INSURED'S DECLARATION-STATEMENT

I, the undersigned, _____ (full name), representing _____ (company), Company ID _____ - Insured (lessee) under policy _____ [№/date], issued by _____ (Insurer), (referred to hereinafter as „Insurance"),

I hereby state that:

1) I provide UBB INSURANCE BROKER EAD with documents, containing personal data of an individual - the driver of the vehicle, subject of the Insurance - in line with exercising the rights of the Insured under the Insurance in order to receive insurance indemnity/an amount, for which provision of data the individual has been informed; and
2) The individual is familiar with the Privacy Statement of UBB INSURANCE BROKER EAD (information about personal data processing), published on its website and has stated his/her wish to be provided with a copy of the Statement:

(a) on paper when submitting his/her personal data, thus acknowledging its receipt and delivery to the individual (Yes ☐ No ☐);

(b) via e-mail _____, as an attached pdf file (Yes ☐ No ☐).

Date: Signature: