatic cessation of all the detailed services.

If the TRAVEL Insurance product was NOT purchased at the same time as the purchase of the airline ticket, there will be a waiting period of 48 hours after the purchase to make the product valid. As long as the boarding date allows it.

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B. Table of Coverages and Assistance Services

TRAVEL ASSISTANCE PROTECTION			
P	BENEFITS	COVERAGE ASSISTANCE AMOUNT	EVENT LIMIT
1	Medical expenses for accident or illness during the trip (ground ambulance included)	Up to \$75,000 M.N.	1 event (headline)
2	Loss of checked baggage (Guarantee of baggage or personal items against total theft, looting or damage to baggage)	Up to \$30,000 M.N.	1 event (headline)
3	Expenses for delay or cancellation of trip	Up to \$10,000 M.N.	1 event (headline)
4	Replacement of bag or purse (Bag protected for purchases made during the trip)	Up to \$5,000 M.N.	1 event (headline)
5	Theft/Loss of personal items (including electronics)	Up to \$10,000 MXN	1 event (headline)
6	Assistance in case of lost documents	Up to \$1,000 MXN	1 event (headline)
7	Compensation for Food for a delay of +4 hours	Up to \$300 MXN	1 event (headline)
8	Hotel expenses for convalescence	Up to \$2,000 MXN per night	Up to 3 nights stay per event (holder)
9	Doctor at home	Included (Up to coverage limit 2,000MXN)	Unlimited
10	Medical repatriation (including ground ambulance)	Including	1 event (headline)
11	Includes Telemedicine	Including	Unlimited
12	Veterinary Medical Guidance	Included (Up to coverage limit 2,000MXN)	Unlimited

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● C. ¿WHAT SHOULD I DO IF I NEED TO REQUEST COVERAGE OR SERVICE?

If you require any of the assistance coverage contracted in your "Assistance" or if you need information about it, you must contact our ABC Assistance call center at the following number:

- Mexico City, metropolitan area and rest of the Mexican Republic: (55) 9302 9670
- Our call center operates 24 hours a day, 365 days a year.
- Through the WEB APP intended for VIVA AEROBUS in a closed channel. You will find the QR code inside the confirmation of the plane ticket.

Note: ABC Asistencia will not cover any of the coverages described in these conditions if it is not immediately reported to the call center for management and coordination. Mexico City, metropolitan area and rest of the Mexican Republic: 55 9302 9670 applicable to all VIVA AEROBUS routes and destinations. The service operates 24 hours a day, 365 days a year.

● D. TERRITORIAL SCOPE

- The Services described in these general conditions will be valid only in the destinations where VIVA AEROBUS operates.
- Medical Expense Coverage for Accident or Illness during the trip will be valid and will operate only within the Mexican Republic through direct payment with hospital admission designated by the TELASIST CAT. Coverage on its international routes will be through reimbursement.
- Claims in countries where VIVA AEROBUS does not operate are excluded.

● E. VALIDITY OF THE SERVICES

The coverage and services of the Assistance will be provided by ABC Asistencia, S.A. de C.V. and will be provided from the time of purchase and the departure of the initial flight for a maximum of 3 (three) days after your arrival on a one-way flight.

The coverage and services of the Assistance will be provided by ABC Asistencia, S.A. de C.V. and will be provided from the time of purchase and the departure of the initial flight for a maximum of 3 (three) days after your arrival on a round trip flight. You will be covered during your trip, as long as you are not in your place of residence.

The end of the validity of the services and coverage will automatically mean that no services may be requested after the validity indicated for the assistance coverage and insurance coverage.

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If the beneficiary unexpectedly interrupts his/her trip for any reason, the contracted insurance will cease to be valid from that moment on. In this situation, the beneficiary will not be able to claim any refund from his/her insurance for the period of time not elapsed or used.

● F. DESCRIPTION OF COVERAGES AND SERVICES

REIMBURSEMENT OF MEDICAL EXPENSES. The Company will reimburse the Insured for expenses incurred by him/her, up to the Insured Amount contracted for this Coverage, if as a result of a Covered Accident and within 10 days following the date of the same, he/she is required to undergo medical treatment or surgery, be hospitalized, take medication, or use the services of a doctor, nurse or ambulance. **This compensation, if contracted, will be independent of any other compensation to which he/she may be entitled. This coverage has a deductible of \$500.00 MXN, regardless of the amount of coverage up to which the passenger makes use of the benefit.**

This coverage is subject to the following:

- 1) The Company will only pay for medical services provided by institutions or by individuals or legal entities legally authorized to carry out their activity and who are not family members or partners of the INSURED. The INSURED must provide the INSURER with receipts or invoices with the respective tax requirements.
- 2) Medications and clinical or cabinet analyses must be prescribed by a doctor, therefore, when requesting reimbursement, the INSURED must present the prescriptions, medical orders and the results of the respective analyses.
- 3) Expenses resulting from dental prostheses and ambulance will be covered up to a limit of 15% and 5% respectively, of the Insured Sum of this Coverage.
- 4) The Company's liability for one or more events shall in no case exceed the Insured Amount contracted for this Coverage.
- 5) Companion, luxury or recreational expenses are not covered.
- 6) In the event that the Insured has this Coverage covered in whole or in part by other insurance, in this or other Companies, the reimbursement payable in total for all Policies will not exceed the expenses incurred, which will be settled in proportion to the benefits contracted in each Policy.
- 7) The Sum Insured for this coverage will be per covered accident, so the Company's liability will automatically end with respect to each of the Insured when:
 - a) The Insured Amount established in the policy cover for this coverage is exhausted, or;
 - b) At the end of the term stipulated in the policy cover, or;
 - c) The Insured is discharged from his/her injuries.

Whichever comes first.

