New Insurance ☐ Policy Nº: ☐☐☐☐☐☐☐☐☐☐ Start Date*: ☐☐ ☐☐ ☐☐☐☐

Amendments ☐ Branch: ☐☐☐☐☐☐☐☐☐☐ Proposal: ☐☐☐☐☐☐☐☐☐☐

Employee: ☐☐☐☐☐☐_____

Insurance Broker ME34000008 Banco Comercial Português SA

Application Form

Médis SME Insurance

*The contract commences on the 1st or 15th calendar day of the month following acceptance on the risk by the insurer

Policy Holder (The entity below is the one who signs the Insurance Proposal and who is responsible for payment of the Premium)

Name:_____

Address:_____

Postal Code:_____ City:_____ E-mail: _____

Marital Status:_____ Field of Activity:_____ Profession: _____

Birth Date: ☐☐ ☐☐ ☐☐☐☐

Gender: ☐ F ☐ M

CAE: _____

Constitution Date: ☐☐ ☐☐ ☐☐☐☐

Identity Card: ☐☐☐☐☐☐☐☐

Tax number: ☐☐☐☐☐☐☐☐☐

Mobile Phone Nr.: ☐☐☐☐☐☐☐☐☐

Telephone Nr. (work): ☐☐☐☐☐☐☐☐☐

Telephone Nr. (Home): ☐☐☐☐☐☐☐☐☐

Insurance group (Number of Accessions)

Number of Insured People *: ☐☐☐

Employee: ☐☐☐ Spouses: ☐☐☐ Son: ☐☐☐

The risk was previously safe? ☐ Yes ☐ No Insurance:_____ Policy Nº _____

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Application Form

Médis SME Insurance

* Is required to fill the Bulletin of Accession and the Medical Questionnaire for all insured persons.

Covers, Capitals, Contributions, Sub-limits and Deductible Item per Insured Person / Year

Options	Inpatient	Option A	Option B	Option C	Option D
Choose the appropriate Option by putting an X. Does not relieve a careful reading of the pré-contractual and contractual conditions legally required.	☐	☐	☐ B ☐ B + Dental ☐ B + Dental + Serious Illness	☐ C ☐ C + Dental ☐ C + Serious Illness ☐ C + Dental + Serious Illness ☐ C + Dental + Serious Illness + Prost. & Orthosis	☐

Covers

Options	Inpatient	Option A	Option B	Option C	Option D
Inpatient	€ 15.000	€ 15.000	€ 30.000	€ 50.000	€ 500.000
Birth	-	€ 1.500	€ 2.000	€ 5.000	€ 5.000
2ª Opinion (1)	Yes	Yes	Yes	Yes	Yes
Outpatient Assistance	-	€ 1.000	€ 2.500	€ 3.000	€ 5.000
Mental Health Psychiatric hospitalisation	-	20 Days	20 Days	20 Days	20 Days
Psychology and Psychotherapy		20 Sessions	20 Sessions	20 Sessions	20 Sessions
Psychiatric Appointments		Included in Outpatient	Included in Outpatient	Included in Outpatient	Included in Outpatient
Online Doctor GP Medicine	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Paediatrics	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited
Psychology	-	Mental Health Included	Mental Health Included	Mental Health Included	Mental Health Included
Psychiatry	-	Outpatient Included	Outpatient Included	Outpatient Included	Outpatient Included
Other specialties	-	Outpatient Included	Outpatient Included	Outpatient Included	Outpatient Included
Dental	-	-	€ 250 (Optional)	€ 500 (Optional)	€ 1.000
Prosthetic Devices and Orthosis	-	-	-	€ 300 (Optional) (5)	€ 500

