



## CUSTOMER NOTICE FOR THE TREATMENT OF PERSONAL DATA

Dear Sir or Madame,

Siscos, whom you gave authorization to follow your claims until the payment of reimbursements and benefits, would like to give you some information.

The Leg. Dec. 30 June 2003 n. 196 (Personal Data Protection Code) provides for the protection of personal data, and establishes that data of the interested person must be kept and utilized in transparency, with a view to defend the rights of the person involved.

This is to inform you that Siscos is in possession of some personal data about you. In compliance with art. 13 of Leg. Dec. 30 June 2003, n° 196, Siscos will register, treat and keep your personal data as follows:

- In its electronic data bases.
- To carry out all its duties with the insurance companies and brokers, until the final reimbursement of claims and benefits for the insured person and his family members.

**Rights enshrined in Art. 7** – The data subject has the right to obtain confirmation on the existence of his/her personal data; to know how they were acquired; to ask for data cancellation; to change into anonymous ones or to seal off those personal data treated violating law; the right to update, to rectify or to complete his/her data; and the right to oppose him/herself their treatment.

***Person in charge of the processing/data controller – Siscos, Via G. Parini 7 – 20121 Milan, is in charge of the data treatment. On this behalf, Siscos reserves itself the right to treat and process your personal data, should it be necessary to:***

- perform the duties prescribed by law or UE rules and regulations;
- carry out all duty necessary to assist the insured persons.

SISCOS

<b>APPLICATION FORM</b> <b>FOR REFUND OF MEDICAL EXPENSES</b> <i>Please send by e-mail at: <a href="mailto:assistenza.assicurati@siscos.org">assistenza.assicurati@siscos.org</a></i>	NGO EXPATRIATE WORKERS
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I the undersigned..... E-mail ..... address..... working in ..... with the organisation .....have received medical assistance for me / my family member..... from ...../...../..... to ...../...../..... and apply for the reimbursement of the expenses listed in the annex and accompanied with **medical diagnosis certification**.

**I hereby authorize SISCOS to see to the reimbursement procedure until the payment is confirmed, and I demand that the amount be credited to the current account below:**

<b>Holder of current account: Name:</b>										<b>Surname:</b>																			
<b>SWIFT Code (only for NON-Italian Bank account)</b>																													
<b>COUNTRY</b>		<b>CHECK DIGIT</b>		<b>BANK DETAILS</b>																									
				<b>CIN</b>				<b>ABI</b>				<b>CAB</b>				<b>C/C number</b>													

Date \_\_\_\_\_ Signature \_\_\_\_\_

*I have taken note of the statement complying with the D. Lgs. 30 June 2003 n. 196, art. 13, that I received, and I give my consent to the processing of my personal and sensitive information to SISCOS, as it is the holder of the processing; with the means and limitations of the above mentioned statement, with the only aim to carry out the assignment of assistance I gave it.*

Date \_\_\_\_\_ Signature \_\_\_\_\_

**I ENCLOSE: Consent for processing of personal data – Generali Italia, filled-in and signed**

**Do not fill this section – c/o SISCOS**

<i>Details of reimbursement claimed:</i>	<i>Local currency</i>	<i>Euro</i>
A/B) Medical expenses	.....	.....
C) Pharmaceuticals	.....	.....
D) Dental treatments	.....	.....
E) Hospitalization	.....	.....
F) Other	.....	.....
<b>Total</b>	_____	_____

EXCHANGE: ..... REIMBURSEMENT EURO: .....

Filled out by Ms. / Mr. ....  
Local currency exchange rate / 1 Euro: .....