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EXCLUSIONS FOR THIS COVERAGE. Accidental Death Coverage and any Additional Coverages that have been contracted will be excluded when they arise from or are a consequence of:

- a) Suicide, injuries or illnesses intentionally caused by the INSURED, even when committed in a state of mental illness.
 - b) Injuries or accidents caused by the gross negligence of the INSURED, as a result of the use or being under the influence of alcohol or any drug or stimulant, the latter except if prescribed by a doctor.
 - c) Injuries caused in a fight provided that the INSURED was the provoker.
 - d) The direct participation of the INSURED in intentional criminal acts.
 - e) Abuse of narcotics or psychotropic substances, meaning those substances and plants determined by current health legislation.
 - f) A state of revolution or war, declared or not, rebellion, insurrection or demonstrations in which the INSURED participates.
 - g) Injuries or accidents suffered while performing military service of any kind.
 - h) Any form of submarine navigation.
 - i) Atomic radiation or ionizing radiation.
 - j) Accidents that occur while the INSURED is on board an aircraft as a pilot, flight mechanic or crew member.
 - k) Injuries due to infection, poisoning of any kind and gas inhalation, except when it is proven that they were a consequence of a covered accident.
 - l) Hospitalization expenses for third parties.
 - m) Hernias or eventrations, except when caused by an accident.
- Unless otherwise agreed, accidents arising from participating in activities such as:
- n) Flights, stay or permanence in aircraft other than airplanes regularly operated by a public passenger transport company on a normally established route and subject to regular itineraries, for example, charter flights, air taxis, helicopters, balloons and gliders.
 - o) Safety, endurance or speed tests or competitions in vehicles of any type.
 - p) Use of motorcycles, scooters or other similar motor vehicles
 - q) The occasional, amateur or professional practice of dangerous sports such as, for example, parachuting, diving, bullfighting, charrería, mountaineering, motorcycling, any kind of aerial sport, skiing, bullfighting, boxing, wrestling, Greco-Roman wrestling or any form of martial arts, rafting, rappelling, jetsky.

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LOSS, THEFT, LOOTING OF CHECKED LUGGAGE

The Company will pay the Insured the Sum Insured contracted for this coverage, when the baggage registered with the Airline is looted, provided that said baggage is in the custody of the Airline at the time of the Looting and the insured has a baggage custody receipt issued by the Airline indicating the number of pieces of baggage in custody.

Guarantee of luggage or personal items against total theft, looting or damage to luggage

If the holder suffers the definitive loss of his/her checked baggage during transport on a regular commercial airline flight, THE COMPANY will coordinate payment to the holder, in accordance with the table of benefits of the contracted product.

In order to proceed with the payment, the holder must provide the supporting document for the loss (Property Irregularity Report "PIR") and a photocopy of the airline ticket.

To comply with this benefit it is essential that:

- a) The baggage has been lost en route and during a regular flight of a commercial airline.
- b) The baggage has been registered and dispatched by the airline.
- c) The airline has acknowledged the loss of the luggage in writing.
- d) Payment of compensation from the airline is required; THE COMPANY will make the payment to the policyholder only when the proof of payment settlement by the airline (VIVA AEROBUS) is presented. In the event that the airline (VIVA AEROBUS) has made a payment in kind, proof of this agreement and/or settlement must be sent to the insurer so that we can proceed with the payment up to the limit established in the benefits table. The insurer will cover the same amount of compensation from the airline or up to the coverage limit indicated in the benefits table.
- e) Covers electronics up to the limit according to the benefits table.
- f) To validate the protection, the user must contact the Telasist customer service center as soon as they detect any anomaly with their luggage and before leaving the airport.

INSTRUCTIONS IN CASE OF LOST LUGGAGE

1. As soon as there is a problem with your luggage, you must go to the airline counter (VIVA AEROBUS) and fill out the Baggage Irregularity Report (PIR). The PIR is an official document that records the loss or damage to your luggage. The following information must be provided in it:

- a) Name and surname
- b) Flight number
- c) Date and time of the flight
- d) Description of the suitcase
- e) Contents of the suitcase

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The airline, (VIVA AEROBUS), will provide the user with a PIR receipt, which must be kept. This document will serve as proof of the loss of luggage and will allow the user to claim compensation from the airline, (VIVA AEROBUS).

It is essential that the user requests compensation from the airline (VIVA AEROBUS) if the suitcase is lost, looted or damaged and makes a list of the items it contained.

2. It is an essential requirement that before leaving the airport, a report must be made by telephone to the ABC Assistance Center to notify the contingency regarding the checked baggage.

3. Inform the Assistance Center of your permanent address, the address of the place where you will be in the next few days and your next itinerary.

4. The confiscation or expropriation of luggage by order of any government or public authority, or the transportation of contraband or illegal trade, shall not be considered loss, theft or looting of luggage.

COMPENSATION FOR CONTINGENCIES TO UNDOCUMENTED LUGGAGE AND PERSONAL EFFECTS

The Insurer will pay for material losses suffered by the policyholder's luggage or personal effects during the trip (up to 36 hours after the start of the trip for single-trip purchases or during the trip for round-trip purchases), provided that the policyholder is displaced outside his or her usual place of residence up to the limit established in the benefits table, in the event of:

- a) Theft
- b) Theft from inside hotel rooms
- c) Theft from inside a vehicle, only when the objects are in the trunk and out of sight and the vehicle remains inside a closed and guarded parking lot. Valuables will only be covered for theft when it is proven that these objects were stored in a safe or when the owner was carrying them; payment for this concept will reach up to 70% of its value, verifiable by invoices.