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Application Form

Médis SME Insurance

Covers, Capitals, Contributions, Sub-limits and Deductible Item per Insured Person / Year (cont.)					
Options	**Inpatient**	**Option A**	**Option B**	**Option C**	**Option D**
Serious Illness (4)		-	€ 1.000.000 (Optional) (6)	€ 1.000.000 (Optional)	€ 1.000.000
International Clínica Universitária de Navarra (2)	-	-	-	Unlimited	Unlimited
Barcelona — Berlin — EUA (3)	-	-	-	€ 50.000	€ 50.000
Remaining Clinics	-	-	-		
Percentage paid by Médis					
In Médis Network (after copayment)	100%	100%	100%	100%	100%
Out of Médis Network	30%	30%	30%	35%	35%
Psychiatric hospitalisation	-	100%	100%	100%	100%
Online doctor	-	100%	100%	100%	100%
Dental Prosthesys(7)	-	-	50% In network 30% Out network	50% In network 35% Out network	50% In network 35% Out network
Prosthetic Devices and Orthosis (7)	-	-	-	80% In network 35% Out network	80% In network 35% Out network
International Clínica Universitária de Navarra (2)	-	-	-	100%	100%
Barcelona — Berlin — EUA (3)	-	-	-	80%	80%
Remaining Clinics	-	-	-	60%	60%
Serious Illness (4)	-	-	100%	100%	100%
Sub-Limits					
Physiotherapy	-	€ 500	€ 500	€ 500	€ 500
Ophthalmic Orthosis	-	-	-	€ 120	€ 200
Frames	-	-	-	€ 50	€ 80
Lenses	-	-	-	€ 35	€ 60
Contact Lenses	-	-	-	€ 35	€ 60
Deductible					
International – Remaining Clinics	-	-	-	€ 1.500 for Household	€ 1.500 for Household
Psychiatric hospitalisation	-	1 day deductible	1 day deductible	1 day deductible	1 day deductible

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Application Form

Médis SME Insurance

Co-payments

Inpatient	
Médis Network Providers	10%, Min. € 250 and Max. € 500
CUF and Luz Saúde units	10%, Min. € 400 and Max. € 600
Chemotherapy	10% per session and Max. € 500
Childbirth	€ 250
Caesarean section	€ 600
Appointments	
Médis Network Providers	€ 19
CUF and Luz Saúde units	€ 21
Médis Medical Assistant	€ 12,5
Online Médis Medical Assistant	€ 10
Urgency	
Médis Network Providers	€ 50
CUF and Luz Saúde units	€ 55
Home Medical Visits	€ 25
Blood Tests (per analysis)	€ 2
Pathology Anatomy	€ 10
X-Ray	€ 10
Sound Scan	€ 15
Physiotherapy	€ 7,5
Nuclear Medicine	20 %
CAT Scan	
Médis Network Providers	€ 30
CUF and Luz Saúde units	€ 55

Magnetic Resonance Imaging	
Médis Network Providers	€ 70
CUF and Luz Saúde units	€ 100
Dental (per medical act) (5)	€ 15
Dental Médis Clinic (per medical act) (5)	€ 10
Other Complementary Means of Diagnosis	20 %
Surgeries, treatments and Other Outpatient Medical Acts	20%
Mental Health	
Psychology and Psychotherapy appointments	
Médis Network Providers	€ 19
CUF and Luz Saúde units	€ 21
Psychiatry appointments	
Médis Network Providers	€ 19
CUF and Luz Saúde units	€ 21
Online Doctor	
General and Family Medicine	€ 0
Pediatrics	€ 0
Psychiatry	€ 12,5
Psychology	€ 12,5
Other Specialities	Until € 20
Oncology – Psychological support	€ 10 by consultation
Oncology – Home nursing care	€ 10 by use

Grace Periods

60 days - Outpatient Assistance, Dental, Oncology - Prostheses and Orthoses, 2nd Opinion, Psychology and Psychiatry Appointments and Psychotherapy Sessions. **90 days –** Inpatient and Psychiatric Hospitalisation. **180 days -** Serious Illness Cover; Surgical or other invasive treatment of benign prostatic hypertrophy, benign uterus condition, cystocele and rectocele. **365 days -** Birth; Surgical treatment of varicose veins of lower members and of herniated disk; Haemorrhoidectomy and other haemorrhoid treatments as well as the treatment of the perianal fistula; Treatment of joint pathology by arthroscopy, Tonsillectomy, adenoidectomy, myringotomy with or without ventilating tubes, septoplasty, rhinoseptoplasty and surgical treatment for sleep apnea Surgical excision of cutaneous or subcutaneous benign lesions and laser treatments of benign skin lesions.

