Insurance for dog and cat

Product guide

Insurance terms and conditions

INSURANCE FOR DOG AND CAT
This product guide and insurance terms and conditions are valid as of 1 April 2018.

Our insurance services are always with you

vahinkoapu.op.fi
In the event of loss or injury, the number and address of our partner closest to you will be readily made available. You can conveniently report the loss or injury at the same time. To file a report, you need the login identifiers and key code for your online bank.

OP-mobile
As a cooperative bank customer, you can view your insurance policy and any loss or injury on OP-mobile. In the event of loss or injury, the number and address of our partner closest to you will be readily made available. You can conveniently report the loss or injury at the same time. To file a report, you need the login identifiers and key code for OP eServices.

eInsurance Services
Log into the online service at **op.fi** or **pohjola.com** with your user identifiers for OP eServices. You can

- Buy insurance.
- Report a loss and file claims.
- Make changes to your insurance.
- View your insurance documents.

Insurance services number +358 (0)10 253 133
You can take care of your insurance business on weekdays until 10 p.m.

Centralise and realise the benefits.
By concentrating your banking and insurance services with OP Financial Group

- You only need one user ID and password to use banking and insurance services at op.fi or on OP-mobile.
- As a customer-owner you accumulate OP bonuses not only from your banking transactions but also from Vehicle Cover and Extrasure insurance premiums.
- You can use the bonuses to pay for home, family and motor vehicle insurance premiums.
- You can earn considerable banking and insurance discounts.

For more information, please go to **op.fi/edut.**

Phone us
Banking services +358 (0)10 253 1333 (in English), +358 (0)100 0500 (in Finnish)

Insurance services +358 (0)10 253 1333 (in English), +358 (0)303 0303 (in Finnish)

Call rates

OP telephone service at +358 (0)10 253 1333 and +358 (0)100 0500:

- As specified in your mobile telephone operator's price list, or
- The same as for normal local calls.

Insurance services number +358 (0)10 253 133

- From mobile phones and landline networks in Finland, EUR 0.0835 per call plus EUR 0.12 per minute.

We record customer calls to assure the quality of customer service, among other things. Read more at uusi.op.fi/dataprotection.

Contents

Extrasure
Dog and cat coverage is included under an Extrasure insurance contract. OP Insurance Ltd is the insurer.

Insurance for dog and cat - product guide

By insuring your dog and cat, you can be financially prepared for your pet's illness, injury or death.

You can take out a policy for a dog or cat that is more than 6 weeks and less than 7 years of age. Insurances are valid until the end of the insurance period when the animal reaches the age of 10. Medical treatment expenses insurance ensures quick and good treatment to your pet in case of illness or injury. Animal insurance compensates financial loss if your pet disappears or dies. You can expand the coverage through Animal liability insurance.

	What do we compensate?	Deductible
Medical expenses insurance	**We will compensate** medical treatment expenses during each insurance period to an amount which you have chosen as the maximum: EUR 600, EUR 1,200 or EUR 1,600. We cover expenses for: » examinations and treatment » bandaging and medication sold under licence in pharmacies » x-ray and laboratory tests.	We will charge a deductible of EUR 70 for expenses incurred during the insurance period, and 30 or 40%, whichever you have chosen, for any amount in excess of it.
Animal insurance	**We will compensate** the sum insured if your dog or pedigree cat » dies of illness or in an accident » disappears or is stolen and is not found within a month » is ordered by a vet to be put down for reasons of animal protection.	No deductible
Animal liability insurance Supplementary cover for animal insurance	**We will compensate** expenses for up to EUR 85,000 if your dog or pedigree cat causes damage to a third party or their property by biting or by colliding with a car, for example. Our requirement is that the owner, carer or keeper of the dog or pedigree cat is liable for compensation by law. Animal liability insurance is good to have especially if you do not have any other liability insurance, if you need more comprehensive cover for the pet's regular carer or if you are travelling with your pet.	EUR 150

NB. Accidental death of your pet will only be compensated up to EUR 1,500 under MyHome Insurance in which your home contents have been insured.

The medical expenses insurance does not cover, for example

- veterinary examinations and treatments which do not conform with generally accepted veterinary science or which are not necessary for the treatment of the illness or accident
- treatment of a developmental disorder of the skeleton or the joints
- costs caused by a developmental disorder of the respiratory tract
- treatment of infertility or sterility
- costs caused by behavioural problems
- castration, sterilisation, treatment of parasites, extraction of teeth
- vitamins, minerals, food supplements, special diets
- organically grown produce
- preventative care, such as vaccinations, tartar removal or orthodontic treatment
- caesarean sections in certain cases
- costs caused by false pregnancies
- medical treatment expenses caused by complications arising from an illness or a medical procedure not covered by the insurance.

Valid also during travel

Dog and cat insurance policies are valid in the Nordic countries. Medical treatment expenses, animal and animal liability insurance policies are also valid temporarily, for a maximum of 12 months, in other EU countries and Switzerland. The territorial scope of medical expenses and animal insurance may be extended by separate agreement and for an additional premium.

Health declaration

When you buy insurance to your dog or cat, you must fill in a health declaration for the animal. The pet's state of health will determine the coverage that may be granted. For example, we do not provide compensation for an existing illness.

The health declaration is easy to fill in online. Any information you provide will be handled in confidence by experts specialising in health declarations.

OP Financial Group member cooperative bank customer:

- Log in to op.fi

Customers using other banks:

- log in using your own bank's online codes at pohjola.com.

Then go on to Vakuutukset - Terveysselvitys to fill in the health declaration.

Have all the information and papers regarding the animal's available when you start filling in the health declaration form, because for data security reasons the connection will be cut off automatically if you stay on a single page for more than 20 minutes.

By sending in the health declaration, you will have accepted the insurance offer, but do wait until we have sent you confirmation that the policy has been granted to you before you terminate your existing policy.

Insurance pricing

Each insurance product is priced separately to correspond with the risks as closely as possible. The total price depends on the details of the insured animal and the insurance coverage choices.

