«APPROVED»
By Order of the General Director
CJSC IC «Amanat» No. 08-OD
dated June 02, 2025

Umaraliev U.A.

Public Offer
for the Conclusion of a Motor Vehicle Insurance Agreement

Bishkek city

dated "02" June 2025

GENERAL INFORMATION ON THE PUBLIC OFFER (HEREINAFTER REFERRED TO AS THE "OFFER")	
Person Making the Offer (Insurer):	Closed Joint-Stock Company «Insurance Company «Amanat» (hereinafter – CJSC IC «Amanat») TIN 02102202510322; OKPO 33679797; STS: 002 for the Leninsky District of Bishkek. Legal address: 1/10, Apt. 38, Sadyrbaeva Street, Bishkek, Kyrgyz Republic. Actual address: 2nd floor, 119 Koenkozova Street, Bishkek, Kyrgyz Republic. Tel.: +996 (507) 80-77-87; +996 (704) 99-32-32 Web: skamanat.kg, e-mail: office@skamanat.kg License No. 05 (series) dated 14 April 2025, issued by the Financial Market Regulation and Supervision Service under the Ministry of Economy and Commerce of the Kyrgyz Republic.
Persons to whom the Offer is addressed (Policyholders):	
Subject Matter and Acceptance of the Offer:	The subject of this Offer is the acceptance (by way of accession) of the proposal to conclude a motor vehicle insurance agreement (Policy) by joining the terms disclosed in this Offer. Acceptance of this Offer implies full consent to the collection, processing, and storage of personal information provided by the Policyholders (Appendix No. 1). In turn, CJSC IC "Amanat" undertakes to ensure the protection of the data provided by Policyholders against access by third parties. This Offer has been drawn up in accordance with the legislation of the Kyrgyz Republic and approved by Order of the General Director No. 08-OD dated 02 June 2025.
Issuance of the Insurance Policy	The insurance policy must mandatorily contain information about the Policyholder and/or the Insured Person and/or the Beneficiary, the insurance period, the amount of the sum insured, the amount of the insurance premium payable, as well as a reference to this Offer. The Policyholder shall receive the original insurance policy in paper and/or electronic form from the Insurer or its authorized representatives from the moment of issuance. This Offer is distributed by the Insurer's employees and authorized representatives in paper and/or electronic form and is also published on the Insurer's official website at: www.skamanat.kg. In any case, the terms of this Offer may be reviewed at the Insurer's office located at: 119 Koenkozova Street, Bishkek, Kyrgyz Republic. This Offer does not restrict the Policyholder's right to conclude similar or other insurance agreements.
Amendment of the Offer Terms	CJSC IC "Amanat" shall have the right to unilaterally amend the provisions of this Offer by publishing a new version on its official website. At the same time, the terms of all insurance agreements concluded prior to the publication of the new version shall remain unchanged and shall correspond to the version effective at the time such insurance agreements were concluded, except in cases provided for by the legislation of the Kyrgyz Republic.
Term of Validity of the Offer	This Offer is not limited in time and shall terminate upon its withdrawal by the Insurer with disclosure of relevant information on the official Internet resource. In the event of withdrawal of this Offer, the Insurer's obligations under all issued insurance policies shall remain valid until their expiration, unless otherwise provided for by the legislation of the Kyrgyz Republic.
Key Definitions Used in this Offer	a) **Policyholder** – a legally capable individual or a legal entity that has concluded an insurance agreement with an insurance organization under the terms of this Offer. b) **Insurer** – CJSC IC "Amanat", carrying out insurance activities in accordance with the legislation of the Kyrgyz Republic on the basis of a License issued by the Financial Market Regulation and Supervision Service under the Ministry of Economy and Commerce of the Kyrgyz Republic. c) **Object of Insurance** – property interests that do not contradict the legislation of the Kyrgyz Republic and may be insured or are subject to insurance. d) **Beneficiary** – a person in whose favor the insurance agreement is concluded and who has the right to receive the insurance sum or other indemnity, even if such person is not the Policyholder or the Insured Person. e) **Insured Event** – an actually occurred event provided for under the terms of this Offer and the insurance policy that takes place during the period of insurance coverage, upon the occurrence of which the Insurer's obligation to make an insurance indemnity payment to the Policyholder/Beneficiary arises. f) **Insurance Period** – the period specified in the insurance policy during which the Insurer provides insurance coverage. Insurance under this Offer applies only to events occurring within the specified period. g) **Insurance Payment (Indemnity)** – a monetary amount paid by the Insurer to the Policyholder/Beneficiary within the limits of the sum insured upon the occurrence of an insured event provided for under this Offer.

INSURANCE TERMS UNDER WHICH THE INSURANCE AGREEMENT (INSURANCE POLICY) IS CONCLUDED	
1. General Provisions	1.1 These insurance terms have been drafted in accordance with the legislation of the Kyrgyz Republic and the "Motor Vehicle, Civil Liability and Passenger Seat Insurance Rules", approved by Order of the General Director of CJSC IC "Amanat" No. 03-OD dated 05 March 2025 (hereinafter – the Rules). 1.2 The terms disclosed in the Rules constitute an integral part of this Offer and supplement its provisions. In the event of any inconsistencies between the terms of this Offer and the Insurance Rules, the provisions set forth in this Offer shall prevail. The text of the Rules is published on the Insurer's official website and is also available in paper form at the Insurer's office specified in this Offer. 1.3 The Insurer undertakes to make an insurance indemnity payment, and the Policyholder undertakes to pay the insurance premium in accordance with the terms defined in this Offer and the Rules. 1.4 The insurance agreement constitutes an indivisible combination of the terms of this Offer and the terms of the Insurance Rules. 1.5 The insurance agreement shall be concluded by issuing a paper insurance policy and/or by sending an electronic insurance policy to the Policyholder in the form of a PDF document containing a reference to this Public Offer of the Insurer, issued on the basis of information provided by the Policyholder. The insurance policy confirms successful acceptance of and accession to the terms of this Offer. 1.6 The terms "Offer", "Insurance Agreement", and "Insurance Policy" as used herein shall have the same meaning in relation to this document.
1. Procedure for Conclusion and Entry into Force of the Insurance Policy	1.1. This Insurance Offer shall be deemed an electronic document establishing the terms for the sale and provision of insurance services by the Insurer to the Policyholder. 1.2. The insurance policy shall be generated on the basis of data provided by the Policyholder to the Insurer using information systems or by completing the required information in paper form. 1.3. The Policyholder shall complete the mandatory fields of the application independently and in strict accordance with the data contained in the original documents specified in the application. The Policyholder assumes responsibility for the accuracy of the information provided and its conformity with the original documents and agrees that, in the event of discrepancies between the declared documents and their originals, the Insurer shall have the right to refuse payment of insurance indemnity upon the occurrence of an insured event. 1.4. The details of the documents specified and entered in the application shall be automatically incorporated into the insurance policy. 1.5. Upon agreement with the insurance terms proposed in the Offer, the Policyholder confirms such consent and proceeds to complete the Application for Conclusion of the Insurance Agreement (hereinafter – the "Application"). 1.6. When completing the Application, all information required by the Insurer that is essential for determining the probability of occurrence of an insured event and the amount of potential losses arising therefrom (insurance risk) must be provided. All information shall be indicated strictly in accordance with the original documents. 1.7. The date of acceptance of this Offer and conclusion of the insurance policy shall be the date of confirmation of payment of the insurance premium by the Policyholder. 1.8. The Insurer's obligations (commencement of insurance coverage) shall take effect from the moment of payment of the insurance premium and shall remain in force for the paid insurance period.
2. Procedure for Payment of Insurance Policies	2.1. Payment of the insurance policy shall be made using information systems (online banking) utilized by the Insurer, or in cash at the cash desks of the Insurer's partner banks, or via payment terminals using the Insurer's details specified in this Offer. 2.2. Upon receipt of confirmation of payment for the insurance policy, the Insurer's information system shall automatically issue the insurance policy in electronic form, send it to the Policyholder's email address, or print it in paper form. 2.3. The Insurer shall not be liable for the actions/omissions of the Payment Provider, nor for any losses and risks of the Policyholder associated with payment via electronic payment systems and the Internet. 2.4. The person to whom this Offer is addressed hereby expresses consent to the terms of this Offer in accordance with Article 396 of the Civil Code of the Kyrgyz Republic.
3. Object of Insurance, Insurance Risk, and Insured Event	3.1. The object of insurance under the insurance agreement shall be the property interests of the Policyholder related to the possession, use, and disposal of the vehicle, including additional equipment installed on the vehicle (subject matter of insurance). An insurance risk shall mean an anticipated event against the occurrence of which the insurance policy is concluded. The insurance policy may be concluded against the aggregate of the insurance risks listed below or any combination thereof. 3.2. The Insurer shall provide insurance coverage for the insured vehicle against the following risks: 3.2.1. **"Road Traffic Accident (RTA)"** – an event occurring during the movement of the insured vehicle on the road and involving its participation (collision, overturning, impact, etc.), including damage caused by another mechanically propelled vehicle while parked; 3.2.2. **"Collision with another vehicle or obstacle"** (pothole, manhole cover, and other obstacles caused by unsatisfactory road surface conditions); 3.2.3. **"Fire"** – uncontrolled combustion or explosion resulting from external impact or spontaneous ignition;