To claim under this warranty, the user must present the following documents:

- a) Copy of the legal complaint filed with the corresponding entity depending on the country where you are located at the place and time the theft was detected, stating the list of stolen items
- b) List of the contents of the luggage with the owner's economic evaluation of its value
- c) Invoices proving its possession

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EXPENSES FOR FLIGHT DELAY OR CANCELLATION

THE INSURER will reimburse the policyholder for food, lodging and communications expenses incurred due to a delay of more than **06 (six) hours** in travel, provided that the delay is not attributable to the policyholder, subject to the limits established in the benefits table of the contracted product and against the presentation of reliable receipts of the expenses incurred.

To access this benefit, you must contact the Call Center from the airport where you are located immediately after the delay of your original flight is confirmed; and you must subsequently present a written statement from the airline certifying the delay suffered and, failing that, the cancellation. In addition, to proceed with the payment, the user must provide the document, a photocopy of the airline ticket and a certificate of purchase of the travel assistance benefit.

This benefit is excluded if the user travels with an air ticket subject to space availability or if the delay or cancellation is due to a strike called by the airline's own employees or by companies subcontracted by the airports. Cancellation or denial of boarding that occurs due to unforeseen circumstances or force majeure according to its legal definition, which prevents the airline (VIVA AEROBUS) from fulfilling its normal itinerary.

RESTRICTIONS

THE INSURER will not be liable if the policyholder leaves the airport without contacting the Assistance Center by telephone to notify the flight delay or cancellation.

GENERAL EXCLUSIONS/SERVICES NOT INCLUDED

As regards all services in general, **THE INSURER** shall have no obligation to provide any of the assistance services referred to in this contract in those cases in which the events giving rise to the obligation to provide assistance services arise from any of the following facts:

- a) Those caused directly or indirectly by the bad faith of the owner, by his participation in criminal acts, or by his fraudulent, grossly negligent or reckless actions.
- b) The consequences of the actions of the holder in a state of mental illness or under psychiatric treatment.

We remind you that, to request a service, you must contact us at least one hour before your flight or up to 48 hours after the unforeseen event has occurred, through the Telasist customer service desk. It is mandatory to contact our customer service center to request assistance at 55 9302 9670 or access through our digital media (Web App.) For more information about the product and its scope, visit the information site: <https://www.vivaaerobus.com/es-mx/adicionales/seguro-de-viaje> in the Terms and Conditions section / travel insurance as of September 30, 2024

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- c) Natural phenomena of an extraordinary nature such as: floods, earthquakes, landslides, mudslides, volcanic eruptions, atypical cyclonic storms, falls of sidereal bodies and aerolites, and in general any atmospheric, meteorological, seismic, tsunami or geological phenomenon of an extraordinary nature.
- d) Those derived from terrorism, riot or popular unrest.
- e) Actions by the Armed Forces, Law Enforcement Forces or Security Forces.
- f) Wars, with or without prior declaration, and any international conflicts or interventions involving the use of force or coercion.
- g) Derivatives of radioactive nuclear energy.
- h) Those that occur during the participation of the holder in bets, challenges or fights.
- i) Those that occur during the participation of the holder in competitions, tournaments, sports practices, and preparatory tests or training.
- j) The professional practice of any sport.
- k) The use, as a passenger or crew member, of air navigation means not authorized for the public transport of passengers, as well as helicopters.
- l) Those arising from the waiver or delay, by the policyholder or persons responsible for him, of the transfer proposed by **THE INSURER** and agreed upon by his medical service.
- m) Those relating to luggage that is not sufficiently packed or identified, as well as fragile luggage or perishable products.
- n) Expenses incurred once the holder is at his or her usual place of residence.
- o) Charter flights.

2. Additionally, **THE INSURER** shall in no case be obliged to provide assistance services or reimburse any expenses or be obligated in any way under this contract in any of the following cases:

- a) The services that the policyholder has arranged on his/her own account without the prior consent of **THE INSURER**, except in the case of force majeure or urgent need, provided that he/she reports it to the Assistance Center within 48 hours of the event occurring.
- b) The costs of medical and hospital care at the place of habitual residence once the contracted trip has ended.
- c) Death caused by suicide or injuries and consequences caused by an attempt.

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d) Death or injuries caused directly or indirectly by punishable acts or malicious actions of the holder. Death or injuries resulting from accidents suffered by the holder when he or she is in a state of intoxication or under the influence of drugs, toxins or narcotics not medically prescribed. For these purposes, it will be considered that one is in a state of intoxication when he or she exceeds the limit of grams per liter of alcohol in the blood or of alcohol in exhaled (expired) air of milligrams per liter, permitted by the traffic, road, mobility regulations or their equivalent, and also applicable legal provisions, in the different entities of the States of the Mexican Republic, which must be certified by the competent authority.

e) Those that occur during a trip initiated under any of the following circumstances:

- That the payment of the contracted product.
- Before the certificate comes into force.
- With the intention of receiving medical treatment.
- After diagnosis of a terminal illness.
- Without prior medical authorization, the holder having been under medical treatment or supervision within six months prior to the start of the trip.

"* Any service caused or derived from the COVID-19 Coronavirus disease or the SARS-COV-2 Coronavirus, as well as any mutation or variation of both.

Also excluded are accidents caused by fear or threat of these diseases.

* Those that occur in any place where the existence of an endemic, epidemic or pandemic disease has been declared by the competent local, national authorities or any competent international body or are listed as not recommended by said authorities.

- Pre-existing conditions
- Any self-inflicted injury
- Poisoning of any cause, origin or nature (except those whose cause or origin is an accident)
- When the holder travels in air taxis or in aircraft that do not belong to a legally established commercial airline authorized by the General Directorate of Civil Aeronautics or its equivalent in any other country, for the regular passenger transportation service.
- When the holder travels as a pilot-mechanic in flight or as a crew member of any type of aircraft, other than that of a commercial airline.
- When the holder travels as an occupant of a car or any other vehicle for racing, testing or speed and endurance competitions.