Things that affect the price when you buy the insurance and while it is valid include

- Animal's breed
- The animal's age, the maximum compensation and deductible you chose for the medical treatment expenses insurance, and the policyholder's home municipality
- In animal insurance, the sum insured that is up to the animal's fair value.

The information concerning the insurance must be correct. If it turns out later that the information you have given, for example the animal's date of birth, is incorrect or incomplete, the indemnity may be reduced or denied altogether, or your insurance contract may even be cancelled.

Change in premium

The premium level changes annually on the basis of the age of the insured animal, because this has been found to correlate with claims paid to customers.

We weigh the policy's existing pricing factors' effect on the premium price on the basis of claims paid out, and review the price to ensure that the price can meet the potential risk involved. We will also review the premium annually if necessary on the basis of claims expenditure and for reasons explained in the general terms and conditions.

In addition to the above, the insurance company has the right to make price changes owing to bonus, customer loyalty and owner-customer matters or other similar reasons. The premium amount is affected, at the time the policy is taken out and also later during its validity, by any customer benefits and discounts, the amounts of which and the grounds for granting them, and duration and validity periods may change, for example, when a fixed-period discount or campaign discount comes to an end.

Take good care of your pet

The safety regulations instruct you on vaccination and veterinary surgeon matters. When you file a claim for compensation, it is important that you have followed them. If you failed to follow them and this contributed to the loss or damage, the compensation may be reduced or not be paid at all. Remember, too, to follow the Animal Diseases Act (441/2013) and Animal Welfare Act (247/1996) and any other official regulations.

In case of loss or damage

The number and address of our partner closest to you will be readily made available on OP-mobile, online or by telephone. You can conveniently report the loss or injury at the same time.

- vahinkoapu.op.fi
- OP-mobile
- Insurance services number +358 (0)10 253 133

Insurance terms and conditions

Insurances for dogs and cats include medical treatment expenses insurance, animal insurance, loss-of-use insurance and animal liability insurance.

The insurance cover selected for each insured animal is stated in the policy.

Common provisions

1 The insured animal

The insured animal is the animal specified in the insurance policy.

2 Validity

2.1 Territorial scope

The insurance cover is valid throughout the Nordic countries.

Medical treatment expenses insurance, animal insurance, loss-of-use insurance and animal liability insurance are temporarily also valid in the other EU countries and Switzerland, but only for a maximum of one year without interruption.

The territorial scope of the medical treatment expenses insurance, animal insurance and loss-of-use insurance can be extended by a supplementary agreement at an additional premium.

2.2 Effect of the insured animals age on validity

The loss-of-use insurance ceases to be valid at the end of the insurance period during which the insured dog reaches the age of 8. The litter insurance ceases to be valid at the end of the insurance period during which the insured dogs reach the age of 2. Other insurance policies cease to be valid at the end of the insurance period during which the insured animal reaches the age of 10.

3 Commencement of insurance event in case of illness

An illness is considered to have begun when it has begun in accordance with generally accepted veterinary practice, regardless of when the illness or its symptoms were first diagnosed.

4 Value added tax

No VAT is paid from the insurance if the recipient of the indemnity is liable to pay VAT.

5 Nuclear accident and war

The insurance does not cover any loss or damage caused
- by a nuclear accident as referred to in the Nuclear Liability Act, or caused by material, equipment or weapons based on nuclear reaction or ionising radiation, regardless of where the nuclear accident occurred
- by war or armed conflict.

Medical expenses insurance

1 Coverable insurance events

Compensation is paid under the insurance for expenses incurred from the treatment of the insured animal caused by an illness or an accident, if the illness begins or the accident occurs during the validity of the insurance cover.

Exclusion:

Medical expenses are covered only if they are incurred during the validity of the insurance cover.

2 Compensation

2.1 Coverable treatment expenses

Treatment expenses are covered provided that the examination or treatment of the illness or injury is performed or prescribed by a vet. In addition, the examination or treatment procedures must be in accordance with generally accepted veterinary practice and necessary for treatment of the illness or injury in question.

These coverable treatment expenses include
- fees for examination and treatment by a vet
- costs of bandaging and medical products sold at the chemists under a Finnish National Agency for Medicines licence
- fees for x-ray and laboratory examinations.

2.2 Expenses which are not covered

Medical expenses are not covered if they are caused by
- developmental disorder of the skeleton or the joints
- developmental disorder of the respiratory tract
- infertility or sterility
- behavioural problem
- castration, sterilisation, treatment of parasites or extraction of teeth, unless these are necessary to treat an illness or injury covered by the insurance
- the purchase of vitamins, minerals, food supplements, special diets or organically grown produce
- a caesarean section on a dog which has already had one before. The operation is never covered in the case of French or English bulldogs, Boston terriers or Chihuahuas.
- preventive care
- false pregnancy
- complications arising from an illness or a medical procedure not covered by the insurance.

2.3 Deductible and maximum compensation

The deductible stated in the insurance policy will be deducted from coverable expenses.

The insurance company will indemnify medical treatment expenses only up to the amount stated in the policy.

Animal insurance

1 Coverable insurance events

Compensation is paid under the insurance when, during the policy's validity, the insured animal
- has died because of an illness or accident
- has fallen ill or been injured as a result of an accident so severely that a vet has considered it necessary to have the animal put to sleep (euthanasia)
- has disappeared or been stolen.

Euthanasia is considered necessary when the animal has to be put to sleep for reasons of animal protection.

Exclusions:

For compensation to be paid, the illness must have begun or the accident occurred during the validity of the insurance.

Payment of compensation for a lost or stolen animal requires that the animal has not been returned within thirty days of the disappearance or theft.

2 Losses excluded from cover

The insurance does not cover the death or euthanasia of an animal if the reason for the death or euthanasia is
- developmental disorder of the skeleton or the joints
- behavioural problem.

Similarly, compensation is not paid under the insurance insofar as the insurance event is indemnified under some other insurance, the Animal Diseases Act or otherwise from public funds.

3 Compensation

The benefit paid is the sum insured stated in the policy.