	3.2.4. **"Damage caused by a rebounding or falling object"** – external impact on the vehicle by a foreign object (including gravel thrown from under the wheels of transport, stones, and other solid particles), excluding damage to paintwork without damage to the underlying part; 3.2.5. **"Natural Disaster"** – external impact on the vehicle caused by a natural phenomenon officially recognized as a natural disaster by specially authorized competent state authorities of the territory where it occurred; 3.2.6. **"Malicious Act"** – commission or attempted commission of unlawful acts by third parties in respect of the vehicle; 3.2.7. **"Theft (Hijacking)"** – loss of the vehicle as a result of theft or unlawful taking without intent to steal (unauthorized use).
5. Terms of Insurance Indemnity Payment	5.1. The amount of insurance indemnity shall be determined by the Insurer after verification of the data specified in the documents for compliance of the repair works performed with the insured event, as well as with the repair technology prescribed by the manufacturer and the cost of spare parts. Disputes arising between the repair organization and the Policyholder shall be settled independently by the Policyholder. 5.2. The amount subject to indemnification shall be calculated taking into account: 1. The amount of damage caused by the insured event; 2. The Insurer's indemnity limit; 3. "Full" or "partial" insurance; 4. The system of damage compensation; 5. Deductible (franchise); 6. Depreciation wear of the vehicle; 7. Residual value of the vehicle and additional equipment. 5.3. Payment of indemnity under the conditions of "total loss" or for a stolen (hijacked) vehicle shall be made taking into account the vehicle's depreciation. Unless otherwise provided by the insurance agreement, the following annual depreciation rates shall apply to the insured vehicle as a percentage of the insured sum of the vehicle: 1. For the first year of operation – 20%; 2. For the second year of operation and each subsequent year – 10%. Depreciation shall be calculated from the date of conclusion of the insurance policy (insurance agreement) until the date of occurrence of the insured event (pro rata for each day of validity of the insurance agreement). 5.4. In case of indemnification in monetary form, payment shall be made in Kyrgyz soms or foreign currency in accordance with the legislation of the Kyrgyz Republic. The amount payable shall be determined at the exchange rate of the National Bank of the Kyrgyz Republic effective on the date of issuance of the payment order and cash voucher. The amount of insurance indemnity paid shall be accounted for in the currency of the insured sum at the exchange rate of the National Bank of the Kyrgyz Republic on the date of issuance of the payment order or cash voucher. 5.5. In cases where the damage caused as a result of an insured event has been compensated to the Policyholder by third parties, the Insurer shall indemnify only the difference between the amount payable under the insurance agreement and the amount received by the Policyholder from the third party. The Policyholder shall refund the insurance indemnity received if full compensation for the damage is obtained from the liable person. 5.6. The insurance agreement may provide for replacement of the insurance indemnity with compensation in kind within the limits of the insured amount, including by means of restorative repair of the damaged vehicle based on a direction (repair estimate) issued by the Insurer to repair organizations with which the Insurer has concluded relevant agreements. Payment for repair shall be made directly to the account of the repair organization that performed the vehicle repair. In this case, if the insurance agreement provides for a deductible, the Policyholder shall pay the Insurer an amount equivalent to the deductible prior to commencement of the repair.
6. Insurance Period and Territory	6.1. The territory of insurance shall be the territory specified in the insurance agreement (country, region, route, etc.), within which the occurrence of an insured event during the term of the insurance agreement entails the Insurer's obligation to make an insurance indemnity payment. 6.2. Insurance coverage shall commence from the moment of payment of the insurance premium and shall remain in effect until the expiration of the period specified in the insurance policy.
7. Early Termination of the Insurance Policy at the Initiative of the Policyholder. Refund of Insurance Premium	7.1. The insurance agreement shall terminate prior to the expiration of the period for which it was concluded if, after its entry into force, the possibility of the insured event occurring has ceased and the insurance risk has terminated due to circumstances other than an insured event. 7.2. The Policyholder shall have the right to withdraw from the performance of the insurance agreement at any time, provided that at the time of withdrawal the possibility of the insured event occurring has not ceased due to the circumstances specified in clause 7.1 of this Offer. In such case, the insurance premium paid to the Insurer shall not be refundable. 7.3. Early termination of the insurance policy at the initiative of the Policyholder shall be carried out by sending a written notice of termination to the Insurer, followed by the signing by the parties of a Termination Agreement to the insurance contract. 7.4. The Insurer shall have the right to terminate the insurance agreement early in cases provided for by applicable legislation and the insurance agreement.

	7.4.1. In the event of the Policyholder's refusal to allow the Insurer to inspect the insured property, the Insurer shall have the right to unilaterally terminate the insurance agreement, and the insurance premium paid shall not be refunded. 7.5. The Insurer's liability under the insurance agreement shall terminate upon expiration of the term specified in the insurance agreement. If the agreement is terminated unilaterally by either party, liability shall cease from the date the other party receives written notice of termination (at the address specified in the insurance agreement), or from another later date specified in such notice (unless otherwise provided by the insurance agreement and these Rules).
8. Special Conditions	8.1. Upon the occurrence of an insured event, the Policyholder (Insured Person) shall, within 3 (three) business days, notify the Bank and the Insurer by telephone, facsimile notification, or electronic message (email). 8.2. If the Insurer has made an insurance indemnity payment during the term of the insurance agreement, no refund of the insurance premium (or part thereof) shall be made in the event of early termination of the agreement. 8.3. In the event of early termination of the insurance contract, the insurance premium shall be refunded less the Insurer's earned premium and the Insurer's business acquisition costs (operating expenses), calculated as a percentage of the paid insurance premium as specified in the Insurance Policy.
9. Other Conditions	9.1. The Policyholder and the Insurer shall have the right, by mutual agreement, to introduce amendments and supplements, as well as to expand the insurance terms, which shall apply exclusively to the specific insurance agreement concerned. 9.2. Acceptance of this Offer implies consent to the dissemination by the Insurer of anonymized data on occurred insured events among persons who have concluded an insurance agreement under the terms of this Offer, as well as consent to receive such information from the Insurer. 9.3. Disputes arising between the Policyholder and the Insurer under the insurance agreement shall be resolved through negotiations. If no agreement is reached, disputes shall be settled in court in accordance with the applicable legislation of the Kyrgyz Republic. 9.4. In all matters not regulated by this Offer and the Rules, the Parties shall be governed by the applicable legislation of the Kyrgyz Republic.
B In the event of claims, you have the right to apply to the authorized body exercising regulation and supervision over the activities of insurance organizations: the Financial Market Regulation and Supervision Service under the Ministry of Economy and Commerce of the Kyrgyz Republic, Bishkek, 114 Chuy Avenue. Telephone: +996 (312) 62 44 60, 62 44 70	

Contact details of the Claims Settlement Department of CJSC IC "Amanat":

+996 (507) 80 77 87; +996 (704) 99 32 32

Appendix No. 1
to the Public Offer for the Conclusion of a Motor Vehicle Insurance Agreement

APPLICATION FOR MOTOR VEHICLE INSURANCE

POLICYHOLDER:
1. Surname, First Name, Patronymic / Name of Organization_____
_____
2. Address: _____
3. Telephone number (business): _____ (home)_____
Fax:_____ ZIP code: _____
4. Have you previously insured this vehicle with other insurance companies?
(If yes, for what reason was the insurance agreement terminated?)?
5. Is this vehicle currently insured with other insurance companies? _____

INSURANCE PERIOD:
From "" _____ ***202 to "" _____ 202***

TYPES OF INSURANCE:
1. Comprehensive Motor Insurance (Auto Casco)
2. Deductible
3. Additional Equipment

INSURANCE TERRITORY

INFORMATION ABOUT PERSONS AUTHORIZED TO DRIVE THE VEHICLE:
1. _____
2. _____
3. _____
4. _____

Note:
In any case, please indicate the details of all persons who, in your opinion, may drive the vehicle, especially those under 21 years of age, even if such use will be infrequent.