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Application Form

Médis SME Insurance

Payment Option, Duration and Frequency of Premium Payment

Choose a payment option:

Debit (ATM / Check) ☐ Direct Debit (Field Authorisation for Direct Debit) ☐

Duration: Year and Following

Frequency of Premium Payment: Annually ☐ Six-monthly ☐ Quarterly ☐ Monthly* ☐

First receipt will be added of € 5,38 for policy cost

***Possible only by Direct Debit**

Contributory Group Insurance: ● Yes ● No

An insurance contract where the insured (workers) support, in whole or in part the payment of the premium due by the policyholder (company)

Account Debit / Credit Sepa

Account Holder: _____

I authorise the Bank to pay to Ageas Portugal – Companhia de Seguros S.A. (brand Ocidental), the premium relating to the Insurance subscribed through this Proposal and at the agreed intervals, by direct debit pursuant to the authorization or, if the payment of the initial premium or the first instalment thereof is not compatible with that payment service on the date of commencement of the insurance and the bank indicated below is, at the same time, this Insurance Intermediary, by credit transfer to the account of Ageas Portugal – Companhia de Seguros S.A. (brand Ocidental), with IBAN PT50003300000000070606405, by debit to my account indicated below.

Account Number:

IBAN ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐☐ ☐☐ **BIC / SWIFT** ☐☐☐☐☐☐☐☐

Type of payment: Recurrent payment ☐ or One-off payment ☐

By signing this authorisation, you authorise (i) Ageas Portugal – Companhia de Seguros S.A. (brand Ocidental) to send instructions to your bank to debit your account and (ii) your Bank to debit your account in accordance with the instructions of Ageas Portugal – Companhia de Seguros S.A. (brand Ocidental).

Your rights, with reference to the abovementioned authorisation, are explained in a statement that you can obtain from your bank and you are entitled to claim a refund of the amount debited from your Bank, under the terms and

Application Form

Médis SME Insurance

Account Debit / Credit Sepa (cont.)

conditions agreed with your Bank. The refund must be claimed within 8 weeks from the date on which your account was debited. We would, however, draw your attention to the fact that the refund by the Bank does not extinguish the obligation of the payment of the premium in question, or any liability arising from breach of the Insurance contract. The payment of any amounts under this insurance contract, must be credited in the same account, unless otherwise specified.

In the case of subscription in tenants-in-common or mixed accounts, the express agreement of the co-Account Holders is required, and this payment instruction form must be signed in accordance with the conditions of operation of the current account.

Location and Date:_____,_____of_____of _____

Signature of the Account Holders:

_____ _____

(According to the Signatures Form, or Identification Document, and in accordance with the conditions of operation of the current account)

Application Form

Médis SME Insurance

Declarations, Consents, Date and Signatures

For the effects of concluding the current insurance contract, the Member/Policyholder and the Insured Person(s), declare that:

1. We have been informed of the conditions of the insurance contract and all the necessary and legally required clarifications have been provided and declare having received for this effect the annex to this proposal: Document of information about the insurance product and the General and Special Conditions.
2. The risk that we intend to insure against was not covered, totally or partially, by any contract relative to which there is a premium, instalment of a premium or other amount in debt.
3. Any omissions, inaccuracies or falsities, whether regarding the data provided on a compulsory or optional basis, are the responsibility of the Insurance Policyholder and/or Insured Persons.
4. We authorise that the information relative to the statement of benefits, containing information relative to the provider, date of the medical act and value of the expenses incurred, should be provided directly to the Insurance Policyholder.
5. For insurance concluded for a period of six months or above, an Insurance Policyholder who is the natural person is entitled to cancel the contract, without needing to invoke fair cause, in the 30 days immediately following the date when the policy was received.
6. The provisions in the previous number are not applicable to group insurance.