4 Reduction of the sum insured

The sum insured of animal insurance is reduced when a right to compensation arises under loss-of-use insurance. The reduced sum insured is the difference between the former sum insured and the compensation paid out of the loss-of-use insurance.

Loss-of-use insurance

The sale of loss-of-use insurance was discontinued on 1 January 2017, which means that the condition is only applied to policies taken out before that date.

1 Coverable insurance events

Compensation is paid under the insurance if, as a result of an accident which occurred or an illness which began during the validity of the insurance, the insured dog, during the validity of the insurance, becomes permanently incapable of fulfilling the purpose for which it was insured.

Permanent incapability means that
- a competition dog which has completed an official competition becomes permanently unable to compete. By competition we do not refer to shows.
- a trained hunting dog which has successfully completed the required breed-specific working trials becomes permanently unable to hunt
- a stud dog with at least one registered litter becomes permanently unable to father offspring
- a specially trained dog used for the purpose of its training becomes permanently incapable of this use.

2 Losses excluded from cover

The insurance does not cover loss of use caused by
- a developmental disorder of the skeleton or the joints
- a behavioural problem.

Similarly, compensation is not paid under the insurance if the stud dog can no longer be used for breeding for genetic or other reasons.

3 Compensation

The benefit paid is the sum insured stated in the policy.

4 Effect of the insurance event on validity

The insurance ends when a right to compensation under this insurance has arisen.

Dog litter insurance

The sale of dog litter insurance was discontinued on 1 January 2017, which means that the condition is only applied to policies taken out before that date.

1 Coverable insurance events

The insurance compensates for the death of an insured dog caused by a latent disorder during the validity of the insurance cover or for euthanasia which was necessary because of a latent disorder and was performed on the orders of a vet during the validity of the insurance cover.

The insurance also covers medical expenses for treatment of a latent disorder during the validity of the insurance cover.

A latent disorder is a congenital or heritable latent disease or a latent disorder which was impossible to diagnose in the vet's examination required by the insurance company before the inception of the insurance but which, in accordance with veterinary experience, must have been in existence at the time of the examination.

Euthanasia is considered necessary when the dog must be put to sleep for reasons of animal protection.

Exclusion:

Compensation for the death or euthanasia of the dog is only paid if a written deed of sale had been made on the dog and the dog had been handed over to the buyer before the latent disorder was diagnosed. In addition, the seller must be liable to the buyer for a latent disorder under the consumer protection legislation. Even if the seller is not a trader as referred to in the said legislation, the liability is assessed accordingly.

2 Losses excluded from cover

The insurance does not cover the dog's death, euthanasia or medical expenses caused by
- hip or elbow joint dysplasia
- osteochondrosis
- behavioural problem
- a disorder that does not affect the dogs health or life as a pet.

Similarly, no compensation is paid for
- a latent disorder recurring in the second or some later litter of a bitch whose puppy from a previous litter has had the same disorder, which the breeder has been or should have been aware of at the time the bitch was serviced
- death, euthanasia or medical expenses covered either fully or partly under Extrasure animal insurance or medical expenses insurance, regardless of whether the animal is covered by these insurance schemes
- medical expenses caused by the identification of a latent disorder if no such disorder is diagnosed
- medical expenses caused by the purchase of vitamins, minerals, food supplements, special diets or organically grown produce.

3 Compensation

3.1 Death

When the dog dies, the sum insured entered in the insurance policy and the vet's fee for putting the dog to sleep are paid.

3.2 Medical expenses

3.2.1 Coverable treatment expenses

A precondition for the compensation of medical expenses is that the examination or treatment of a latent disorder is performed or prescribed by a vet. In addition, the examinations and treatments must be in accordance with generally accepted veterinary practice and necessary for treatment of the latent disorder in question.

These coverable treatment expenses include
- fees for examination and treatment by a vet
- costs of bandaging and medical products sold at the chemists under a Finnish National Agency for Medicines licence
- fees for x-ray and laboratory examinations.

3.2.2 Maximum compensation and deductible

The maximum compensation paid for medical expenses during the validity of the insurance is the sum insured for the dog.

The deductible mentioned in the policy is subtracted per any one insurance event.

Safety regulations

1 Significance of safety regulations

The safety regulations given in the insurance policy, insurance terms and conditions or other instructions in writing must be complied with. If the safety regulations are not complied with, any compensation may be reduced or disallowed under section 6 of the General Terms of Contract.

2 Care of the animal

Proper care of the animal includes necessary vaccinations. The dog shall at all times have a valid vaccination against the Parvo virus and distemper. The cats shall have a valid cat vaccination.

If the insured animal is injured, falls ill or goes limp, or suffers weight loss, the policyholder or the carer of the animal shall without delay report this to a vet and, if necessary, call a vet to see the animal or take the animal to a vet for treatment.

The treatment of a sick or injured animal must continue uninterrupted until it has recovered.

Instructions given by the vet must be followed.

3 Other regulations

The provisions of the Animal Diseases Act and Prevention of Cruelty to Animals Act, and other regulations issued by the authorities shall be complied with.

Filing a claim

1 Notification of insurance event

The claimant shall immediately notify the insurance company of the insurance event. This can be done by filling in the insurance company's loss report form.

2 Medical expenses insurance

The following documents must be appended to the notification form:
- a vet's bill of costs giving details of the treated animal, the illness or injury, and the procedures performed
- original receipts for treatment expenses paid.

A claim for medical expenses indemnity must be submitted within one year of the date on which the expenses incurred.

3 Animal insurance

A vet's statement about the cause of death or need for euthanasia must be appended to the notification form.

The police must be informed without delay of the disappearance or theft of an animal. A copy of the notification made to the police must be appended to the notification form. If the strayed or stolen animal is returned to the owner, he or she must return the compensation to the insurance company without delay.

4 Loss-of-use insurance

The following documents must be appended to the notification form:
- copies of documents verifying the specific use for which the dog was insured
- a statement by a vet on permanent loss of use and the reason thereof.