INFORMATION ABOUT THE VEHICLE:
Please answer the following questions and indicate the technical details of your vehicle.

Make / Model:	Engine No.: Chassis No.:	Registration No.:	Year of Manufacture:	Vehicle Value:	Sum Insured:

Does your vehicle remain overnight in a secure place
(parking facility or garage)? **YES NO**

Before signing the Application, please carefully verify the answers provided to the questions herein, particularly if the Application was completed by someone other than yourself. Indicate all amendments.

DECLARATION
I declare that, to the best of my honest and reasonable belief, the information provided herein is accurate. To the best of my knowledge, all answers to the questions in this Application are correct, and the attached information is current and material.
I agree that if any answers were provided by another person, such person acts on my behalf and shall be deemed my authorized representative, but not a representative of the Insurer.
I confirm that this Application is submitted on the terms of the Insurer's standard insurance policy and shall be deemed an integral part of the insurance agreement.
Signature of Applicant _____
Date: "____" _____ 202___
- This Application constitutes an integral part of the Insurance Policy.
- This insurance shall not take effect until the Insurer confirms acceptance of the Application and issues the insurance policy.

MOTOR VEHICLE, CIVIL LIABILITY AND PASSENGER SEAT INSURANCE RULES

Bishkek city, 2025

I. GENERAL PROVISIONS

1.1. Closed Joint-Stock Company Insurance Company "Amanat", in accordance with these Rules, provides insurance for:
- motor vehicles (vehicles) - passenger cars, trucks and special-purpose vehicles, buses, trailers, semi-trailers, motorcycles, motorized bicycles, mopeds, and scooters. By agreement of the parties, insurance of additional equipment may be included in the Comprehensive Motor Insurance (Auto Casco) contract;
- civil liability of vehicle owners for damage caused to the life, health, and property of third parties in the course of vehicle operation;
- passenger seats in a vehicle against accidents;
- repair costs of vehicles resulting from breakdowns within the framework of the Auto Center's warranty policy.

By agreement of the parties, accident insurance may include additional coverage for temporary or permanent disability and for medical expenses resulting from an accident.

1.2. Both Kyrgyz and foreign legal entities and individuals who are lawful owners or lessees/users of the insured object may act as Policyholders under the insurance agreement.

The Insurer under the insurance agreement is CJSC IC "Amanat" (hereinafter - the "Insurer"). Insurance contracts on behalf of the Insurer may be concluded by its branches, representative offices, as well as authorized insurance agents (legal entities and individuals) on the basis of relevant agreements or powers of attorney.

1.3. The insurance agreement shall be valid within the territory of the countries specified in the insurance document.

1.4. The insurance agreement shall be concluded for a period of up to one year, and the term shall be specified in the insurance document. The Insurer shall bear no liability upon expiration of the insurance period if the insurance agreement has not been duly renewed.

1.5. Upon conclusion of an insurance agreement under these Rules, the latter shall become an integral part of the insurance agreement and binding upon both the Insurer and the Policyholder (Beneficiary).

1.6. These Rules may be amended (excluded or supplemented) only by written agreement of the parties at the time of conclusion of the insurance agreement or during its validity period prior to the occurrence of an insured event, provided that such amendments do not contradict the legislation of the Kyrgyz Republic.

1.7. The following terms are used in these Rules:

1.7.1. **Beneficiary** - a person in whose favor the insurance agreement is concluded;

1.7.2. **Insurance Agreement** - an agreement between the Policyholder and the Insurer whereby the Insurer undertakes, for the fee stipulated in the agreement (insurance premium), to pay insurance indemnity upon the occurrence of an insured event. The insurance agreement may be concluded in the form of a document signed by both parties or by delivery by the Insurer to the Policyholder, based on a written or oral application, of an insurance policy signed by the Insurer;

1.7.3. **Double Insurance** - insurance of the same object of insurance with two or more insurers;

1.7.4. **Co-insurance** - insurance of one object under one agreement jointly by several insurers;

1.7.5. **Policyholder** - an individual or legal entity that has concluded an insurance agreement with an insurance organization (Insurer);

1.7.6. **Insurer** - a legal entity (insurance organization) that is a commercial organization and holds a special authorization (license) to carry out insurance of the relevant type;

1.7.7. **Sum Insured** - the amount within which the Insurer undertakes to pay insurance indemnity under a property insurance agreement or which it undertakes to pay under a personal insurance agreement;

1.7.8. **Insurance Premium** - the payment stipulated by the agreement which the Policyholder is obliged to pay to the Insurer in the manner and within the time limits established by the insurance agreement;

1.7.9. **Insurance Tariffs** - the rates applied in determining the amount of the insurance premium payable under the insurance agreement;

1.7.10. **Insurance Indemnity** - the amount paid by the Insurer under the insurance agreement to cover damage upon the occurrence of an insured event;

1.7.11. **Insured Event** - an occurred event provided for by the insurance agreement or by law, upon the occurrence of which the Insurer is obligated to make an insurance payment to the Policyholder, the Insured Person, or the Beneficiary;

1.7.12. **Insurance Risk** - an anticipated event against the occurrence of which insurance is effected;

1.7.13. **Insured Value** - the actual value of the insured property specified in the insurance agreement concluded between the Policyholder and the Insurer;

1.7.14. **Insurance Contributions** - the insurance premium periodically paid by the Policyholder to the Insurer in accordance with the terms of the insurance agreement;

1.7.15. **Term of the Insurance Agreement** - the period during which the provisions of the insurance agreement are binding upon the parties. Obligations arising prior to expiration shall remain in effect until fully performed;

1.7.16. **Competent Authorities** - state and/or other authorities authorized under the regulatory legal acts of the Kyrgyz Republic and/or other states where the insured event occurred to issue documents confirming the event and the amount of damage bearing the characteristics of an insured event;

1.7.17. **Liability Limit** - the maximum amount of insurance indemnity payable by the Insurer per insured event and for all insured events during the term of the agreement;

1.7.18. **Object of Insurance** - property interests that do not contradict the legislation of the Kyrgyz Republic and may be insured or are subject to insurance.

- objects of personal insurance may include property interests related to harm to life, health, or provision of medical services;
- objects of property insurance may include property interests related to:

1. possession, use, and disposal of movable property (motor vehicle insurance);

2. obligation to compensate harm caused to third parties (civil liability insurance).

1.7.19. **Insurance Coverage Period** – the period during which insurance protection is in effect;

1.7.20. **Reinsurance** – insurance of all or part of the risk of insurance indemnity payment with another insurer under a reinsurance agreement. In this case, the insurer under the primary insurance agreement who has concluded the reinsurance agreement acts as the reinsurer in the reinsurance contract;

1.7.21. **Territory of Insurance** – the territory specified in the insurance agreement (country, region, route, etc.) within which the occurrence of an insured event during the validity of the agreement entails the Insurer's obligation to make an insurance payment;

1.7.22. **Third Parties** – any individuals and legal entities, except for the Policyholder and its employees and the Beneficiary;

1.7.23. **Deductible** – the portion of losses borne by the Policyholder and not subject to indemnification by the Insurer under the insurance agreement. The deductible may be conditional (non-deductible) or unconditional (deductible).

Conditional deductible – the amount of damage not indemnified by the Insurer if the damage does not exceed the deductible. If the damage exceeds the conditional deductible, it shall be indemnified without deduction.