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- When the holder travels on motorcycles, scooters and other similar motor vehicles used for work or professional purposes.
 - Those mentioned in each assistance.
- *Anything not stated in these terms and conditions is excluded.

GENERAL SERVICE CLAIM

1. There must be an initial report to the Telasist Support Center, the emergency center as described in the terms and conditions.
2. Once the service has been lifted, the following documentation must be sent to the assigned email address, as appropriate:
 - Official identification on both sides with a valid photograph of the holder (INE, passport, driver's license and visa).
 - Claim request letter, as applicable, the claim request will indicate the documents to be sent for an opinion.

REPLACEMENT OF BAG OR WALLET OR ELECTRONIC PURSE

The Company will reimburse the Insured up to the amount of the Sum Insured contracted for this coverage when the Insured suffers the violent theft of his/her Bag or Wallet during the covered Trip.

Theft or Loss of Personal Items The Company will reimburse the Insured up to the amount of the Sum Insured contracted for this coverage, when the Insured suffers theft or loss of Personal Items during the covered Trip. This coverage does not cover cash, jewelry, credit cards, debit cards or traveler's checks.

Claim Requirements:

- Report to the Public Prosecutor's Office.
- Copy of official identification.

SPECIFIC RESTRICTIONS ON PROTECTED BAG

- Claims made after 24 (twenty-four) hours after the event occurred.

The following assets are excluded from this coverage:

- Carpets and Rugs
- Animals of any species
- Items that are presumed to be for resale and/or trade, unless proven otherwise and that are not for personal use.

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- Hearing aids, hearing aids, artificial teeth, dentures, medical and dental accessories and orthopedic appliances, eyeglasses and contact lenses.
- Bicycles, snowboards and skis.
- Checks and traveler's checks, banknotes, coins, securities, postal orders, postal or fiscal stamps, bills, promissory notes, prepaid coupons, traveler's tickets, tickets to enter entertainment events, obligations or documents of any kind, accounting books and business books as well as general contents of safes, vaults or cash registers.
- Baggage when it has been sent as freight or courier.
- Baggage when it has been sent before the User's scheduled flight departure date and indicated on the Airline Ticket issued by the Airline.
- Passports, Visas, personal identification documents, transportation tickets, certificates and other documents such as deeds, cash, credit cards, debit cards, payment cards, negotiable securities, gold, silver, stamps and keys.
- Wheelchairs, strollers, canes and other mobility devices, as these items are understood to be required for the User's mobility and are not considered Goods that must by their nature be contained in suitcases or Checked Baggage.
- Accessories for motorcycles and engines of any transport vehicle.
- Services are excluded when they are a direct or indirect result of: Strikes, war, invasion by foreign enemies, hostilities (whether war has been declared or not), rebellion, civil war, insurrection, terrorism, pronouncements, demonstrations, popular movements, radioactivity or any other major causes.
 - Total or partial losses resulting from confiscation, expropriation or destruction by order of any government, customs or government agencies or by the transportation of contraband or illegal trade.

The Company shall not be liable for any loss resulting from:

1. Military service, acts of war, rebellion, insurrection or revolution.
2. Intentional criminal acts in which the Insured participates directly.
3. When the Baggage is confiscated or retained by any competent authority.
4. When the Insured is a member or operator of the crew of the aircraft that gave rise to the event.
5. If notification of the Event to the Airline is omitted before leaving the disembarkation area.
6. If it is proven that the Baggage reported as damaged was already in that state at the time it was handed over to the Airline for custody.

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7. Merchandise and material for professional use, currency, banknotes, travel tickets, stamp collections, securities of any kind, identity documents and, in general, all paper documents and securities, credit or debit cards, traveler's checks, tapes and/or disks with memory, documents recorded on magnetic strips or filmed, collections and material of a professional nature, prostheses, glasses and contact lenses, jewelry, animals, false teeth or dental bridges, sports equipment, art objects, baggage not registered with the Airline are not covered.

GENERAL RESTRICTIONS

The following are reasons excluding assistance services:

- When the Holder does not provide truthful and timely information, which by its nature prevents the assistance situation from being properly addressed.
- When the Holder does not prove his/her identity as a beneficiary of the assistance service.
- When the Owner fails to comply with any of the obligations indicated in the general conditions.
- The Holders will not have the right to be reimbursed without prior communication with

THE INSURER.

- Assistance services that the Holder has managed, contracted and paid for on his/her own account, without prior authorization from **THE INSURER**.
- **THE INSURER** shall not be liable for delays or non-performance due to force majeure or the special administrative or political characteristics of the place where the assistance services are to be provided.
- Services are excluded when they are a direct or indirect result of: Strikes, war, invasion by foreign enemies, hostilities (whether war has been declared or not), rebellion, civil war, insurrection, terrorism, pronouncements, demonstrations, popular movements, radioactivity or any other cause of force majeure.
- Psychiatric, psychological or mental illnesses.
- Pathological effects, due to the consumption in any form of toxins, drugs, or minor or major medications, whether legal or ingested in excess (except under medical prescription) or illegal.