5 Dog litter insurance

5.1 Death benefit

The following documents must be appended to the notification form completed by the policyholder:
- a copy of a vet's statement on an examination carried out before the inception of the insurance
- a copy of the deed of sale on the dog
- evidence that the dog has been handed over
- a vet's statement on the cause of death or the need for euthanasia.

5.2 Compensation for treatment expenses

The following documents must be appended to the notification form completed by the policyholder:
- a copy of a vet's statement on an examination carried out before the inception of the insurance
- a vet's bill of costs giving details of the treated animal, the latent disorder and the procedures performed
- original receipts for treatment expenses paid.

6 Document costs

Claimants must supply the documents listed in items 1–5 at their own cost. The insurance company will indemnify the cost of any other certificates, statements and records it asks for.

Animal liability insurance

1 Those insured

Those insured are the owner, carer and keeper, each in this capacity, of the animal specified in the insurance policy and covered by animal insurance.

2 Coverable insurance events

2.1 The animal liability insurance covers any bodily injury and material damage caused, within the territorial scope of validity of the insurance, to a third party by an animal which is insured under animal insurance and which is the legal responsibility of the insured person, provided that the liability has arisen from an act or negligence which has taken place during the validity of the insurance.

2.2 Loss or damage caused by a child is covered even when the child is not liable to pay damages because of his/her age. As an exception to section 7 of the General Terms of Contract, the insurance also covers loss or damage deliberately caused by a child under 12 years of age.

Exclusion:

The insurance does not cover loss or damage caused by a child if another person is liable for the loss or damage.

2.3 Regardless of any fault of the insured, the insurance covers bodily injury resulting from the bite of a dog insured under animal insurance, and any loss or damage caused by the insured dog in a direct collision with a motor vehicle.

Exclusion:

This extension does not apply to
- any loss or damage for which another party is liable
- a traffic or other accident caused by avoiding a dog.

3 Losses excluded from cover

The insurance does not cover

3.1 loss or damage caused
- to the insured or a person residing permanently with the insured in the same household
- to the insured person's employee or the equivalent insofar as the person concerned is entitled to compensation under statutory workers' compensation or motor liability insurance.

3.2 loss of or damage to property which, when the act or negligence causing the loss or damage took place, is or was in the possession of, at the personal disposal of, borrowed by, stored with or otherwise handled by or in the care of the insured or a person residing permanently in the same household as the insured

3.3 loss or damage for which the insured is liable only by virtue of an agreement, engagement, promise or guarantee

3.4 loss or damage caused by a strike or other similar cause.

4 Special measures to be taken on occurrence of an insurance event

4.1 In any matter covered by this insurance, the company will determine whether the insured is liable to pay damages, will negotiate with the claimant and will pay the indemnity required by the loss.

4.2 The insured shall provide the company with an opportunity to assess the amount of loss or damage and to reach an amicable settlement.

Exclusion:

If the insured makes good the loss, agrees thereon or accepts the claim, this will not be binding on the insurance company, unless the amount and basis of the damages are manifestly correct.

4.3 If damages coverable under this insurance are demanded from the insured in legal proceedings, the insured must immediately notify the insurance company of the proceedings. The company will handle the legal proceedings at its own cost on behalf of the insured insofar as they concern the said damages.

Exclusion:

The costs of legal proceedings taking place outside the Nordic countries are indemnified to a maximum of EUR 8,500.

4.4 If the company has notified the insured of its readiness to settle with the injured party within the limits of the sum insured, and the insured does not consent thereto, the company is not obliged to indemnify for any extra costs incurred thereafter.

5 Indemnification regulations

5.1 The sum insured recorded in the policy is the upper limit of the company's liability in each insurance event.

5.2 Multiple loss or damage caused by a single event or circumstance is considered a single insurance event.

5.3 In all insurance events, the insured is responsible for a certain amount of the loss, i.e. the deductible, which is specified in the insurance policy.

5.4 Legal provisions on value added tax will be taken into account in calculations of the amount of loss.

If the recipient of the indemnity is entitled, under the Value Added Tax Act, to deduct in his/her own value added taxation the value added tax included in purchase invoices for goods or services arising from the loss or to have the tax refunded, the tax is deducted from the indemnity.

If a deduction or refund right applies to the acquisition invoice of the property or the relevant part of it, the value added tax corresponding to the amount of loss is deducted from the indemnity.

If the indemnity is to be considered income which replaces business income subject to value added tax, the indemnity is exempt from tax.

6 Joint and several liability

Where several parties are jointly liable to make good a case of loss or damage, the insurance will indemnify for that part of the loss or damage which corresponds to the culpability attributable to the insured and to any advantage he/she may have gained through the insurance event.

General terms of contract

The General Terms of Contract apply to all the types of insurance included in the insurance contract.

The General Terms of Contract contain the relevant provisions of the Insurance Contracts Act (543/94). The symbol § in brackets refers to the relevant sections of the Insurance Contracts Act in which the matters in question are dealt with. The insurance contract is also subject to certain provisions of the Insurance Contracts Act not appearing from these General Terms of Contract.

1 Concepts (§2 and 6)

The policyholder is the party who has concluded an insurance contract with the insurer.

In terms of travel insurance (luggage, travel liability and legal expenses travel insurance), the **insurer** is Eurooppalainen Insurance Company Ltd. For any other insurance, the insurer is OP Insurance Ltd.

In these terms and conditions, the insurer is referred to as 'the insurance company'. The insurers under the contract are stated in the insurance policy.

The insured is the party for whose benefit a non-life insurance is valid.

The **insurance period** is the agreed period recorded in the policy documents during which the insurance is valid. The insurance contract continues for one agreed insurance period at a time, unless either contracting party gives notice of termination.

Premium period is the period for which a premium is paid at regular intervals as agreed.

An **insurance event** is an event for which compensation is paid under the insurance.

2 Disclosure of information prior to concluding an insurance contract

2.1 Obligation of the policyholder and insured to disclose information (§§22 and 23)

Prior to the insurance being granted, the policyholder and the insured must provide full and correct answers to all questions presented by the insurance company which may affect the assessment of the insurance company's liability. During the validity of the insurance period, the policyholder and the insured person must also correct without undue delay any information provided to the insurance company by them which they have found to be incorrect or insufficient.