Date	Documentation	Amount (local currency)
	<b>A) For medical consultations:</b> <ul style="list-style-type: none"><li>– Doctor’s certificate indicating the diagnosis*</li><li>– Original receipts / invoices</li></ul>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>B) For analysis, diagnosis exams, treatment materials, etc.:</b> <ul style="list-style-type: none"><li>– Medical prescriptions and outcomes</li><li>– Original receipts / invoices</li></ul>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>C) For medicines/pharmaceuticals:</b> <ul style="list-style-type: none"><li>– Medical prescriptions</li><li>– Original receipts/invoices</li></ul>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>D) For dental treatments:</b> <ul style="list-style-type: none"><li>– Dentist certificate indicating the diagnosis*</li><li>– Diagram, prescription and details of the treatments done</li><li>– Original receipts / invoices in details</li></ul>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>E) For hospitalization:</b> <ul style="list-style-type: none"><li>– Hospitalization certificate</li><li>– Hospital report / case history</li><li>– Original receipts / invoices</li></ul>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>F) Other expenses:</b>	
.....	.....	.....
.....	.....	.....
.....	.....	.....
	<b>TOTAL</b>	_____

**\* Medical certificates must always indicate the provisional or ascertained diagnosis**  
**IMPORTANT:** In case of treatments due to an **accident**, please attach a signed **statement** indicating causes and dynamic of the accident.



## **Information on the processing of personal data according to articles 13 and 14 of EU Regulation no. 679/2016 of 27 April 2016**

### **Use of data for contractual purposes**

We inform you that, in accordance with what was communicated with the information on the processing of personal data provided at the time of signing the Customer Profile, your personal data, provided by you or acquired from third parties (1) are processed by Generali Italia S.p.A. (hereinafter also the Company), as Holder, in the context of the insurance services requested or provided for, including the insurance quotes that we will prepare for you or for third parties designated by you, (i) for the proposition and conclusion of the contract insurance and related or accessory services and / or products, and to carry out the related regulatory obligations (such as for example those relating to anti-money laundering); (ii) for the execution of the contracts entered into by you, (iii) for, where appropriate, to prevent, identify and / or prosecute any insurance fraud (2); (iv) to communicate your personal data to companies that perform outsourcing services on behalf of the Company or for the execution of existing contracts. We also inform you that the processing of your data for the purposes referred to in points (i), (ii) and (iv) is necessary and functional to the provision of services by the Company and / or to the execution of existing contracts and requires your explicit consent, if not already expressed, only for the processing of the particular categories of personal data referred to in Article 9, paragraph 1, of the Regulation (including in particular data relating to health); while for the purposes referred to in letter (iii) the processing of your data is based on the legitimate interest of the Company to prevent and identify any insurance fraud and to implement correct management. We therefore inform you that for the processing as described above under (i), (ii), (iii) and (iv) the provision of data is mandatory and their failure, partial or incorrect provision may have, as a consequence, the " impossibility of carrying out the requested activities and precludes the Company from fulfilling contractual obligations as envisaged by existing contracts.

### **Rights of the interested party**

You will be able to know what your data are processed by the Company and, where the conditions apply, exercise the various rights relating to their use (right of access, rectification, updating, integration, cancellation, limitation to processing, portability, revocation of consent to the processing and to obtain a copy of their data where these are stored in countries outside the European Union, as well as to obtain an indication of the place where such data are stored or transferred) as well as to oppose for legitimate reasons a particular of theirs processing and in any case to their use for commercial purposes, in whole or in part, also as regards the use of automated methods by contacting: Generali Italia Sp. A., Via Marocchesa 14, 31021 Mogliano Veneto TV, [privacy.it@generali.com](mailto:privacy.it@generali.com) or to the Data Protection Officer (DPO), who can be contacted by e-mail at "[RPD.it@generali.com](mailto:RPD.it@generali.com)" and / or by ordinary mail at the address "RPD Generali Italia - Mogliano Veneto, Via Marocchesa 14 31021.

We also inform you that, if you find that your data is being processed that is inconsistent with the consent you have expressed, you can lodge a complaint with the Guarantor for the protection of personal data, in the manner indicated on the Guarantor's website.

### **Data retention times**

Your data may be stored for different periods depending on the purpose for which they are processed by the Company, under the privacy legislation applicable from time to time, in particular for contractual purposes, for the entire duration of the existing relationships and, under current legislation for 10 years from the moment of termination of the effectiveness of the contract or, in the event of disputes, for the limitation period provided for by the legislation for the protection of related rights, without prejudice in any case to retention periods higher required by specific sector regulations.