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- a) Those caused directly or indirectly by the bad faith of the owner, by his participation in criminal acts, or by his fraudulent, grossly negligent or reckless actions.
- b) The consequences of the actions of the holder in a state of mental illness or under psychiatric treatment.
- c) Natural phenomena of an extraordinary nature such as: floods, earthquakes, landslides, mudslides, volcanic eruptions, atypical cyclonic storms, falls of sidereal bodies and aerolites, and in general any atmospheric, meteorological, seismic, tsunami or geological phenomenon of an extraordinary nature.
- d) Those derived from terrorism, riot or popular unrest.
- e) Actions by the Armed Forces, Law Enforcement Forces or Security Forces.
- f) Wars, with or without prior declaration, and any international conflicts or interventions involving the use of force or coercion.
- g) Derivatives of radioactive nuclear energy.
- h) Those that occur during the participation of the holder in bets, challenges or fights.
- i) Those that occur during the participation of the holder in competitions, tournaments, sports practices, and preparatory tests or training.
- j) The professional practice of any sport.
- k) The use, as a passenger or crew member, of air navigation means not authorized for the public transport of passengers, as well as helicopters.
- l) Those arising from the waiver or delay, by the holder or persons responsible for him, of the transfer proposed by THE COMPANY and agreed upon by his medical service.
- m) Those relating to luggage that is not sufficiently packed or identified, as well as fragile luggage or perishable products.
- n) Expenses incurred once the holder is at his or her usual place of residence.
- o) Charter flights.

2. Additionally, **THE INSURER** shall in no case be obliged to provide assistance services or reimburse any expenses or be obligated in any way under this contract in any of the following cases:

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- a) The services that the holder has arranged on his/her own account without the prior consent of THE COMPANY, except in cases of force majeure or urgent need, provided that he/she reports it to the Assistance Center within 48 hours of the event occurring.
 - b) The costs of medical and hospital care at the place of habitual residence once the contracted trip has ended.
 - c) Death caused by suicide or injuries and consequences caused by an attempt.
 - d) Death or injuries caused directly or indirectly by punishable acts or malicious actions of the holder. Death or injuries resulting from accidents suffered by the holder when he or she is in a state of intoxication or under the influence of drugs, toxins or narcotics not medically prescribed. For these purposes, it will be considered that one is in a state of intoxication when he or she exceeds the limit of grams per liter of alcohol in the blood or of alcohol in exhaled (expired) air of milligrams per liter, permitted by the traffic, road, mobility regulations or their equivalent, and also applicable legal provisions, in the different entities of the States of the Mexican Republic, which must be certified by the competent authority.
 - e) Those that occur during a trip initiated under any of the following circumstances:
 - that the payment for the contracted product.
 - Before the certificate comes into force.
 - With the intention of receiving medical treatment.
 - After diagnosis of a terminal illness.
 - Without prior medical authorization, the holder having been under medical treatment or supervision within six months prior to the start of the trip.
 - * Any service caused or derived from the COVID-19 Coronavirus disease or the SARS-COV-2 Coronavirus, as well as any mutation or variation of both.
- Also excluded are accidents caused by fear or threat of these diseases.
- * Those that occur in any place where the existence of an endemic, epidemic or pandemic disease has been declared by the competent local, national authorities or any competent international body or are listed as not recommended by said authorities."
 - Pre-existing conditions
 - Any self-inflicted injury
 - Poisoning of any cause, origin or nature (except those whose cause or origin is an accident)
 - When the holder travels in air taxis or in aircraft that do not belong to a legally established commercial airline authorized by the General Directorate of Civil Aeronautics or its equivalent in any other country, for the regular passenger transportation service.

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- When the holder travels as a pilot-mechanic in flight or as a crew member of any type of aircraft, other than that of a commercial airline.
- When the holder travels as an occupant of a car or any other vehicle for racing, testing or speed and endurance competitions.
- When the holder travels on motorcycles, scooters and other similar motor vehicles used for work or professional purposes.
- Those mentioned in each assistance.

Assistance in case of lost documents Coverage for Assistance in Case of Lost Documents

In the event of loss, theft or destruction of important documents, such as passports, official identification, credit cards, traveler's checks, or any other personal document necessary for your trip, the assistance coverage will provide the following support:

1. Guidance and Advice: Immediate guidance will be provided on the steps to follow for the recovery or replacement of lost documents, including information on embassies, consulates and competent local authorities.
2. Procedures Management: Assistance will be provided to coordinate and expedite the procedures necessary to obtain temporary documents or their replacement, as appropriate, in order to minimize inconvenience and setbacks for the traveler.
3. Expense Coverage: Reasonable and necessary expenses related to obtaining temporary replacement documents, such as issuance fees and transportation to the nearest consulate or embassy, will be covered up to a maximum limit of \$1,000 MXN established in the service conditions.
4. Communication Support: If necessary, contact will be facilitated with family members, employers or any other relevant person to inform them of the situation and coordinate the sending of additional documents or emergency funds.

To activate this coverage, it is essential that the loss or theft of documents be reported immediately to the assistance call center, available 24 hours a day, 365 days a year. Coordination and follow-up of the procedures will be handled by our specialized support team.

COMPENSATION FOR FOOD FOR DELAYS OF MORE THAN 4 HOURS

In the event that your flight is delayed by more than 4 hours from the scheduled departure time, you will be entitled to receive compensation to cover food expenses incurred during the waiting time. Coverage limit of \$300 MXN (Mexican pesos or equivalent).

