**APPLICATION FOR A TERMINATION OF THE INSURANCE POLICY**

|  |
| --- |
| **Number of Insurance Policy:**  |
|  |
| **First Name and Surname / Corporate Name / Name of the Policyholder:****Personal ID Number/ Company ID Number:** |

|  |
| --- |
| **Reason for the termination of the insurance policy** |
| [ ]  **termination at the end of the insurance period** | The insurance is terminated by **the policyholder's written notice** at the end of the insurance period, if the notice is delivered to the other contracting party no later than six weeks before the end of the insurance period. |
| [ ]  **termination within 2 months from the date of conclusion of the insurance contract** | The insurance is terminated by **the policyholder's written notice** within two months from the date of conclusion of the insurance contract. The notice period shall be eight days. The insurance terminates upon the expiry of the notice period. |
| [ ]  **termination within 1 month from the date of provision, reduction or refusal of insurance benefits** | The insurance is terminated by **the policyholder's written notice** within one month from the date of provision of the insurance benefit, reduction or refusal of the insurance benefit. The notice period shall be eight days. The insurance terminates upon the expiry of the notice period. |
| [ ]  **change in the owner of the insured item** | The insurance expires by changing the owner of the insured item as well as by changing the administration or use of an item of another party. For the termination, it is necessary to **provide a document proving changing owner**, e.g. title deed, purchase contract and others. The insurance terminates on the day the owner of the insured item changes. |
| [ ]  **dissolution of the insured** | The insurance of a legal entity and natural persons - entrepreneurs expires by termination of the insured person's activity:. An **extract from the relevant registry** must be attached to the application. If the insured is a natural person, in the event of his death, the rights and obligations pass to the heirs, the insurance policy does not expire. |
| [ ]  **insured item ceases to exist** | The insurance is terminated if the reason for further insurance ceases to exist, i.e. if the insured item ceases to exist. A **document proving the demise of the insured item** must be attached to the application. The insurance terminates on the day of the insured item's demise. |
| [ ]  **termination by agreement** | The insurance is terminated by a written agreement between the policyholder and the insurer. |
| [ ]  **replacement with a new insurance policy** | The insurance is terminated by the replacement of the insurance policy as of the day before the date of commencement of the new insurance policy. Please **enter the number of the new insurance policy** ...................................... |
| [ ]  **withdrawal from an insurance policy concluded at a distance** | The right to withdraw from a insurance policy concluded at a distance can be used by the policyholder by written request within 14 calendar days from the conclusion of the distance insurance policy, as long as the insurance policy is concluded by paying the insurance premium, within 14 days from the crediting of funds to the account of the insurance company. The insurance policy expires from the beginning. |

The policyholder hereby requests for termination of the above insurance policy. At the same time, the Policyholder acknowledges that the Insurer is entitled not to accept the termination of the insurance policy on the basis of the data provided in this Application for a termination of the insurance policy provided, unless the Policyholder provides written documents proving the reason for termination, or if the legal periods for submitting the termination of the insurance policy are not met.

In .................................... on ................................ ......................................................................................

 First Name, Surname / Corporate Name and
 Signature of the Policyholder

**Information on Personal Data Protection**

An Insurer as a branch of an insurance company from another Member State in accordance with Article 6 (1) (b) of Regulation (EU) 2016/679 of the European parliament and of the council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) (hereinafter referred to as the "GDPR Regulation") is authorized as a contracting party to process the personal data of the other contracting party without its consent for the purpose of fulfilling the insurance contract.

Additional information pursuant to the provisions of Article 13 et seq. GDPR regulations concerning information and access to personal data, including the rights of the client as a data subject, are published by the insurer and provided to the client on the website www.premium-ic.sk. This information may also be provided in writing upon request.