If the policyholder or the insured person has acted fraudulently with regard to the abovementioned obligation, the insurance contract is not binding on the insurance company. The insurance company has the right to withhold all premiums paid, even if the insurance is annulled.

2.2 Failure to disclose information (§23 and 34)

If the policyholder or the insured person has wilfully or through negligence which cannot be deemed minor failed in his/her obligation to disclose information under non-life insurance, compensation payable under the insurance can be reduced or disallowed. The effect of the erroneous or deficient information given by the policyholder or the insured person on bringing about the loss or damage will be taken into account when reduction or disallowance is being considered. In addition, the policyholder's and the insured person's intent or the type of negligence and other circumstances will be taken into account.

If, due to incorrect or insufficient information provided by the policyholder or the insured person, the agreed premium is smaller than it would have been had the insurance company been given the correct and full information, the insurance company, when reducing the amount of compensation, takes account of the ratio of the agreed premium to the premium that would have been charged had the information provided been correct and full. If, however, the information provided differs only slightly from the correct and full information, the insurance company is not entitled to reduce the compensation.

3 Beginning of the insurance company's liability and validity of the insurance contract

3.1 Beginning of the insurance company's liability (§11)

If the insurance company has not agreed on any other date individually with the policyholder, the insurance company's liability will commence from the time when the insurance company or the policyholder has submitted or sent an affirmative reply to the offer/bid of the other contracting party.

Payment of the premium for the insurance period is a precondition for commencement of the insurance company's liability

- always in the case of a fixed-period travel insurance
- when the insurance company has set the payment of the premium for the first insurance period as a precondition before continuous travel insurance can enter into force, or
- if there are special reasons, for instance, because of the policyholder's earlier default of payment.

The insurance bill contains a mention to this effect.

3.2 Grounds for granting insurance

The insurance premium and other terms of contract are determined according to the policy anniversary. If another insurance is added to the contract, the premium and other contract terms are determined in accordance with the starting date of the added insurance.

3.3 Validity of insurance contract (§16)

After the first insurance period, the insurance contract is valid for one agreed insurance period at a time, unless the policyholder or the insurance company terminates the contract.

The insurance contract can also be terminated on other grounds, as specified below under sections 4.2 and 13.

A fixed-period insurance contract is valid for the agreed insurance period. The insurance can, however, be terminated during the insurance period on grounds specified below in sections 4.2 and 13.

In fixed-period travel insurance, if the journey back to the insured persons country of residence is delayed for reasons beyond his/her control, the validity period of the insurance will be extended by 48 hours.

4 Insurance premium

4.1 Premium payment (§38)

The insurance premium must be paid within one month of the date on which the bill for the premium was sent by the insurance company to the policyholder.

The premiums of the individual insurance policies included in the same insurance contract are combined into a single premium to be invoiced in one or several instalments as agreed. If a premium arising from a change in the insurance contract is not combined with the earlier agreed instalments, this premium will be invoiced separately. The insurance premium paid for the insurance contract is divided amongst all cover types included in the contract in proportion to the relationship between the payment and the invoice, so that all continuous insurance types are valid until the same date.

If a payment by the policyholder is not sufficient to cover all the insurance company's insurance premium receivables, the policyholder has the right to decide which of the outstanding premiums the money is to be used for. However, the policyholder's payment will primarily apply to the insurance contract in accordance with the reference data based on the paid bill unless the policyholder has specifically ordered otherwise in writing in connection with the payment.

4.2 Delayed premium (§39)

If the policyholder has neglected to pay the premium in part or in full by the due date as referred to under section 4.1, the insurance company has the right to terminate the entire insurance contract 14 days after sending a notice of termination. The policy may also be terminated by one of the insurance companies referred to in clause 1 on behalf of another insurance company.

However, if the policyholder pays the outstanding premium in full before the end of the notice period, the insurance contract will not be terminated at the end of the notice period. The insurance company will state this option in its notice of termination.

If the delay of payment is caused by the policyholders financial difficulties resulting from illness, unemployment or other special reason primarily beyond the policyholder's control, then despite the notice given, the insurance will not expire until 14 days after the obstacle in question has ceased to exist. The contract will, however, expire three months from the end of the notice period, at the latest. The notice of termination will state this option concerning continuation of the insurance for a fixed period. The policyholder must notify the insurance company in writing of the financial difficulties referred hereto during the notice period at the latest.

If the premium is not paid by the due date referred to under section 4.1 above, penalty interest must be paid for the period of delay in accordance with the Interest Payment Act.

The insurance company is entitled to compensation for costs incurred due to collection of insurance premiums under the Act on the Collection of Debts. If the insurance company has to collect an unpaid insurance premium through legal action, it is also entitled to being recompensed for the statutory fees and charges incurred due to legal proceedings.

The insurance company may transfer outstanding amounts for collection by a third party.

4.3 Returning of premium at the termination of a contract (§45)

When determining the amount of returnable premium, the validity is calculated in days according to the insurance period to which the premium pertains.

However, the premium is not returnable in cases stated below in this clause or if the policyholder or the insured has acted fraudulently in the circumstances referred to in clause 2.2 above. The premium is not returned separately if the returnable sum is smaller than the sum in euros specified in the Insurance Contracts Act.

The insurance company charges a non-returnable minimum premium for travel insurance, valuables insurance, animal insurance and treatment expenses insurance covering animals, as specified in the respective policies.

4.4 Setoff against premiums to be returned

Any one of the insurance companies may, on behalf of all of the insurance companies that may be acting as insurers in the Extrasure insurance cover, deduct any outstanding premiums overdue and other outstanding amounts from the premium to be returned.

5 Policyholder's obligation to disclose information about any increase in risk (§26 and 34)

The policyholder shall notify the insurance company of any essential change, during the insurance period, in the circumstances stated at the time of concluding the contract or in the state of affairs recorded in the policy, which has increased the risk of loss or damage, and which the insurer cannot be deemed to have taken into account when concluding the contract. The policyholder must notify the insurance company of any such changes no later than one month of receipt of the annual bulletin following such a change. The insurance company will remind the policyholder of this obligation in the annual bulletin.