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- a) The services that the policyholder has arranged on his/her own account without the prior consent of **THE INSURER**, except in the case of force majeure or urgent need, provided that he/she reports it to the Assistance Center within 48 hours of the event occurring.
 - b) The costs of medical and hospital care at the place of habitual residence once the contracted trip has ended.
 - c) Death caused by suicide or injuries and consequences caused by an attempt.
 - d) Death or injuries caused directly or indirectly by punishable acts or malicious actions of the holder. Death or injuries resulting from accidents suffered by the holder when he or she is in a state of intoxication or under the influence of drugs, toxins or narcotics not medically prescribed. For these purposes, it will be considered that one is in a state of intoxication when he or she exceeds the limit of grams per liter of alcohol in the blood or of alcohol in exhaled (expired) air of milligrams per liter, permitted by the traffic, road, mobility regulations or their equivalent, and also applicable legal provisions, in the different entities of the States of the Mexican Republic, which must be certified by the competent authority.
 - e) Those that occur during a trip initiated under any of the following circumstances:
 - That the payment of the contracted product.
 - Before the certificate comes into force.
 - With the intention of receiving medical treatment.
 - After diagnosis of a terminal illness.
 - Without prior medical authorization, the holder having been under medical treatment or supervision within six months prior to the start of the trip.
 - * Any service caused or derived from the COVID-19 Coronavirus disease or the SARS-COV-2 Coronavirus, as well as any mutation or variation of both.
- Also excluded are accidents caused by fear or threat of these diseases.
- * Those that occur in any place where the existence of an endemic, epidemic or pandemic disease has been declared by the competent local, national authorities or any competent international body or are listed as not recommended by said authorities."
 - Pre-existing conditions
 - Any self-inflicted injury
 - Poisoning of any cause, origin or nature (except those whose cause or origin is an accident).
 - When the holder travels in air taxis or in aircraft that do not belong to a legally established commercial airline authorized by the General Directorate of Civil Aeronautics or its equivalent in any other country, for the regular passenger transportation service.

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This coverage is intended to provide comfort and minimize inconvenience caused by delays. The applicable conditions and procedures are detailed below:

Coverage Conditions:

- Compensation will be activated when the flight of the insured or assistance holder suffers a continuous delay of more than 4 hours from the original departure time, whether due to operational, meteorological, technical reasons or other causes beyond the passenger's control.
- This coverage will apply to domestic and international flights in which the insured is duly registered and has a valid ticket.
- Compensation Amount:
- Food expenses will be reimbursed up to a maximum established limit of \$300.00 Mexican Pesos in National Currency assigned under the conditions of your assistance.
- Expenses must be reasonable and directly related to the need for food during the waiting time.
- Procedure to Request Compensation:

1. The insured must keep receipts for food expenses incurred during the delay (invoices, purchase tickets, etc.).
2. It is necessary to report the situation once the flight delay has been reported to the assistance call center within 24 hours of the occurrence of the delay to receive specific instructions on the compensation process.
3. Once the procedures have been completed and eligibility verified, the expenses will be compensated in the manner and within the stipulated time frame.

Exclusions:

This coverage will not apply in situations of delay caused by decisions of the passenger, such as arriving late to the airport, refusing an alternative flight offered by the airline or any other situation under the control of the insured.

Expenses incurred without valid receipts will not be covered.

For more information or assistance during a delay, the insured may contact the call center, available 24 hours a day, 365 days a year.

HOTEL EXPENSES FOR CONVALESCENCE:

In the event that the beneficiary of assistance needs to extend his or her stay at the destination to recover from an illness or injury, convalescence hotel expense coverage will provide financial support to cover additional accommodation costs.

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This coverage seeks to guarantee an adequate and comfortable environment for the patient's recovery. The applicable conditions and procedures are detailed below:

Coverage Conditions:

Coverage will be activated when the insured, on medical advice and as a result of a covered illness or accident, requires extending his or her stay at the destination for recovery.

The insured must present a medical certificate justifying the need for convalescence and the recommended duration thereof.

This coverage is applicable to both domestic and international travel.

The coverage will cover your stay at a hotel of your choice with a coverage limit of up to \$6,000 MXN (Mexican pesos) spread over 3 nights with a maximum sub-limit of \$2,000 MXN per night of stay.

Coverage Amount:

Hotel expenses will be covered up to a maximum daily limit and for a maximum number of days specified in the policy conditions or assistance contract.

Covered expenses will include only the cost of the room and, in some cases, basic hotel services such as internet connection, up to the maximum amount established.

Procedure to Request Coverage:

1. The insured must contact the assistance call center as soon as the need for convalescence is determined to receive instructions and prior authorization.
2. It is essential to keep and present all receipts or invoices corresponding to hotel expenses incurred during the convalescence period.
3. Once the circumstances and documentation provided have been verified, the expenses will be reimbursed in the manner and within the stipulated period.

Exclusions:

Hotel expenses that have not been previously authorized by the assistance center will not be covered.

This coverage will not apply in cases where convalescence is the result of undeclared pre-existing medical conditions, cosmetic treatments, scheduled surgical interventions or any situation not covered under the conditions of the policy.

For more information or assistance, the insured may contact the call center, available 24 hours a day, 365 days a year.

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MEDICAL REPATRIATION

In the event that the insured or beneficiary of assistance suffers a serious illness or injury while traveling, and it is medically necessary for him/her to be transferred to his/her country of origin or to a specialized medical center to receive adequate treatment, medical repatriation coverage will be activated. This coverage is designed to ensure that the insured receives the necessary medical care in a safe and adequate environment. Coverage limit of \$200,000 MXN (Mexican pesos or equivalent).

The applicable conditions and procedures are detailed below:

Coverage Conditions:

1. Medical repatriation will only be carried out upon prescription of a treating physician, who will assess the severity of the situation and determine the need for transfer.
2. Transfer may be made to the insured's country of origin or to the nearest medical center most suitable for treating the patient's condition, as determined by the medical care professionals.
3. This coverage is applicable to both illnesses and accidents that occur during the trip and that are covered by the policy or assistance contract.

Services Included in Coverage:

1. Medical Transportation: Arrangement and coverage of transportation costs, which may include ground or air ambulances or commercial flights with medical accompaniment, as necessary to ensure the safety and stability of the patient.
2. Medical Accompaniment: If required, medical or paramedical personnel will be provided to accompany the patient during the transfer, ensuring continuous care during the trip.
3. Care Coordination: The care team will coordinate with hospitals, health centers and local authorities to manage the transfer and ensure proper admission to the destination.