Unconditional deductible – the amount of damage not indemnified by the Insurer. If the damage exceeds the unconditional deductible, it shall be indemnified minus the deductible amount.

1.7.24. **Compulsory Insurance** – a form of insurance in which insurance relations arise by virtue of law;

1.7.25. **Voluntary Insurance** – insurance based on the voluntary consent of the Policyholder and the Insurer to conclude an insurance agreement.

The terms and definitions used in these Rules are, in certain cases, specifically explained by relevant definitions. If the meaning of any term is not defined in the Rules and cannot be determined based on legislation and regulatory acts, such term shall be interpreted in its ordinary lexical meaning.

II. MOTOR VEHICLE INSURANCE (AUTO CASCO)

Subjects of Insurance

2.1. A vehicle may be insured by the Insurer under an insurance agreement in favor of a person (the Policyholder or a person designated by the Policyholder – the Beneficiary) who has a legally recognized interest, based on law, another legal act, or contract, in the preservation of such property. The Beneficiary shall be specified in the insurance agreement (Policy).

2.2. The Policyholder shall have the right, during the term of the agreement, to replace the Beneficiary named in the insurance agreement with another person. The Policyholder shall notify the Insurer in writing of such replacement.

The Beneficiary may not be replaced after the occurrence of an insured event or after the Beneficiary has performed any obligation under the insurance agreement or submitted a claim for insurance indemnity to the Insurer.

2.3. **Driver** – an individual lawfully authorized to operate the vehicle specified in the insurance agreement. The Policyholder shall familiarize the Driver with the terms and conditions of the concluded insurance agreement. While operating the vehicle, the Driver shall perform the obligations of the Policyholder as set forth in these Rules.

Failure by the Driver to fulfill the Policyholder's obligations shall entail the same consequences as failure by the Policyholder.

2.4. A Policyholder who is an individual shall have the right to authorize no more than three Drivers to operate the vehicle, who must be declared at the time of conclusion of the agreement or in advance (prior to the occurrence of an insured event) during its validity period. Drivers shall be specified in the insurance agreement (Policy).

A Policyholder that is a legal entity shall have the right to authorize any number of Drivers to operate the vehicle.

Insurance Agreement

2.5. For the purposes of these Rules, an Insurance Agreement shall mean an agreement between the Policyholder and the Insurer under which the Insurer undertakes, for the fee stipulated in the agreement (insurance premium), to pay insurance indemnity upon the occurrence of an insured event.

The Insurance Agreement may be concluded in the form of a document signed by both parties or by delivery by the Insurer to the Policyholder, based on the latter's written or oral application, of an insurance policy signed by the Insurer.

For the purposes of these Rules, **actual damage** shall mean the expenses incurred or to be incurred by a person whose right has been violated in order to restore the violated right in connection with the loss or damage of property.

Insurance indemnity may be paid to another person in whose favor the Insurance Agreement has been concluded – the Beneficiary.

2.6. The Insurance Agreement may be concluded in the form of a single document signed by both parties (Insurance Agreement) or in the form of an insurance Policy issued to the Policyholder based on a written application and accompanied by these Rules, which constitute an integral part of the Insurance Agreement.

The Insurance Agreement (Policy) shall specify:

1. the persons and objects to which the Insurance Agreement applies;
2. the sum insured and insured value[1], the Insurer's indemnity limit, "full" or "partial" insurance, insured risks, and the procedure for consideration of a claim, i.e., the Policyholder's request for insurance indemnity (hereinafter – the "claim");
3. the term and territory of validity of the Agreement;
4. the sections and clauses of these Rules within which the specific Agreement operates, and the existence of special conditions.

[1] *If the insured sum is equal to the insured value of the vehicle, only the insured sum shall be specified in the insurance policy*

2.7. An Insurance Agreement with the same Policyholder may be concluded in respect of several vehicles owned by such Policyholder (fleet insurance). In confirmation thereof, the Policyholder may be issued a single Insurance Agreement – a Fleet Policy.

Object of Insurance

2.8. In accordance with these Rules, the object of insurance under the Insurance Agreement shall be the Policyholder's property interests related to the possession, use, and disposal of the vehicle, including additional equipment installed on the vehicle.

2.9. For the purposes of these Rules, vehicles shall include:

1. automobiles – passenger cars, trucks, and cargo-passenger vehicles;
2. buses and other passenger vehicles;
3. trailers and semi-trailers;
4. motorcycles, scooters, and motorized tricycles;
5. other self-propelled vehicles, including agricultural and towed vehicles, by agreement of the parties.

2.10. The following vehicles shall not be eligible for insurance:

– vehicles imported into the territory of the Kyrgyz Republic in violation of applicable customs regulations and rules;

– vehicles listed in the information databases of state authorities of the Kyrgyz Republic or Interpol as previously stolen.

If such circumstances become known to the Insurer, the Insurer shall have the right to terminate the Insurance Agreement and demand reimbursement of funds received by the Policyholder under the Insurance Agreement in violation of the conditions set forth in this clause.

A vehicle having damage and/or corrosion shall be accepted for insurance only on the condition that such damage and/or corrosion is remedied by the Policyholder at their own expense (in particular, any damage to glass or plastic parts and components shall require their replacement) and the vehicle is presented for re-inspection.

Otherwise, claims regarding any damage to such parts or components shall not be accepted for consideration, and in the event of indemnity payment for total loss, theft, or hijacking, the cost of eliminating such damage and/or corrosion shall be deducted from the indemnity amount based on the Insurer's calculation.

2.11. The following types of additional equipment (hereinafter – "AE") installed on the vehicle being insured shall be accepted for insurance:

1. audio and video equipment[2];
2. equipment and accessories not included in the vehicle's factory configuration or recognized as additional equipment by agreement of the parties based on inspection of the vehicle and AE.

AE shall not be insured separately from the vehicle on which it is installed.

Insurance Risk

2.12. An insurance risk shall mean an anticipated event against the occurrence of which insurance is effected. The Insurance Agreement may be concluded against the aggregate of the insurance risks listed below or any combination thereof.

2.13. The Insurer shall provide insurance coverage for the insured vehicle against the following risks:

1. **"Road Traffic Accident (RTA)"** – an event arising during the movement of the insured vehicle on the road and involving its participation (collision, overturning, impact, etc.), including damage caused by another mechanically propelled vehicle while parked;
2. **"Fire"** – uncontrolled combustion or explosion resulting from external impact or spontaneous ignition;
3. **"Damage caused by a rebounding or falling object"** – external impact on the vehicle by a foreign object (including gravel thrown from under the wheels of transport, stones, and other solid particles), excluding damage to paintwork without damage to the underlying part;
4. **"Natural Disaster"** – external impact on the vehicle caused by a natural phenomenon officially recognized as a natural disaster by specially authorized competent authorities of the state where it occurred;
5. **"Malicious Act"** – commission or attempted commission of unlawful acts by third parties in respect of the vehicle;
6. **"Theft (Hijacking)"** – loss of the vehicle as a result of theft or unlawful taking without intent to steal;
7. **"Damage"** – the aggregate of risks listed in paragraphs 1–5 of this clause;
8. **"Auto Casco"** – the aggregate of risks listed in paragraphs 1–6 of this clause.

2.13.1. By agreement of the parties, the Insurance Agreement may provide for "Partial Casco" insurance. Under "Partial Casco" insurance, coverage shall be provided only in the event of vehicle fire, consequences of natural disasters, breakage of glass components (including headlight and taillight glass), and malicious acts (excluding theft/hijacking).

2.14. By agreement between the Policyholder and the Insurer, AE may be insured only against the same risks from among those listed above as the vehicle on which it is installed.

Insured Event

2.15. An **insured event** shall mean an occurred event from among those specified above (Clause 2.13) and provided for in the Insurance Agreement, which has resulted in damage to or loss (total destruction) of the vehicle and/or additional equipment installed thereon, and which entails the Insurer's obligation to pay insurance indemnity.