Changes resulting in increased risk may include repairs, alterations or extensions of the insured object, its altered use, surrender to the use of others than those insured for a continuous period exceeding three months, or transfer to other than homelike premises.

If the holder of a non-life insurance policy has wilfully or through negligence which cannot be deemed minor failed to notify the insurance company of the increased risk, the insurance company may reduce or disallow compensation payable under the insurance. The effect of the changed, risk-increasing circumstance on the occurrence of the loss or damage is taken into account when considering whether to reduce or disallow the compensation. The policyholder's intent or the type of negligence and any other circumstances will also be taken into account.

If, due to incorrect or insufficient information provided by the policyholder or the insured person, the agreed premium is smaller than it would have been had the insurance company been given the correct and full information, the insurance company, when reducing the amount of compensation, takes account of the ratio of the agreed premium to the premium that would have been charged had the information provided been correct and full. If, however, the information provided differs only slightly from the correct and full information, the insurance company is not entitled to reduce the compensation.

6 Obligation to prevent and limit loss or damage

6.1 Obligation to observe safety regulations (§31 and 34)

The insured person must observe the safety regulations recorded in the policy, in the insurance terms and conditions or otherwise provided in writing. If the insured has wilfully or through negligence which cannot be deemed minor failed to observe the safety regulations, the insurance company may reduce or disallow any compensation payable to them. The effect of the failure to observe the safety regulations on the occurrence of the loss or damage is taken into account when considering whether to reduce or disallow compensation. The insured's intent or the type of negligence and any other circumstances will also be taken into account.

6.2 Obligation to prevent and limit loss or damage (salvage obligation) (§§32, 34 and 61)

In the case of an insurance event or the immediate threat of one, the insured person must, in accordance with his/her abilities, take the necessary action to prevent or limit the loss or damage. If the loss or damage is caused by a third party, the insured must take the necessary action to uphold the insurance company's right vis-à-vis the liable party. The insured person must, for instance, attempt to establish the identity of the tort-feasor. If the loss or damage resulted from a punishable act, the insured person must, without delay, report it to the police and sue the offenders if the insurance company's interest so requires. The insured person must, in other respects, too, observe all instructions given by the insurance company aimed at preventing and mitigating loss or damage.

The insurance company will indemnify for reasonable expenses incurred due to fulfilling the above duty of salvage even if the sum insured would thus be exceeded.

If the insured person has wilfully or through negligence which cannot be deemed minor failed to observe the duty of salvage referred to above, the insurance company may reduce or disallow the compensation payable to them. The effect of the failure to observe the duty of salvage on the occurrence of the loss or damage is taken into account when considering whether to reduce or disallow the compensation. The insured's intent or the type of negligence and any other circumstances will also be taken into account.

6.3 Failure to observe the safety regulations and the duty of salvage in liability insurance (§§31 and 32)

Under liability insurance, negligence on the part of the insured person will not lead to compensation being reduced or disallowed.

However, if the insured person has wilfully or through gross negligence failed to observe the safety regulations or the duty of salvage, or if the insured persons use of alcohol or other intoxicant has contributed to the negligence, compensation may be reduced or disallowed.

If the insured has through gross negligence failed to observe the safety regulations or the duty of salvage or if the insured person's use of alcohol or other intoxicant has contributed to the negligence, the insurance company will nevertheless pay from the liability insurance that part of the compensation which the natural person who has suffered the loss or damage has been unable to collect because of the insured person's state of insolvency as authenticated by distraint or bankruptcy.

7 Causing an insurance event

7.1 Non-life insurance (§§30 and 34)

The insurance company is released from liability to the insured if the insured person has wilfully caused the insurance event.

If the insured has caused an insurance event through gross negligence or if the insured person's use of alcohol or some other intoxicant has contributed to the insurance event, the compensation payable to them may be reduced or disallowed.

The effect of the insured's action on the occurrence of the loss or damage is also taken into account in considering whether the compensation is to be reduced or disallowed in the above-mentioned cases. The insured person's intent or the type of negligence and other circumstances will also be taken into account.

7.2 Causing an insurance event in liability insurance (§30 and 34)

If the insured has caused an insurance event through gross negligence or if their use of alcohol or other intoxicant has contributed to the insurance event, the insurance company will nevertheless pay under the liability insurance that part of the compensation which the natural person who has suffered the loss or damage has been unable to collect because of the insured person's state of insolvency as authenticated in recovery proceedings or bankruptcy.

8 Identification (§33)

The provisions set out above concerning the insured person with regard to causing an insurance event, observing the safety regulations or the duty of salvage also apply to a person:

1) who, with the consent of the insured person, is responsible for a motor-driven or towed vehicle, vessel or aircraft covered by the insurance
2) who, jointly with the insured, owns the insured property and uses it jointly with him/her, or
3) who co-habits with the insured party and uses the insured property jointly with him/her.

The provisions set out above concerning the insured person with regard to observing the safety regulations also apply to a person who, on the basis of his/her employment or service with the policyholder, is responsible for supervising the observance of such safety regulations.

9 Claims settlement procedure

9.1 Duties of claimant (§69 and 72)

The claimant is required to obtain the documentation which he/she is reasonably able to obtain, although taking into account that the insurance company may also acquire such documentation.

The claimants shall acquire and submit to the insurance company said documentation and information at their own cost, unless otherwise agreed.

All crimes must be reported to the local police without delay.

The insurance company is not required to pay compensation before it has received the above documentation.

If the claimant has, after the insurance event, fraudulently provided the insurance company with incorrect or insufficient information relevant to the assessment of the insurance company's liability, their compensation may be reduced or disallowed, depending on what is reasonable in the circumstances.

Insurance companies share a non-life insurance information system which can be used in processing claims to check claims submitted to different companies.