Procedure for Requesting Medical Repatriation:

1. The insured or an authorized representative must immediately contact the assistance call center to report the situation and request repatriation.
2. A detailed medical report must be provided justifying the need for repatriation and describing the insured's health condition.
3. Once repatriation has been approved, the assistance centre will take care of all the logistical and administrative aspects of the transfer.

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Exclusions:

1. Medical repatriation will not cover situations where the insured's medical condition is not serious enough to justify a specialized transfer.
2. Repatriation expenses will not be covered if the medical condition is a consequence of engaging in risky activities not covered, drug or alcohol use, or pre-existing conditions not declared and not covered by the policy.

To activate this coverage and receive assistance, the insured can contact the call center, available 24 hours a day, 365 days a year.

GROUND AMBULANCE / INTEGRAL SERVICE AS PART OF REPATRIATION:

In the event that the insured or beneficiary of assistance suffers an illness or accident that requires immediate transfer to a medical center, the ground ambulance coverage will provide the necessary transportation to ensure that the patient receives timely medical attention. This coverage is designed to offer a quick and effective response in emergency situations. Coverage limit of \$2,000 MXN (Mexican pesos or equivalent).

The applicable conditions and procedures are detailed below:

Coverage Conditions:

1. Ground ambulance coverage will be activated when a treating physician determines that the transfer of the insured to a hospital or medical center is necessary to receive urgent treatment.
2. This coverage applies both to emergencies that occur in the insured's place of residence and during national and international trips covered by the policy or assistance contract.
3. Transport will be to the nearest hospital appropriate for treating the patient's condition.

Services Included in Coverage:

1. Ground Ambulance Transportation: Organization and coverage of transportation costs in a ground ambulance equipped with the necessary medical equipment to ensure the safety and stability of the patient during the transfer.
2. Onboard Medical Assistance: Trained medical or paramedical personnel will accompany the patient during the transfer to provide emergency medical care, monitoring of vital signs and other necessary care.
3. Coordination and Logistics: The assistance team will manage coordination with hospitals, ambulance services and local authorities to ensure a fast and effective transfer.

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Procedure for Requesting Ground Ambulance Service:

1. In case of emergency, the insured or any person on his/her behalf must immediately contact the assistance call center to request an ambulance.
2. Details regarding the patient's medical condition and exact location must be provided to facilitate coordination of the service.
3. Once the request has been received, the assistance team will be responsible for sending the ground ambulance and coordinating the transfer to the most suitable medical centre.

Exclusions:

1. Ground ambulance transfers that are not considered emergency or that have not been previously authorized by the care center will not be covered.
2. This coverage does not apply in situations related to undeclared pre-existing conditions, self-harm, or situations arising from drug or alcohol use.

For more information or assistance in emergency situations, the insured may contact the call center, available 24 hours a day, 365 days a year.

DOCTOR AT HOME

In the event that the insured needs medical care but is unable to travel to a health center due to illness or injury, home doctor coverage will provide assistance to receive medical care at the patient's place of residence. This coverage is designed to offer convenience and personalized medical care in situations where travel to the hospital is not feasible or advisable. Coverage cap of \$2,000 MXN (Mexican pesos or equivalent).

The applicable conditions and procedures are detailed below:

Coverage Conditions:

Coverage will be activated when a doctor determines that home health care is necessary due to the insured's condition.

The service request must be made when the insured is at his or her place of residence, either at his or her usual address or in temporary accommodation during a trip.

This coverage is applicable for both medical emergencies and scheduled medical consultations, provided that they are within the conditions of the policy or assistance contract.

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Services Included in Coverage:

Home Medical Care: A qualified physician will be sent to the insured's home to provide evaluation, diagnosis, initial treatment and necessary medical follow-up.

Basic Medical Equipment: The doctor will bring with him the basic medical equipment necessary for consultation and treatment at home.

Medications and Treatments: If required, the home doctor may prescribe medications or treatments, which may be purchased at local pharmacies under the conditions specified in the policy. As long as it is within the territory of the Mexican Republic. For international countries, medical prescription is excluded.

Procedure to Request Home Doctor Service: The insured or an authorized representative must contact the assistance call center to request a home doctor and provide details about the medical condition and exact location.

The care center will coordinate with local medical service providers to send the appropriate physician to the patient's home.

All relevant medical information must be provided to ensure effective and appropriate care.

Exclusions:

Home medical services that are not previously authorized by the care facility will not be covered.

Coverage does not include services requiring hospitalization, major surgery or specialized treatments that cannot be administered at home.

To activate this coverage and receive home medical assistance, the insured can contact the call center, available 24 hours a day, 365 days a year.

TELEMEDICINE:

In the event that the insured needs medical care but is unable to attend an in-person consultation, telemedicine coverage will provide access to remote medical consultations through digital platforms. This coverage allows receiving medical guidance, diagnosis and follow-up without the need to travel to a health center. The applicable conditions and procedures are detailed below:

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Coverage Conditions:

1. Telemedicine coverage is available for non-urgent medical consultations and for monitoring medical conditions under the recommendation of a health care professional.
2. It will apply to consultations both in situations of illness and preventive medical check-ups, provided that the insured's condition allows for remote consultation.
3. Telemedicine is available nationally and internationally, depending on the conditions of the policy or assistance contract.

Services Included in Coverage:

1. Remote Medical Consultations: Access to medical consultations through video calls, phone calls or secure communication platforms, with specialized doctors who will provide guidance and diagnosis.
2. Prescription of Medications: The doctor may prescribe necessary medications and treatments, which the insured may purchase at local pharmacies.
3. Follow-up and Guidance: Ongoing follow-up and additional medical recommendations will be provided as needed, through the same telemedicine platform.