The following events shall not constitute insured events:

1. damage to the vehicle interior upholstery caused by smoking or careless handling of fire in the insured vehicle;

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[2] *Audio and video playback equipment, whether removable or permanently installed, shall be classified as additional equipment unless otherwise specified in the insurance agreement*

2. theft, damage, or loss of vehicle accessories not requiring installation (tool kits, first-aid kits, fire extinguishers, warning triangles, portable monitors, child seats, stationary anti-theft devices, and other similar items, unless installed by the manufacturer or insured as additional equipment);
3. theft, loss, or damage of:
   • keys, key fobs, chips, electronic activation cards, alarm remote controls, anti-theft system keys installed on the insured vehicle, including expenses for their repair or restoration (including reprogramming of immobilizers, lock cylinder replacement, etc.);
   • vehicle registration plates;
4. tire damage not associated with damage to other vehicle components;
5. breakdown, malfunction, or failure of vehicle parts, components, or assemblies resulting from normal operation (except for road traffic accidents), including due to ingress of foreign objects or substances into assemblies (hydrolock, etc.);
6. failure to return the insured vehicle transferred by the Policyholder for rental, lease, or leasing;
7. damage to the insured vehicle occurring during loading and unloading operations;
8. costs of tinting glass and lighting devices not included in the manufacturer's original configuration.

Sum Insured and Insured Value

2.16. The **sum insured** shall mean the monetary amount specified in the Insurance Agreement within which the Insurer undertakes, upon the occurrence of an insured event (insured events), to pay insurance indemnity in accordance with the Agreement.

2.17. The sum insured may not exceed the insured value of the vehicle (actual value of the property, i.e., its value at its location on the date of conclusion of the Insurance Agreement).

The insured value of the vehicle and additional equipment shall be determined by the Insurer taking into account their original cost and depreciation rates, based on the Insurance Application and documents confirming their value. By agreement of the parties, such documents may include:

1. sales certificate/invoice;
2. invoice of the manufacturer or authorized dealer;
3. receipts and other payment documents;
4. customs documents;
5. dealer price lists;
6. catalogs for imported vehicles.

Insurer's Indemnity Limit

2.18. The **indemnity limit** shall mean the maximum amount of insurance indemnity payable under the Insurance Agreement, upon reaching which the Agreement shall terminate. The sum insured shall constitute the aggregate indemnity limit for all insured events occurring during the term of the Agreement.

The Insurance Agreement shall be deemed performed and terminated upon payment of total insurance indemnity in an amount equal to the sum insured.

2.19. When insuring additional equipment, the indemnity limit shall apply per insured event for the entire term of the Insurance Agreement. The Agreement shall terminate upon the occurrence of the first insured event declared by the Policyholder.

Full or Partial Insurance

2.20. By agreement of the parties, the Insurance Agreement may be concluded on the basis of "full" or "partial" insurance.

1. Insurance shall be deemed "full" if the sum insured equals the insured value of the vehicle. In such case, indemnity shall be paid in accordance with the indemnity provisions set out in Section X.
2. Insurance shall be deemed "partial" if the sum insured is lower than the insured value. In such case, damage shall be indemnified proportionally to the ratio of the sum insured to the insured value.

2.20.1. Insurance of additional equipment (if provided for in the Agreement) shall always be full insurance.

Damage Compensation System

2.21. Under these Rules, damage compensation shall be determined depending on natural depreciation of the vehicle, its assemblies, and parts.

2.22. By agreement of the parties, one of the following compensation systems may apply:

1. **"New for Old"** – indemnity is paid without accounting for depreciation of parts and assemblies replaced as a result of an insured event, except in cases of theft, hijacking, or total loss of the vehicle.
2. **"Old for Old"** – indemnity is paid taking into account the vehicle's depreciation. Depreciation shall be calculated by an expert. The depreciation coefficient shall apply to the entire amount of damage, including labor and materials.

Deductible

2.23. By agreement of the parties (except for additional equipment insurance), the Insurance Agreement may provide for a deductible. The deductible may be established as a fixed monetary amount or as a percentage of the sum insured. The type and amount of the deductible shall be specified in the Insurance Agreement (Policy).

2.24. The deductible may be:

1. **Unconditional deductible** – the indemnity amount shall be reduced by the deductible amount for each insured event.

2. **Conditional deductible** – the Insurer shall not be liable for damage not exceeding the deductible; however, if the damage exceeds the deductible, the deductible shall not be applied in calculating the indemnity.

If the type of deductible is not specified in the Insurance Agreement (Policy), the unconditional deductible shall apply.

Insurance Premium

2.25. Upon conclusion of the Insurance Agreement, the Insurer shall determine the amount of the insurance premium payable by the Policyholder. The premium shall be determined in accordance with tariffs in effect at the time of conclusion of the Agreement, based on the terms of the Agreement and risk assessment.

The Insurer may apply discounts or surcharges in accordance with the "Bonus-Malus" system (Section VI). The Insurer may also apply increasing or decreasing coefficients to base tariffs depending on risk factors.

The insurance premium shall be paid in a lump sum or, by agreement of the parties, in installments.

2.26. The premium amount shall be specified in the Insurance Agreement (Policy). By written agreement of the parties, the Policyholder may be granted a deferral of payment. Indemnity for insured events occurring during such deferral shall be paid only after the premium has been paid.

2.27. The premium shall be paid in cash or by bank transfer in accordance with applicable legislation after the Policyholder receives from the Insurer an invoice or other document indicating the premium amount, procedure, and deadlines.

2.28. In case of non-cash payment, the Policyholder shall reference in the payment order the invoice number and date and/or the Insurance Agreement (Policy) number. The premium shall be deemed paid upon crediting of funds to the Insurer's bank account.

In case of cash payment, the premium shall be deemed paid upon receipt of funds at the Insurer's cash desk.

2.29. The parties may agree on installment payments. The procedure shall be specified in the Insurance Agreement.

2.30. In the event of non-payment of the premium or any installment within the deadlines specified in the Insurance Agreement, the Insurer shall be fully released from the obligation to pay insurance indemnity from the due date of such installment, unless otherwise provided in the Insurance Agreement.

III. CIVIL LIABILITY INSURANCE

Object of Insurance

3.1. The object of civil liability insurance of vehicle owners shall be the Policyholder's property interests related to their obligation, in accordance with the civil legislation of the Kyrgyz Republic, to compensate for harm caused to the life, health, or property of third parties as a result of an accident (collision, impact, overturning, falling).

Insurance Risk

3.2. An insurance risk shall mean an anticipated event against the occurrence of which the insurance agreement is concluded.

3.2.1. The Insurer shall provide coverage for the following risks:

1. **"Harm to the life and health of third parties"** – the risk of the Policyholder's liability arising from obligations related to harm caused to the life and health of third parties during operation of the vehicle (including road traffic accidents).
2. **"Damage to the property of third parties"** – the risk of the Policyholder's liability arising from obligations related to damage caused to the property of third parties during operation of the vehicle (including road traffic accidents).
3. **"Civil liability to third parties"** – the aggregate of risks specified in paragraphs 1 and 2 of this clause.

3.3. The amount of insurance indemnity shall be determined by the Insurer in accordance with applicable legislation and these Rules. The injured party shall provide evidence that the damaged property has not been insured elsewhere and that no insurance indemnity has been paid in respect thereof.

3.4. The following shall not be subject to indemnification under civil liability insurance:

1. Harm to the life and health of the driver and passengers who were in the insured vehicle at the time of the insured event;
2. Damage to property of the driver and passengers that was in the insured vehicle at the time of the insured event;
3. Damage arising as a result of force majeure;
4. Damage to the Policyholder's own vehicle.

IV. ACCIDENT INSURANCE

4.1. The object of accident insurance shall be the life and health of the passenger/driver in the vehicle.

An accident shall mean an unforeseen event (road traffic accident, fire, damage caused by a rebounding or falling object, natural disaster) resulting in injury, bodily harm, other health impairment, prolonged (over 4 months) or permanent loss of working capacity, trauma, disability, or death of the passenger/driver in the vehicle.

Insurance may be concluded:

- on a per-seat basis;
- on a lump-sum (pauschal) basis.

The number of insured seats may not exceed the maximum number of seats specified in the vehicle's technical passport.