9.2 Limitation on right to obtain compensation (§73)

A claim for compensation must be presented to the insurance company within 12 months of the date when the claimant became aware of the insurance and was informed of the insurance event and the damaging consequences of that event. A claim for compensation must in any case be presented within 10 years of the date when the insurance event occurred or, in the case of insurance taken out against liability for damages, the damaging consequences were caused. Reporting an insurance event is comparable to presenting a claim. If the claim is not presented within the said period, the claimant loses his/her right to obtain compensation.

9.3 Setoff against compensation

Any one of the insurance companies may, on behalf of all of the insurance companies that may be acting as insurers under the Extrasure insurance cover, deduct any outstanding premiums overdue and other outstanding overdue amounts from compensation.

10 Lodging an appeal against a decision taken by the insurance company (§8, 68 and 74)

10.1 Right to correct

If a policyholder or claimant suspects that the insurance company has made a mistake in its claim settlement decision, he/she has the right to obtain more information about matters which have led to the decision. The insurance company will revise the decision if the new investigations give cause to do so.

10.2 Finnish Financial Ombudsman Bureau (FINE) and the Consumer Disputes Board

The Finnish Financial Ombudsman Bureau (www.fine.fi) offers free and independent advice and assistance. The Finnish Financial Ombudsman Bureau and the Finnish Insurance Complaints Board also give settlement recommendations in civil action cases. FINE does not handle a dispute pending in the Consumer Disputes Board or a court of law or processed by the Consumer Disputes Board or a court of law.

A decision made by an insurance company may also be submitted to the Consumer Disputes Board (www.kuluttajariita.fi). Before submitting a matter to the Consumer Disputes Board, consumers should first consult the Local Register Office's Consumer Advice services (www.kuluttajaneuvonta.fi). The Consumer Disputes Board will not process any disputes that are pending or already processed at the Finnish Insurance Complaints Board or a court of law.

10.3 District court

If the policyholder or claimant is dissatisfied with the insurance company's decision, he/she may bring action against the insurance company.

Action against the insurance company's decision must be brought within three years of the policyholder or claimant being informed in writing about the insurance company's decision and the time limit. The right to bring action ceases once the time limit has expired.

Handling of a case by a board will interrupt the limitation period for the right to bring action.

11 Insurance company's right of recovery (§75)

The insured person's right to claim damages from a third party which is held liable transfers to the insurance company up to the amount of compensation paid by the insurance company.

If the loss or damage was caused by a third party as a private person or as an employee, a civil servant or any other person comparable to these as referred to in Chapter 3, Section 1 of the Tort Liability Act, the right of recovery will be transferred to the insurance company only if the person in question caused the insurance event wilfully or through gross negligence or is held liable regardless of the nature of his/her negligence.

12 Altering an insurance contract

12.1 Altering the terms of contract during the insurance period (§18)

The insurance company has the right to alter the insurance premiums or other terms of contract during the insurance period to correspond to the changed circumstances if

1) the policyholder or the insured has neglected his/her obligation to disclose information as referred to in clause 2.1 above; or
2) during the insurance period, a change as referred to in clause 5 above has occurred in the circumstances recorded in the insurance policy or reported by the policyholder or the insured person to the insurance company at the time the contract was concluded.

After being informed of said change, the insurance company will notify the policyholder without undue delay of how and from what date the premium or other terms of contract will be altered. The notification shall state that the policyholder has the right to cancel the insurance.

12.2 Altering the terms of contract of a continuous policy at the end of an insurance period (§19)

Notification procedure

The insurance company has the right to alter the insurance terms and conditions, and premiums and other terms of contract at the end of the insurance period on the basis of

- new or amended legislation or a regulation issued by the authorities
- change in legal practice
- an unforeseeable change in circumstances (e.g. an international crisis, exceptional natural event and catastrophe)
- change in claims expenditure and cost levels
- change in a factor or circumstance which, in the view of the insurance company, as an effect on the amount of premium. Such may include the age or domicile of the policyholder or person insured, the age, location, properties or place of insurance of the object of insurance or part thereof.

The insurance company also has the right to make minor changes to the insurance terms and conditions and other terms of contract provided that the changes do not affect the primary content of the insurance contract.

If the insurance company alters the insurance contract as outlined above, it will, when sending an insurance bill, notify the policyholder of the changes in the insurance premium and other terms of contract. The notification shall state that the policyholder has the right to cancel the insurance.

The change will take effect from the beginning of the next insurance period following one month from the date the notification was sent.

In addition to the above, the insurance company has the right to make changes owing to bonus, customer loyalty and owner-customer matters or other similar reasons. The amount of the insurance premium is also affected by any customer bonuses or discounts, the amounts of which, the grounds of and durations and periods of validity may vary.

Changes requiring termination of insurance

If the insurance company alters the insurance terms and conditions, premiums or other terms of contract in cases other than those listed above or discontinues an actively marketed benefit, the insurance company must give written notice of termination of the insurance as of the end of the insurance period. The notice will be sent one month before the end of the insurance period at the latest.

13 Termination of insurance contract

13.1 Policyholders right to terminate the insurance (§12)

The policyholder has the right, at any time, to terminate the insurance contract during the insurance period. Notice of termination must be given in writing. Notice of termination given in any other manner shall be null and void. If the policyholder has not specified a later termination date for the insurance, the insurance will terminate on the date the notice was submitted or sent to the insurance company.

Notice given to one of the insurance companies is also valid for the other insurers.

13.2 Insurance company's right to terminate insurance during insurance period (§15)

The insurance company has the right to give notice of termination of the insurance during the insurance period if

- the policyholder or the insured person has, before the insurance was granted, provided incorrect or insufficient information and the insurance company, had it known the circumstances, would have refused to grant the insurance
- during the insurance period, a change which has substantially increased the risk of loss or damage has occurred in the circumstances recorded in the insurance policy or reported by the policyholder or the insured person to the insurance company at the time of concluding the contract, and which the insurance company cannot be deemed to have taken into account when concluding the contract
- the insured has wilfully or through gross negligence failed to observe the safety regulations
- the insured has wilfully or through gross negligence caused the insurance event, or
- the insured person has, after the insurance event, fraudulently provided the insurance company with incorrect or insufficient information relevant to the assessment of the insurance company's liability.