The Member/Policyholder and the Insured Person(s) are also aware that:
7. The acceptance of the Insurance, regarding each Insured Person, is dependent on the analysis of the respective Individual Health Questionnaire, and the Insurance may be considered as having been accepted if, within a maximum of 14 days from the date of the Insurance Company's Medical Subscription Services' receipt of the Application Form and respective Individual Health Questionnaire, it does not inform the Insured Person of the non-acceptance of the proposed risk or the need to obtain additional elements for its assessment.
8. The analysis of the Individual Health Questionnaire and remaining factors that characterize the proposed risk, condition its acceptance by the Insurance Company or the terms under which it may take place.
9. In the case of a transfer of risk previously covered by another insurance contract, particular exclusions and grace periods for new coverage and the difference of capital, compared with the previous insurance policy, will be applied, with exception of Birth coverage subject to the grace period provided in the General Conditions of the policy, which is 365 days. The particular exclusions and preexistence will be considered on the basis of existing clinical information, that is, in the Particular Conditions / Individual Certificates in force at the date of transfer. In the absence of referred information the subscription will be based on a medical questionnaire which is needed to be filled and reported upon an acquisition of the Médis insurance. The preexistences will be reported on the date that the medical questionnaire that supports a subscription of this insurance is filled.
10. In case of any change of the policy's conditions, grace periods will be applied to the new coverages and to the difference of capital in excess of the previous option. Pre- existing conditions and particular exclusions will be considered based on the existing clinical information (medical questionnaire, Specific Conditions/Individual Certificate and additional information arising from the insurance utilization) for the new coverages or for the difference of capital in excess of the previous option.
11. Under the legal terms, after acceptance of this application form the risk cover is only effective once the owed premium - or instalments of it - is paid.
12. The guaranteed instalments that are stated in this Application Form exclusively refer to each year of the contract's lifetime.

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Millennium bcp

Application Form

Médis SME Insurance

Declarations, Consents, Date and Signatures (cont.)

13. Banco Comercial Português, S.A. (Millennium bcp) acts on behalf and on account of the Insurer and its intervention involves the provision of assistance throughout the duration of the insurance contract. There will not be any involvement of other insurance intermediaries in the insurance contract.

Millennium bcp holds an indirect stake of more than 10% in the share capital of the entities Ocidental – Companhia Portuguesa de Seguros de Vida, S.A. and Ageas – Sociedade Gestora de Fundos de Pensões, S.A. In turn, Fosun International Holdings Limited, which holds an indirect stake in the share capital of Millennium bcp of more than 10%, indirectly holds qualifying stakes in various insurance companies of the Fidelidade Group, including Fidelidade – Companhia de Seguros, S.A., Companhia Portuguesa de Resseguros, S.A. and Multicare – Seguros de Saúde, S.A. Nevertheless, Millennium bcp does not sell insurance products of the Fidelidade Group's insurance companies.

Millennium bcp provides advice. The information provided by Insurance Policyholders relative to their requirements and needs are specified in the insurance proposal and/or in the application proposal, as well as any additional simulations and questionnaires, and guide the advice provided, which is only based on the analysis of the insurance contracts of distributers with which the intermediary has close relations.

Millennium bcp, as an insurance intermediary, is contractually bound to conduct its insurance distribution activity exclusively for the following insurers: Ocidental - Companhia Portuguesa de Seguros de Vida, S.A., Ageas Portugal - Companhia de Seguros S.A. and Médis - Companhia Portuguesa de Seguros de Saúde, S.A. As well as for Ageas – Sociedade Gestora de Fundos de Pensões S.A.

Notwithstanding this, in certain cases, under the contractually established terms, Millennium bcp can carry out insurance distribution activity for other Insurers.

The Intermediary is not remunerated directly by the Insurance Policyholder for the distribution activity. The Intermediary will receive a management fee from the Insurer, as remuneration in relation to the insurance contract, without prejudice to the Insurer being able to attribute benefits, that may or may not be of economic nature, to the persons directly involved in the insurance distribution activity, which shall not be granted according to a given insurance contract. The Insurance Policyholder has the right to request informationn about the Intermediary's remuneration for providing the distribution service; therefore, whenever requested, you will be given this information.

14. Complaints arising from the contract can be submitted in writing to the Insurer's complaint-management department (namely through the e-mail: reclamacoes@ocidental.pt or by post to: Praça Príncipe Perfeito 2, 1990-278 Lisboa), in the Complaints book, to the Customer Ombudsman (namely through the e-mail provedor.ocidental@mm-advogados.com) and to the Insurance and Pension Funds Supervisory Authority, at www.asf.com.pt. In the events of ~~a~~ disputes, in addition to resorting to the other Alternative Dispute Resolution Entities, under the terms of applicable legislation, the parties can also appeal to CIMPAS - the Insurance Information, Mediation and Arbitration Centre, of which the Insurer is a member - www.cimpas.pt - or to the judicial courts. The Insurer's Customer Handling Policy and other information on Complaints and Dispute Management is available at www.ocidental.pt.