4.1.1. Under the per-seat system, the sum insured shall be established for each seat individually.

4.1.2. Under the lump-sum (pauschal) system, the sum insured shall be established for the entire vehicle. Each passenger (including the driver) present in the vehicle at the time of the insured event shall be deemed insured for a proportionate share of the total sum insured.

Note:

If, at the time of the insured event, 3 persons are in the insured vehicle, each shall be deemed insured for 30% of the

total sum insured; if 2 persons, for 35% each; if 1 person, for 40% of the total sum insured. If 4 or more persons are present, the agreed sum insured shall be divided equally among all insured persons.
4.2. The parties may conclude an accident insurance agreement covering the life and health of the passenger/driver against the following insured events:
4.2.1. Death resulting from an accident;
4.2.2. Death and disability resulting from an accident;
4.2.3. Death, disability, and injury resulting from an accident.

V. INSURANCE OF VEHICLE REPAIR COSTS ARISING FROM BREAKDOWNS WITHIN THE FRAMEWORK OF THE AUTOCENTER WARRANTY POLICY
5.1. Insurance shall be carried out in accordance with the Additional Conditions for Insurance of Vehicle Repair Costs Arising from Breakdowns within the Framework of the Autocenter Warranty Policy to these Rules (Appendix No. 4).

VI. CONCLUSION OF THE INSURANCE AGREEMENT
6.1. An insurance agreement for motor vehicles (Auto Casco), civil liability, passenger/driver accident insurance, and insurance of vehicle repair costs arising from breakdowns within the framework of the Autocenter warranty policy shall be concluded on the basis of a written application by the Policyholder or their representative.
The insurance application shall contain the following information:

1. Policyholder's details (surname, first name, patronymic and citizenship, or organization name indicating country of registration; full postal address; telephone, fax, and other contact details);
2. Driver details (surname, first name, patronymic, validity period of power of attorney);
3. Vehicle and Additional Equipment details (make, model, number of doors, color, registration number, VIN, engine number, year of manufacture, engine capacity and power, vehicle value, list and value of additional equipment subject to insurance, whether factory-installed or additionally installed, number of original keys, presence of anti-theft alarm);
4. Types of insurance to be concluded: Auto Casco, Additional Equipment, Civil Liability, Accident Insurance (basic and additional) with the Insurer's liability limits, and insurance of vehicle repair costs arising from breakdowns within the Autocenter warranty policy;
5. Insurance start date, term, and territory;
6. Conditions under which the Policyholder wishes to conclude the insurance agreement;
7. Other information necessary for risk assessment and premium calculation.

6.2. At the Insurer's request, the Policyholder shall provide:

1. constituent documents (for legal entities);
2. identity document of the Policyholder or authorized representative;
3. power of attorney or other document confirming the representative's authority;
4. vehicle registration documents and, if required, documents confirming insurable interest;
5. a full set of vehicle keys.

6.3. At the request of an individual Policyholder, based on a written application during the validity period but prior to an insured event, changes may be made to the list of Drivers authorized to operate the insured vehicle, but not exceeding three Drivers, in accordance with Clause 2.4.
6.4. Upon conclusion of the insurance agreement, the Policyholder (or representative) shall present the vehicle for inspection and provide the original set of keys. Following inspection, an "Inspection Report" shall be prepared and signed by the parties and retained by the Insurer. A copy may be provided upon request. The Insurer may require re-inspection at any time during the agreement, including upon renewal or extension.
6.5. The Insurer shall familiarize the Policyholder with these Insurance Rules, which shall be recorded in the Insurance Agreement (Policy).
6.6. The Insurer may refuse to conclude an insurance agreement without stating reasons.

Inspection Report
6.7. The Inspection Report shall be drawn up by the Insurer in the presence of the Policyholder (or representative) and shall include:
6.7.1. Make, model, registration number, VIN, engine, body and chassis numbers;
6.7.2. Vehicle configuration and presence of additional equipment;
6.7.3. General condition and visible damage;
6.7.4. Other data necessary for risk assessment.
6.8. If damage is detected during inspection, the nature and extent shall be recorded in the Inspection Report.

Entry into Force and Validity
6.9. The insurance agreement shall be concluded after vehicle inspection and shall enter into force upon payment of the insurance premium, unless otherwise provided.
6.10. The agreement may be annual (one year), short-term (less than one year), or long-term (more than one year).
6.11. A grace period of 15 calendar days shall be granted for continuous renewal following annual or long-term insurance. If renewed within the grace period, coverage under the new agreement shall begin immediately upon expiration of the previous agreement.
Indemnity for events occurring during the grace period shall be payable only if the Policyholder has submitted a written renewal request before the insured event and subsequently paid the annual premium.

6.12. During the term of the agreement, the Policyholder (Beneficiary) shall notify the Insurer in writing of circumstances affecting risk, including:

1. disposal, pledge, or other encumbrance of the vehicle;
2. replacement of numbered assemblies (body, engine, etc.);
3. installation of additional equipment;
4. transfer of driving rights to a third party (power of attorney, lease, etc.);
5. loss of keys or registration documents;
6. other changes affecting insurance risk.

The Insurer may demand amendment of terms or additional premium proportional to increased risk. If the Policyholder objects, the Insurer may demand termination under the Civil Code of the Kyrgyz Republic.

6.13. During the term, the Policyholder shall ensure minimum tread depth of:

- 1.6 mm for passenger vehicles;
- 1.0 mm for trucks;
- 2.0 mm for buses and passenger vehicles;
- 0.8 mm for motorcycles and scooters;
- 1.0 mm for trailers and semi-trailers.

6.14. Winter tires shall be used from 15 November to 15 March with tread depths as specified above.

VII. BONUS–MALUS SYSTEM

7.1. Upon completion of an insurance period of at least 10 months, the Insurer may apply discounts or surcharges under the "Bonus–Malus" system based on insurance performance, calculated per Appendix No. 2.

7.2. Discounts or surcharges shall remain with the Policyholder when transferring insurance to another vehicle. In case of interruption, they shall remain valid for two years.

7.3. If no claims were declared during the insurance period, the Insurer may issue a certificate confirming claim-free insurance upon request.

VIII. TERMINATION OF THE INSURANCE AGREEMENT

8.1. The agreement may be terminated early upon written notice by either party.

8.1.1. If terminated by the Insurer, the Policyholder shall be granted 15 days to conclude insurance with another insurer.

8.1.2. If terminated by the Policyholder, notice shall be given at least 7 days prior to the proposed termination date.

8.2. Upon termination, the Policyholder shall return the insurance policy, and the Insurer shall refund the unused portion of the premium per applicable tariffs and Appendix No. 1, unless otherwise provided.

8.2.1. If coverage exceeded one year, refund shall be proportional to elapsed time;

8.2.2. If less than one year, refund shall follow short-term insurance scale;

8.2.3. No refund shall be made if coverage exceeded 10 months.

IX. USE OF THE VEHICLE ABROAD

9.1. The Policyholder may request extension of territorial coverage by written application. Amendments shall be formalized by addendum. The Insurer may refuse extension.

9.2. In case of loss abroad, actions shall be taken in accordance with Section X of these Rules.

9.3. Upon return, the vehicle shall be presented for inspection to the nearest Insurer's representative.

X. RELATIONS BETWEEN THE PARTIES UPON THE OCCURRENCE OF AN INSURED EVENT

Obligations of the Policyholder upon the Occurrence of an Insured Event

10.1. Upon the occurrence of an insured event, the Policyholder shall:

10.1.1. Immediately report the incident to the Ministry of Internal Affairs authorities (the authorized state body responsible for road traffic safety, police, fire service), or, depending on the nature of the event, to the competent emergency service, and obtain a certificate confirming the fact of the incident. If the event occurs in the territory of another state, the report shall be made to the relevant authorities of that country.

In the case of minor damage (no more than one element, glass component, body paintwork, glazing, external lighting device, mirror, or antenna), reporting to the above-mentioned authorities and services shall not be mandatory.

10.1.2. Immediately notify the Insurer or its authorized representative of the insured event and, no later than 3 (three) calendar days from the date of occurrence, submit a written notice to the Insurer providing a detailed description of the circumstances of the insured event.