13.2.1 Procedure

Having been informed of the grounds for permitting termination, the insurance company will give written notice of termination without undue delay. The notice of termination will contain a mention of the grounds for termination. The insurance contract will end one month from the time the notice was sent.

The insurance company's right to give notice of termination of insurance owing to an outstanding insurance premium is defined in clause 4.2 above.

13.3 The insurance company's right to terminate the insurance at the end of the insurance period (§16)

The insurance company has the right to give notice of termination of an insurance effective as of the end of the insurance period. The notice of termination will contain a mention of the grounds for termination. The notice will be sent one month before the end of the insurance period at the latest.

13.4 Change of owner (§63)

If the insured property is transferred to a new owner other than the policyholder him/herself or his/her estate, the insurance on this property will terminate. If an insurance event takes place within 14 days of the transfer of ownership, the new owner will, however, be entitled to compensation unless he/she has taken out insurance on the property.

14 Applicable law

All insurance contracts are subject to Finnish law.

15 Other matters dealt with in the Insurance Contracts Act

The Insurance Contracts Act also covers the following matters:

Scope of application (§1)
Peremptory nature of provisions (§3)
Insurance company's obligation to disclose information (§4b–7 and 9)
Information on reason for rejection (§6a)
Insurance company's obligations (§7–9, 67–68 and 70)
Insignificance of misrepresentation or increase in underlying risk (§35)
Irresponsibility and emergency (§36)
Payment of a delayed non-life insurance premium (§42)
Limitation on insurer's right to insurance premium (§46)
Overinsurance and underinsurance (§57–58)
Double insurance (§59–60)
Persons covered by property insurance (§62)
Notification that insurance cover ceases or is limited (§64)
Position of insured after occurrence of insurance event (§65)
Priority to compensation (§66)
Injured party's entitlement to compensation under general liability insurance (§67)
Appeal against insurer's decision on claim under general liability insurance (§68)
Payment to wrong person (§71)
Subrogation (§75)

Points to note

General cover restrictions and exclusions

We do not cover any loss or damage caused wilfully or through gross negligence. Moreover, the insurance policies do not cover nuclear accidents or loss or damage indemnified under a specific guarantee, law or other agreement.

Inception and termination of insurance and the minimum payment

Your policy will come into force as soon as we have received your insurance application. If you wish, you may choose a later date of commencement. If the policy cannot be granted, we are not responsible for any damage. The insurance will remain effective for an agreed fixed period or until further notice but you may give notice of termination of the insurance at any time.

Note! During the insurance period, we may charge an insurance-based minimum premium.

If the bill for the premium is not paid by the due date, we can terminate your insurance contract automatically with two weeks' notice. We also charge penalty interest and collection costs.

The insurance can also be terminated if the policyholder or the insured has

- provided incorrect information
- failed to observe the safety regulations
- caused loss or damage wilfully or through gross negligence
- increased the risk of loss or damage, for example by giving property to the use of a third party.

The policy may be changed annually

We have the right to alter the insurance terms and conditions, and premiums and other terms of contract at the end of your insurance period on the basis of

- new or amended legislation or a regulation issued by the authorities
- unforeseen change in circumstances, such as an international crisis
- change in claims expenditure or index
- a change in interest rates concerning life insurance.

Please note that various price factors affect the insurance premium at the moment of purchase and that, on that basis, the payment may also change while the insurance is valid. The price factors affecting the insurance are available in conjunction with the product description.

We may also make minor changes to the insurance terms and conditions and other terms of contract provided that the changes do not affect the primary content of the insurance contract.

The insurance company has the right to make price changes as a result of bonus, customer loyalty and owner-customer matters or other similar reasons. The premium amount is affected, at the time the policy is taken out and also later during its validity, by any customer benefits and discounts, the amounts of which and the grounds for granting them, and duration and validity periods may change, for example, when a fixed-period discount or campaign discount comes to an end.

Insurance sales commissions

The insurance company will pay a commission that is either a percentage of the insurance premiums or a fixed fee based on the number of policies sold. The commission and its amount is affected by the insurance product and sales channel. The commission is paid to the agent or insurance company employee.

Filing a claim

A claim for compensation must be made within 12 months from the date when you became aware of the insurance and received information about the loss or damage and its consequences and, at the latest, within 10 years of the occurrence of the loss or damage or, in the case of insurance taken out against bodily injury or liability for damages, the damaging consequences were caused.

Advice concerning compensation and insurance policies

We advice you on insurance policies and claims at +358 (0)10 253 1333.

Insurance and financial advice is provided by

- The Finnish Financial Ombudsman Bureau (FINE), tel. +358 (0)9 685 0120, www.fine.fi/en

You can file a complaint or an appeal related to insurance and claims decisions

- Customer ombudsman asiakasasiamies@op.fi
- The Finnish Financial Ombudsman Bureau and the Finnish Insurance Complaints Board (FINE), tel. +358 (0)9 685 0120, www.fine.fi/en
- Consumer Disputes Board, tel. +358 (0)10 366 5200, www.kuluttajariita.fi/en First contact: www.kuluttajaneuvonta.fi.
- Traffic Accident Board, tel. +358 (0)10 286 8200, www.liikennevahinkolautakunta.fi

You may also submit the case to court within three years of our decision.

Your information will be treated confidentially

We will handle your personal data according to the law, Privacy Statement and Privacy Policy and also make use of automatic decision-making in insurance and claim settlement decisions.

When you buy an insurance policy, any automatic decision to grant the policy will be based on the information you have submitted, our customer register and the credit information register, in accordance with our customer selection guidelines. Should a loss occur, any automatic decision by us will be based on the loss details you have provided, on the insurance terms and conditions and our customer register, as well as information in the joint claims register kept by insurance companies. The insurance policy is also terminated automatically in the event of the non-payment of premiums.

Read more about privacy protection at www.uusi.op.fi/dataprotection.

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Domicile: Helsinki. Main line of business: insurance operations

Pooling our resources.

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