Procedure to Request the Telemedicine Service:

1. The insured must contact the assistance call center to request a telemedicine consultation and provide details about his/her medical condition.
2. The call center will coordinate the consultation with an appropriate physician and provide instructions on how to access the telemedicine platform.
3. The insured must have access to a device compatible with the telemedicine platform and a stable internet connection.

Exclusions:

1. Telemedicine coverage does not include medical emergencies that require immediate attention or urgent in-person intervention.
2. Services that are not provided through the authorized telemedicine platform or services outside the scope of teleconsultation, such as surgical procedures or diagnoses that require specific physical examinations, will not be covered.

To activate this coverage and receive a medical consultation via telemedicine, the insured can contact the call center, available 24 hours a day, 365 days a year.

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TELEPHONE MEDICAL GUIDANCE

Should the insured require advice regarding the health and well-being of their pet while travelling or at their place of residence, veterinary medical guidance coverage will provide access to consultations and advice from veterinary professionals. This coverage is designed to offer support in non-emergency situations related to pet health, providing peace of mind to the insured. The applicable conditions and procedures are detailed below:

Coverage Conditions:

1. Veterinary medical guidance coverage is available for consultation and advice on non-urgent health issues affecting the insured's pet.
2. This will apply to both pets in the insured's home and those traveling with them, provided that they are within the scope of the policy or assistance contract.
3. Coverage is available nationally and internationally, subject to the conditions set out in the policy.

Services Included in Coverage:

1. Remote Veterinary Consultations: Access to consultations through digital or telephone platforms with specialized veterinarians who will provide guidance on health problems, symptoms and general care.
2. Advice on Treatments and Medications: Guidance on the use of medications, treatments and specific care necessary for the pet.
3. Local Service Recommendations: Information about local veterinary clinics, specialists or service providers in the area in which the insured is located.

Procedure to Request the Veterinary Medical Guidance Service:

1. The insured must contact the assistance call center to request veterinary medical advice and provide details about the pet's condition.
2. The contact center will coordinate the consultation with an appropriate veterinarian and provide instructions on how to access the consultation platform, if applicable.
3. Detailed information about your pet, including medical history and current symptoms, should be provided to receive accurate recommendations.

Exclusions:

1. Veterinary medical guidance coverage does not include veterinary emergencies that require immediate intervention or urgent in-person care.

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1. Expenses related to treatments, diagnostic tests or surgical procedures that are not part of the orientation consultation will not be covered.
2. To activate this coverage and receive veterinary medical advice, the insured can contact the call center, available 24 hours a day, 365 days a year.

VETERINARY DOCTOR AT HOME

In the event that a pet needs veterinary care but cannot be transported to a clinic due to its condition, home veterinary coverage will provide assistance to receive medical care at the pet's location. This coverage is designed to offer convenient and personalized care, ensuring that the pet receives the necessary care without having to travel. The applicable coverage cap will be \$2,000 MXN (Mexican Pesos or its equivalent). The applicable conditions and procedures are detailed below:

Coverage Conditions:

1. Home veterinary coverage will be activated when a veterinarian determines that home care is necessary due to the pet's condition.
2. The service is available for both veterinary emergencies and scheduled consultations, as long as they are within the scope of the policy or assistance contract.
3. Coverage is applicable nationally and internationally, according to the conditions specified in the policy.

Services Included in Coverage:

4. Home Veterinary Care: A qualified veterinarian will be sent to the insured's home to perform a complete evaluation of the pet, diagnosis, initial treatment and medical follow-up.
5. Basic Medical Equipment: The veterinarian will carry with him the necessary equipment to perform the consultation and provide treatment at home.
6. Prescription of Medications: The veterinarian may prescribe necessary medications and treatments, which the insured may purchase at local veterinary pharmacies.

Procedure to Request Home Veterinary Service:

7. The insured must contact the assistance call center to request a home veterinarian and provide details about the pet's condition and exact location.
8. The care center will coordinate the service with an appropriate veterinarian and provide instructions regarding the home visit.

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9. All relevant medical information about the pet must be provided to ensure proper and effective care.

Exclusions:

10. Home veterinary coverage does not include services that are not emergencies or that have not been previously authorized by the care center.

11. Expenses related to prolonged treatments, major surgical procedures, or diagnostic tests requiring specialized equipment not available for home care will not be covered.

12. To activate this coverage and receive veterinary care at home, the insured can contact the call center, available 24 hours a day, 365 days a year.

Legal Framework – Annex to the General Conditions

SURA INSURANCE, S.A. de C.V.

The articles mentioned in this Insurance Contract may be consulted at www.segurossura.com.mx/glosario For any questions, claims or clarifications, please contact the Specialized User Service Unit, which is located at Av. Insurgentes Sur 2475, floors 22 and 23, Barrio Loreto neighborhood, Álvaro Obregón municipality, C.P. 01090, Mexico City; with business hours from Monday to Thursday from 8:30 a.m. to 5:30 p.m. and Fridays from 8:30 a.m. to 2:30 p.m.

Telephone: 55 5723 7912.

Email: unat.clientes@segurossura.com.mx

Website: www.segurossura.com.mx

You can also go to the National Commission for the Protection and Defense of Users of Financial Services, located at Av. Insurgentes Sur 762, Del Valle neighborhood, Benito Juárez municipality, C.P. 03100, Mexico City.

Telephones: 55 5340 0999 or 800 999 80 80.

Email: asesoria@condusef.gob.mx

Privacy notice: <https://www.segurossura.com.mx/legales/aviso-de-privacidad/>

Website: <https://www.condusef.gob.mx/>

Services provided by:

ABC ASISTENCIA S.A. DE C.V. (Telasist)

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