If the insured event occurs abroad or in remote areas of the Kyrgyz Republic, notification may be sent by email or fax by the Policyholder or their authorized representative, followed by submission of the original written notice to the Insurer. All notifications of insured events shall be submitted in writing by the Policyholder or their representative who is fully aware of the circumstances of the event, or by the person directly operating the vehicle at the time of the insured event.

10.1.3. Present the damaged vehicle to the Insurer's representative for inspection and agree on further actions for claim settlement.

10.1.4. In the event of a road traffic accident, immediately, but no later than twelve hours from receipt of a written referral by an authorized official, undergo a medical examination to determine the presence of psychoactive substances and the state of alcohol or narcotic intoxication in accordance with the legislation of the country where the insured event occurred.

Documents to Be Submitted to the Insurer upon the Occurrence of an Insured Event

10.2. In order to decide on payment of insurance indemnity, the Policyholder (Beneficiary) shall provide the Insurer with the following original documents:

1. a written claim for insurance indemnity;
2. the Insurance Policy;
3. a certificate confirming the occurrence of the insured event issued by the relevant authorized state bodies: road traffic safety authorities (indicating the date, time, and place of the incident, all participants and the party at fault, their place of residence or employment, information on possession of driving licenses, and description of vehicle damage); law enforcement authorities; fire safety authorities; hydrometeorological authorities;
4. documents confirming the amount of damage;
5. a letter requesting payment of insurance indemnity specifying bank details; for legal entities — signed by the head or a person authorized to sign financial documents, bearing the company seal;
6. a certificate from a narcological dispensary regarding the condition of the person authorized to drive the vehicle, confirming whether such person was under the influence of alcohol, narcotic, or toxic substances;
7. other additional documents necessary for the Insurer to decide on payment of insurance indemnity.

All documents submitted to the Insurer for insurance payment shall be drawn up in Russian or Kyrgyz, or accompanied by a notarized translation into Russian.
If documents cannot be read due to illegible handwriting of the issuing authority or due to physical damage (torn, crumpled, erased, etc.), the Insurer shall have the right to suspend its decision until properly executed documents are provided.
Copies of documents must be notarized or certified by the issuing competent authority.

10.3. In case of theft or unlawful taking of the vehicle, the Policyholder shall submit the following original documents to the Insurer:

1. written notification of theft or unlawful taking;
2. the Insurance Agreement (Policy);
3. vehicle registration documents (registration certificate, technical passport, technical card, vehicle passport), as well as the full set of original vehicle keys;
4. a certificate from the Ministry of Internal Affairs authorities regarding the results of the criminal investigation — no later than 10 days from the date of issuance;
5. a copy of the investigator's resolution initiating criminal proceedings indicating the causes and circumstances of the incident; a copy of the resolution recognizing the Policyholder as a victim; and a copy of the resolution or court decision recognizing the Policyholder as a civil claimant;
6. a written request for payment of insurance indemnity specifying bank details; for legal entities — signed by the head or authorized signatory, bearing the company seal. The request shall be submitted together with all documents requested by the Insurer;
7. a written undertaking by the Policyholder that, in the event the vehicle is recovered, the Policyholder shall reimburse the Insurer for the paid indemnity either by returning the received amount or by transferring the vehicle to the Insurer with all necessary documents for sale through a commission shop, with the proceeds transferred to the Insurer.

10.4. Within no more than 30 (thirty) business days after receipt of the originals of all required documents (Clauses 10.2 and 10.3 of these Rules), the Insurer shall consider the claim on its merits and either:
- pay the insurance indemnity;
- provide a reasoned full or partial refusal; or
- request additional documents, except as provided in Clause 11.17 of these Rules.

10.5. The burden of proving the occurrence of the insured event and providing all necessary documents for payment of insurance indemnity shall rest with the Policyholder or the Beneficiary.
If documents are submitted in a foreign language, the Policyholder shall provide a notarized translation into Russian.

XI. CONDITIONS FOR PAYMENT OF INSURANCE INDEMNITY

11.1. The amount of insurance indemnity shall be determined by the Insurer after verification of the data specified in the submitted documents for compliance of the performed repair works with the insured event, as well as with the repair technology prescribed by the manufacturer and the cost of spare parts. Any disputes arising between the repair organization and the Policyholder shall be settled by the Policyholder independently.
11.2. The calculation of the amount payable shall take into account:

1. The amount of damage caused by the insured event;
2. The Insurer's liability limit;
3. "Full" or "partial" insurance coverage;
4. The indemnification system;
5. The deductible;
6. Depreciation of the vehicle;
7. The residual value of the vehicle and additional equipment.

11.3. Payment of indemnity under "total loss" conditions or for a stolen (unlawfully taken) vehicle shall be made taking into account depreciation of the vehicle. Unless otherwise provided by the insurance agreement, the following annual depreciation rates shall apply (as a percentage of the insured sum of the vehicle):

1. 20% for the first year of operation;

2. 10% for the second and each subsequent year.

Depreciation shall be calculated from the date of conclusion of the insurance policy to the date of the insured event, proportionally for each day of coverage.

11.4. For stolen or damaged additional equipment, the depreciation rate shall be 20% per annum of the insured sum.

11.5. Where indemnity is paid in monetary form, payment shall be made in Kyrgyz soms or foreign currency in accordance with the legislation of the Kyrgyz Republic. The payable amount shall be determined at the exchange rate of the National Bank of the Kyrgyz Republic as of the date of issuance of the payment order and cash warrant.

The amount of indemnity paid shall be accounted for in the currency of the insured sum at the National Bank exchange rate on the date of issuance of the payment order or cash warrant.

11.6. Where damage resulting from the insured event has been compensated to the Policyholder by third parties, the Insurer shall indemnify only the difference between the amount payable under the insurance agreement and the amount received from such third parties.

The Policyholder shall return the insurance indemnity received in the event of full compensation by the liable party.

11.7. The insurance agreement may provide for replacement of monetary indemnity with compensation in kind within the limits of the insured sum, including restoration repair of the damaged vehicle based on the Insurer's referral (repair estimate) to repair organizations with which the Insurer has contractual relations. Payment shall be made directly to the repair organization. If a deductible applies, the Policyholder shall pay to the Insurer an amount equivalent to the deductible prior to commencement of repairs.

Scope of Indemnity for Damage to the Insured Vehicle

11.10. The Insurer shall indemnify:

1. Necessary and reasonably incurred expenses for saving the insured vehicle and additional equipment, including the cost of towing (evacuation) to the nearest repair facility, if the vehicle cannot move under its own power.

Only documented transportation (evacuation) expenses to the "Nearest Repair Facility" shall be reimbursed. "Nearest Repair Facility" shall mean a specialized vehicle repair station located in the nearest populated area from the place of damage. Transportation to more distant facilities shall be borne by the Policyholder.

2. The cost of restoration repair related to the insured event, except in cases of total loss, taking into account repair technology and prices for parts, materials, and labor.
3. The cost of eliminating hidden damages discovered during repair, provided they are caused by the insured event and documented. The Policyholder shall notify the Insurer before eliminating such damages; otherwise, expenses shall not be reimbursed.
4. Expenses for purchase and delivery of spare parts and materials, including packaging, customs duties, and taxes.
5. Expenses for expert examination, if the event is subsequently recognized as an insured event.

11.11. Restoration repair shall be paid based on original documents confirming the cost and payment of repairs, which must include:

- itemized types of work performed;
- description of technological operations;
- labor time in standard hours (if applicable);
- cost per standard hour (if applicable);
- quantity and cost of materials;
- list of new spare parts with catalog numbers and cost;
- total cost of work.

Restoration repair shall be reimbursed at 50% of the damage amount if, during nighttime hours (00:00–06:00), the vehicle was not kept in a guarded parking facility or locked garage, or if the alarm system was disabled while the vehicle was not in use.

A guarded parking facility shall mean a building, structure, or specially designated open area for vehicle storage under constant physical security.

If the Policyholder independently purchases spare parts, original invoices and financial documents confirming payment shall be submitted, containing part names, catalog numbers (if applicable), cost per item, and total cost.

11.12. At the Policyholder's written request, the Insurer may pay based on a repair estimate prepared by the Insurer or a competent organization following inspection. The estimate shall comply with manufacturer repair technology and documented prevailing market rates.