### **Data communication**

Your data will not be disclosed and will be processed with suitable methods and procedures, including computerized ones, by our employees, collaborators and other subjects, including external ones, designated as Data Processors and / or Data Processors or, in any case, operating as Data Controllers, who are involved in the management of existing relationships with you or who perform tasks of a technical, organizational, operational nature on our behalf, including within and outside the EU (3).

### **Transfer of data abroad**

Your data may also be disclosed, where necessary, to individuals, private or public, connected to the specific insurance relationship or to the insurance and reinsurance sector operating in countries located in the European Union or outside it (4) some of which may not to provide adequate guarantees of data protection (a complete list of countries that provide adequate guarantees of data protection is available on the website of the Guarantor for the Protection of Personal Data). In such cases, the transfer of your data will be carried out in compliance with the international regulations and agreements in force, as well as against the adoption of adequate measures (eg standard contractual clauses).

### **Changes and updates to the information**

Also in consideration of future changes that may affect the applicable privacy legislation, the Company may integrate and / or update, in whole or in part, this Information. It is understood that any changes, additions or updates will be communicated to you in compliance with current legislation, including through publication on the Company's website [www.generali.it](http://www.generali.it).



**NOTE:**

1. The Company processes the following categories of data: personal and identification data, contact data, policy data, tax data and bank account details, other personal data provided by the interested party, particular categories of personal data referred to in Article 9, paragraph 1, of the Regulation, data collected from public sources (lists, registers, public documents that can be known by anyone), data acquired from other third parties (Generali Group companies, contractors, policyholders, members of social security or welfare funds or health , commercial information and financial risk companies, external companies for market research purposes). In addition, even at the request of the Judicial Authority, the Company may process data relating to criminal convictions and offences.
2. By way of example, formulation of personalized recommendations and / or insurance proposals consistent with your insurance needs, preparation of estimates and subsequent renewals, stipulation of life, non-life or supplementary pension insurance contracts, premium collection, additional payments , switches and other activities envisaged by the contract, settlement of claims or other services, reinsurance, co-insurance, exercise and defense of the rights of the insurer, fulfilment of specific legal or contractual obligations, management and internal control, statistical activities.
3. These are subjects belonging to the "insurance chain" (eg agents, sub-agents, agency collaborators, producers, insurance brokers, banks, credit institutions, debt collection companies, securities firms, insurers, co-insurers and reinsurers, pension funds, actuaries, lawyers and fiduciary doctors, technical consultants, experts, car repair shops, roadside assistance companies, vehicle demolition centres, healthcare facilities, claims and contract settlement companies, and other affiliated service providers, etc. ), companies of the Generali Group, and other companies that perform, such as outsourcers, IT, telematics, financial, administrative, archiving, correspondence management, auditing and budget certification services, as well as companies specialized in market research and surveys on the quality of services.
4. Contracting parties, policyholders, members of social security or health funds, pledges, binding; insurers, co-insurers, reinsurers and associative / consortium bodies (ANIA, Mefop, Assoprevidenza) towards which the communication of data is functional to provide the services indicated above and to protect the rights of the insurance industry, institutional bodies and public bodies to which the data must be communicated by law.

**My privacy consents**

Having read the attached privacy policy on the processing of personal data, regarding the processing of personal data for contractual purposes, I acknowledge that for the purposes of the processing as illustrated in the privacy policy sub (i), (ii), (iii) and (iv) the provision of data is mandatory and that Generali Italia will process the same according to what is indicated in the information to fulfil the contractual obligations as required by the existing contracts.

By signing, I also authorize the processing of the particular categories of my data, including those relating to health, for the processing illustrated in the privacy policy sub (i), (ii), (iii) and (iv), as necessary the provision of the services requested or in my favour provided.

\_\_\_\_\_  
(Place and date)

\_\_\_\_\_  
(Legible Name and Surname)

\_\_\_\_\_  
(Signature)