Ageas Portugal - Companhia de Seguros, S.A. (brand Ocidental, Hereinafter referred to as "Ocidental") is the entity responsible for processing the personal data of the insurance policyholder (if a natural person) or the representative(s) of the insurance policyholder (if a legal person), all the other insured persons and/or beneficiaries ("Data Subjects"), in the context of the subscription of insurance products, collected through this document, as well as any that are provided subsequently, namely during the reporting of a claim, even if they have been collected from third parties. The personal data provided are necessary for the subscription and management of the insurance, including the issuance of the policy, management of the policy, management of claims and annulment of the policy, and are processed only for this(these) purpose(s). In this regard, Ocidental processes the following categories of data: identification and contact data, health data; financial data and all other

Declarations, Consents, Date and Signatures (cont.)

data required for concluding the insurance contract. For the pursuit of the purpose(s) described above, Ocidental may communicate the collected data to subcontractors, business partners and entities of the insurance sector, such as the Portuguese Association of Insurers, insurance distributers and reinsurers. Ocidental may also communicate personal data when it deems that this disclosure of data is necessary or appropriate (i) in light of the applicable law, (ii) in compliance with legal obligations/court orders, or (iii) to respond to requests from public or governmental authorities. The provision of products and services by Ocidental could imply the transfer of personal data to third countries (which do not belong to the European Union or European Economic Area).
In these cases, Ocidental will implement the necessary and appropriate measures in light of the applicable law to ensure the protection of the personal data being transferred. Ocidental keeps the data throughout the established contractual period, unless it is duty bound by law to keep the data for a longer period of time. Data Subjects can, at any time, request access to their personal data, as well as their data's rectification, elimination or limitation to their processing, the portability of their data, or object to their processing (with the exception of data strictly necessary for the provision of the service) through written request addressed to Ocidental to the email apoioaocliente@medis.pt or postal address Praça Príncipe Perfeito 2, 1990-278 Lisboa. If you wish to contact the Data Protection Officer (DPO), please do so via the email dpo@medis.pt. Without prejudice to any other form of administrative or judicial appeal, Data Subjects are entitled to the right to submit a compliant to the National Data Protection Commission (CNPD) or to another supervisory authority that is competent under the terms of the law, if they consider that their data is not being processed legitimately by Ocidental. Ocidental may process personal data in order to assess the level of risk associated to the insurance subscription based on automated processing (i.e. without human intervention) of personal data, substantiating a decision which could take effect in the legal sphere of the Data Subject, namely with respect to the pricing of the insurance. In this respect, Ocidental undertakes to take the appropriate measures to safeguard the rights, freedoms and legitimate interests of the Data Subjects, namely the right to obtain human intervention by Ocidental, express their point of view and contest the decision in question. With the Data Subject's consent (if a natural person), Ocidental will use the collected data for sending promotional communications, disclosing campaigns relative to Ocidental products and services suited to the Data Subject's profile. With the Data Subject's consent, the entities of the Ageas Portugal Group (namely: Ageas Portugal - Companhia de Seguros, S.A. (brand Ocidental), Ageas Portugal - Companhia de Seguros de Vida, S.A., Ageas Portugal- Companhia de Seguros, S.A., Ocidental - Companhia Portuguesa de Seguros de Vida, S.A., Médis - Companhia Portuguesa de Seguros de Saúde, S.A., Ageas - Sociedade Gestora de Fundos de Pensões, S.A.) will have access to the Data Subject's personal data for sending promotional communications, disclosing campaigns relative to Ocidental products and services suited to the Data Subject's profile. These entities will act as autonomous processors for the processing that each carries out. Data Subjects can, at any time, request access to their personal data, as well as their data's rectification, elimination or limitation to their processing, the portability of their data, or object to their processing through written request addressed to the entities responsible for the processing (processors) to the contacts indicated above. They may also contact the DPO of the Ageas Portugal Group through the email dpo@ageas.pt. You can also manage the consents that have provided through your Reserved Area. If you wish to know more about how the entities of the Ageas Portugal Group process your personal data, please see their Privacy Policies presented on the website of each entity. The profile will be created based, in particular, on demographic variables such as age and gender, area of residence, personal preferences indicated, as well as the subscribed products, with the profile being adjusted throughout the relations established with any of the entities of the Ageas Portugal Group. The personal data will be kept for marketing purposes as long as the Data Subject does not withdraw consent. All of our communications contain a link through which the Data Subject can, at any time, withdraw consent. However, this does not invalidate the processing that has been done up to that date based on the previously given consent.

Application Form

Médis SME Insurance

Declarations, Consents, Date and Signatures (cont.)

The Insurance Policyholder (natural or legal person), by providing third party data, namely insured person(s) and/or beneficiary(ies), undertakes to provide information relative to the processing of personal data described above, as well as the collection of any applicable consent(s).

To be completed by the Policyholder if an individual:

☐ I consent to the entities of the Ageas Portugal Group (identified above) having access to my personal data kept in the context of the relationship established with the entity(ies) of the Ageas Group, under the terms referred to above.

☐ I consent to the processing of my personal data by the entities of the Ageas Portugal Group (listed above), for purposes of sending marketing communications through the different communication channels, whether physical or digital, namely electronic notifications, letters, SMS or email, suited to my profile, under the terms referred to above and described in more detail in the various Privacy Policies available on their websites.

The Policy holder	**The Branch**

Location and date:_____,_____**of**_____**of**_____

Application Form

Médis SME Insurance

www.medis.pt

(1) Optional Outpatient Assistance cover subscription is mandatory. **(2)** Service provided by the Clínica Universitária de Navarra, available through Médis Line. **(3)** Médis pays in full all the previously approved medical expenses and, in case of hospitalisation, guarantees the Insured Person and Companion for the payment of expenses related to accommodation and travel by air (economy class), train, or car (only includes fuel expenses, tolls, and one night's accommodation for the outward journey and another for the return journey). **(4)** Barcelona Medical Centre (Spain); Deutsches Herzzentrum Berlin (Germany); Johns Hopkins Clinic (USA). **(5)** All Medical Expenses covered by this cover will only be accepted if services were rendered in the Network of Providers agreed outside the national territory. The Serious Illnesses under this coverage are listed in contractual terms. **(6)** Valid only when subscribed the optional Dental cover. **(7)** Applies only when the optional Outpatient Assistance in contracted.

The present document is a translation of the Portuguese version. In case of discrepancy between the versions, the Portuguese version shall prevail. Does not exempt consultation of the legally required pre-contractual and contractual information.

Insurance Intermediary: Banco Comercial Português, S.A. - Registered Office: Praça D. João I, nº 28, 4000-295 Porto – Share Capital Euros 3.000.000.000,00 – Single registration and TIN 501525882. Insurance agent, registered under nr. 419527602, with the Insurance and Pension Funds Supervision Authority - Registration Date: 21/01/2019. Authorisation for the brokerage distribution of the life and non-life insurance - Ocidental - Companhia Portuguesa de Seguros de Vida, S.A., Ageas Portugal - Companhia de Seguros, S.A. and Médis - Companhia Portuguesa de Seguros de Saúde, S.A. and Ageas – Sociedade Gestora de Fundos de Pensões S.A.. For information and further registration details, please consult: www.asf.com.pt. The Insurance Intermediary is not authorised to sign insurance contracts on behalf of the Insurer or receive any insurance premiums payable to the Insurer. The Insurance Intermediary does not assume liability regarding any risks covered by the insurance contract, which shall be fully assumed by the Insurer.

Insurer – Ageas Portugal, Companhia de Seguros, S.A. Head office: Praça Príncipe Perfeito 2, 1990-278 Lisboa. Tax number 503 454 109. Comercial Registry Office of Porto. Share Capital of € 7.500.000. ASF Register 1129, www.asf.com.pt

Médis: exclusive and registered brand of the products managed by Médis – Companhia Portuguesa de Seguros de Saúde, SA, insurance company, reinsurer and manager of the healthcare integrated system subjacent to the insurance through Policies issued by itself or by other insurance companies authorised by it to do so. Entity legally authorized for the conduct of the activity in the non-life insurance.