After repair in accordance with the estimate, the vehicle must be presented for inspection; otherwise, future claims for similar damages shall not be accepted.

Scope of Indemnity in Case of Total Loss

11.13. Total loss shall mean when restoration costs equal or exceed 75% of the insured value. Payment shall be made under "total loss" conditions. By agreement, total loss may be recognized at a lower percentage. In any case, indemnity shall not exceed the actual value of the vehicle as of the date of conclusion of the insurance agreement.

11.14. The Insurer shall conduct a preliminary assessment based on its own estimate or that of a competent organization.

11.15. If the agreement is for less than one year, the Insurer may retain the portion of premium necessary to complete a full annual premium.

11.16. Under total loss, indemnity shall be paid within the insured sum less depreciation and residual value. The remains shall stay with the Policyholder. Residual value shall be determined by a competent organization at the Policyholder's expense.

Alternatively, the Insurer may pay within the insured sum less depreciation after deregistration and transfer of ownership to the Insurer, with deregistration costs borne by the Policyholder.

Payment shall be reduced to 50% if nighttime storage conditions described above were not met.

Scope of Indemnity in Case of Theft or Unlawful Taking

11.17. Indemnity shall be paid no earlier than two months after theft and upon completion of preliminary investigation. Payment shall be within the insured sum less depreciation and shall not exceed the actual value of the vehicle. Payment shall be limited to 50% if nighttime storage conditions were not met.

11.18. If the vehicle was not equipped with an electronic anti-theft system, the Insurer may reduce indemnity by 20%. If installed later, the Policyholder must notify the Insurer and present the vehicle for inspection prior to the insured event.

11.19. If the agreement is for less than one year, the Insurer may retain the portion of premium necessary to complete a full annual premium.

11.20. If the vehicle is recovered before indemnity payment, damage shall be treated as unlawful acts of third parties.

11.21. If recovered after payment, the Policyholder shall reimburse the Insurer up to the paid amount or transfer the vehicle and ownership rights by agreement.

Scope of Indemnity for Civil Liability

11.22. The amount of indemnity shall be determined in accordance with applicable legislation based on conclusions of competent authorities and documents confirming expenses. Compensation shall cover:

1. damage to property of third parties;
2. damage to life and health of third parties;
3. costs of determining the amount of damage.

11.23. The Insurer shall pay indemnity based on a final court decision establishing liability and amount of damage, or out of court by agreement between the Insurer, Policyholder, and injured party, subject to supporting documentation.

Scope of Indemnity in the Event of an Accident

11.24. In the event of death, disability, or injury resulting from an accident (Clauses 4.2.1, 4.2.2, 4.2.3 of these Rules), insurance indemnity shall be paid in accordance with the conclusions of the Medical and Social Expert Commission (MSEC), the Medical Labor Expert Commission (VTEC), the Medical Advisory Commission (MAC), or a medical or forensic medical examination, and pursuant to the insurance agreement, in the following amounts:

- death resulting from an accident – 100% of the individual insured sum;
- Group I disability – 90% of the individual insured sum;
- Group II disability – 75% of the individual insured sum;
- Group III disability – 50% of the individual insured sum;
- in case of injury resulting from an accident, payments shall be made in accordance with the Table of Insurance Indemnity Amounts in the Event of an Accident (Appendix No. 3 to these Rules).

11.25. In the event of partial permanent or long-term loss of working capacity (Clause 4.2.4 of these Rules), the Insurer shall pay a portion of the insured sum proportionate to the percentage decrease in the insured person's working capacity as determined by the MSEC, VTEC, MAC, or medical/forensic medical examination. In the event of the insured person's death, the Insurer shall pay the insured sum stipulated in the insurance agreement.

XII. GENERAL EXCLUSIONS

Grounds for Refusal of Indemnity

12.1. The Insurer shall have the right, at its discretion, to fully or partially refuse payment of insurance indemnity if the Policyholder, Driver, or Beneficiary:

1. failed to fulfill obligations under these Rules;
2. failed to take reasonable and available measures to rescue or preserve the insured vehicle;
3. failed to provide documents required under these Rules or provided documents not complying with the established requirements;
4. left the scene of a road traffic accident in violation of traffic regulations of the Kyrgyz Republic or evaded examination for alcohol, narcotic, or psychoactive substance intoxication;
5. provided false information regarding the circumstances of the insured event;
6. carried out commercial passenger transportation for profit without notifying the Insurer in writing at the time of conclusion of the agreement.

12.2. The Insurer may fully refuse payment for stolen or unlawfully taken vehicles if the theft occurred due to gross negligence of the Policyholder and/or authorized drivers, including:

1. leaving doors or windows unlocked while unattended;
2. leaving ignition keys, alarm key fobs, or registration documents accessible to third parties;
3. failure to notify the Insurer within three days of loss of keys or documents.

12.3. Damage shall not be indemnified if resulting from:

1. operation of a defective vehicle prohibited under Kyrgyz legislation, including failure to pass mandatory technical inspection;
2. operation by a person under alcohol, narcotic, toxic, or sedative influence;
3. operation by a person not licensed for the respective vehicle category;
4. violation of fire safety or hazardous substance regulations;
5. transfer of driving rights to a person not specified in the policy;
6. use for driving instruction or competitions;
7. operation contrary to manufacturer specifications;
8. intentional acts of the Policyholder, Driver, or Beneficiary;

9. mental disorders or severe nervous conditions, stroke, epileptic seizure, or heart attack, unless previously unknown and without predisposition;
10. direct causation due to tire tread depth below:
    - 1.6 mm (passenger vehicles);
    - 1.0 mm (trucks);
    - 2.0 mm (buses);
    - 0.8 mm (motorcycles);
    - 1.0 mm (trailers/semi-trailers);
11. failure to use winter tires from 15 November to 15 March as required under Clause 6.13;
12. unauthorized structural modifications to engine, transmission, or chassis;
13. forced evacuation or wheel clamping due to illegal parking;
14. traffic violations, including:
- crossing into oncoming traffic across a solid line (except in defined exceptional circumstances);
- running a red light or ignoring traffic controller signals;
15. use of communication devices while driving without hands-free equipment;
16. operation by a person who obtained a driving license unlawfully.

12.4. If the Policyholder provided knowingly false information at conclusion or during validity of the agreement, the Insurer may seek invalidation under the Civil Code of the Kyrgyz Republic.

12.5. The following shall not be indemnified:

1. moral damages, indirect losses, penalties, lost profits, downtime, travel expenses, etc.;
2. loss of commercial value of the vehicle;
3. natural wear and tear;
4. tire damage from road conditions not resulting in body damage or civil liability;
5. damage due to manufacturing or repair defects;
6. damage to property in the vehicle not insured under the agreement;
7. repair of damage existing prior to policy commencement;
8. repair not caused by insured event or not technologically necessary;
9. damage not directly related to the insured event;
10. work not prescribed by manufacturer technology;
11. environmental contamination losses.

12.6. Damage shall not be indemnified if caused by:

1. nuclear explosion, radiation, radioactive contamination;
2. terrorist acts;
3. war, military operations;
4. civil war, riots, rebellion, revolution, coup, strikes, looting, martial law, or state of emergency;
5. seizure, confiscation, requisition, arrest, or destruction by state authorities.

Subrogation

12.7. Upon payment of insurance indemnity, the Insurer shall acquire, within the amount paid, the right of recourse against the party responsible for the damage.

12.8. The Policyholder shall provide the Insurer with all documents, evidence, and assistance necessary for exercise of such right.

12.9. If the Policyholder waives their right of recourse or makes its exercise impossible through their fault, the Insurer shall be released from payment fully or partially and shall have the right to recover any excess indemnity paid.

XIII. LIMITATION PERIODS AND DISPUTE RESOLUTION

13.1. The right to file claims against the Insurer for payments under the insurance agreement shall be extinguished upon expiration of the limitation period in accordance with the legislation of the Kyrgyz Republic.

13.2. The Insurer shall have the right to demand reimbursement of insurance indemnity paid if grounds provided by legislation or these Rules arise or are subsequently discovered.

13.3. Disputes arising out of the insurance agreement shall be resolved in accordance with the legislation of the Kyrgyz Republic.