



READ YOUR POLICY, DECLARATIONS AND ENDORSEMENTS CAREFULLY

The auto insurance contract between the named insured and the company shown on the Declarations page consists of this policy plus the Declarations page and any applicable endorsements. The Quick Reference section outlines essential information contained on the Declarations and the major parts of the policy.

The policy provides the coverages and amounts of insurance shown on the Declarations for which a premium is shown.

This auto policy is underwritten through USAA S.A., which is incorporated under the laws of Luxembourg. Its registered office is at 1, avenue du Bois, L-1251 Luxembourg, Grand-Duchy of Luxembourg, and it is registered with the Luxembourg Trade and Companies' Register.

You may contact USAA S.A. at:

Phone: 00-800-531-81110

Fax: 00-800-858-58111

USAA S.A. is authorised by the Luxembourg Minister of Finance and supervised by the Commissariat aux Assurances.

Commissariat aux Assurances
11, rue Robert Stumper
L-2557 Luxembourg
Grand-Duchy of Luxembourg
+325 22 69 11-1

Ministère des Finances
3, rue de la Congrégation
L-1352 Luxembourg
Grand-Duchy of Luxembourg
+352 247 82600

QUICK REFERENCE

Declarations

- Named Insured and Address
- Policy Period
- Operators
- Description of Vehicle(s)
- Coverages
- Amounts of Insurance and Premiums
- Endorsements

Agreement and Definitions

Page 03

Part A – Liability Coverage

Page 05

This Part does not apply.

Part B – Medical Coverage

Page 05

This Part does not apply.

Part C – Uninsured Motorists Coverage

Page 05

This Part does not apply.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

Part D – Physical Damage Coverage

Page 05

- Insuring Agreement
 - Comprehensive Coverage
 - Collision Coverage
 - Rental Reimbursement Coverage-Optional
 - Towing and Labor-Optional
- Limit of Liability
- Payment of Loss
- Customs Duty
- Loss Payable Clause
- Waiver of Collision Deductible
- Exclusions
- No Benefit to Bailee
- Other Sources of Recovery
- Appraisal

Part E – General Provision

Page 09

- Bankruptcy
- Changes
- Cohabitant
- Complaint Against Us
- Conformity to Law
- Details About Our Regulator
- Dispute Resolution
- Duties After an Accident or Loss
- Fees
- Misrepresentation
- Non-Duplication of Payment
- Notice of Ride Sharing Activity
- Our Right to Recover Payment
- Ownership
- Policy Period and Territory
- Reducing the Risk of Loss
- Rights of Third Parties
- Spouse/Registered Civil Partner Access
- Termination
- Transfer of Your Interest in this Policy
- Two or More Motor Vehicle Policies

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

AGREEMENT

In return for payment of the premium and subject to all the terms of this policy, we will provide the coverages and limits of liability for which a premium is shown on the Declarations. This USAA S.A. policy does not insure against bodily injury or property damage liability, medical payments, or uninsured motorist coverage; nor does it satisfy any compulsory liability requirements. The USAA S.A. policy is written in English.

DEFINITIONS

The words defined below are used throughout this policy. They are in **boldface** when used.

- A. **"You"** and **"your"** refer to the "named insured" shown on the Declarations and spouse or registered civil partner if a resident of the same household.
- B. **"We," "us"** and **"our"** refer to the Company providing this insurance.
- C. **"Actual cash value"** means the amount that it would cost, at the time of **loss**, to buy a comparable vehicle. As applied to **your covered auto**, a comparable vehicle is one of the same make, model, model year, body type, and options with substantially similar mileage and physical condition.
- D. **"Auto business"** means the business of altering, customizing, leasing, parking, repairing, road testing, delivering, selling, servicing, towing, repossessing or storing vehicles.
- E. **"Cohabitant"** means one unmarried adult residing primarily in **your** household with whom **you** share a mutually committed personal and financial relationship intended to last indefinitely for the purpose of a domestic life. Both persons must be 18 years of age or older and may not be related to each other by blood. Neither may be married to another person or be a cohabitant or partner by civil union or domestic partnership with any other person.
- F. **"Collision"** means the impact with an object and includes upset of a vehicle. **Loss** caused by the following is covered under Comprehensive Coverage and is not considered **collision**: fire; missiles or falling objects; hail, water or flood; malicious mischief or vandalism; theft or larceny; riot or civil commotion; explosion or earthquake; contact with bird or animal; windstorm; or breakage of window glass. If breakage of window glass is caused by a **collision**, **you** may elect to have it considered a **loss** caused by **collision**.
- G. **"Custom equipment"** means equipment, furnishings and parts permanently installed in or upon **your covered auto**, other than:
1. Original manufacturer equipment, furnishings or parts;
 2. Any replacement of original manufacturer equipment, furnishings or parts with other equipment, furnishings or parts of like kind and quality;
 3. Equipment, furnishings or parts designed to assist persons with disabilities;
 4. Anti-theft devices and devices intended to monitor or record driving activity; and
 5. Tires of a substantially similar size as those installed by the manufacturer.
- H. **"Driving contest or challenge"** includes but is not limited to:
1. A competition against other people, vehicles or time;
 2. An activity that challenges the speed or handling characteristics of a vehicle or improves or demonstrates driving skills, provided the activity occurs on a track or course that is closed from non-participants; or
 3. Driving on the Nürburgring Nordschleife.
- I. **"Family member"** means a person related to **you** by blood, marriage, registered civil partnership or adoption who resides primarily in **your** household. This includes a ward or foster child. A **family member** includes the following when residing primarily in **your** household: a ward, foster child, **cohabitant** and **your cohabitant's** dependent children.
- J. **"Fungi"** means any type or form of **fungi**, including mold or mildew, and includes any mycotoxins, spores, scents or byproducts produced or released by **fungi**.
- K. **"Loss"** means direct and accidental damage to the operational safety, function, or appearance of or theft of, **your covered auto** or personal property contained in **your covered auto**. **Loss** includes a total loss, but does not include any damage other than the cost to **repair** or replace. **Loss** does not include any loss-of-use, or diminution in value that would remain after **repair** or replacement of the damaged or stolen property.
- L. **"Miscellaneous vehicle"** means the following motorized vehicles: motor home, golf cart, snowmobile, all-terrain vehicle or dune buggy.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

- M. **"Motorcycle"** means a two- or three-wheeled motor vehicle that is subject to motor vehicle licensing in the location where the **motorcycle** is principally garaged.
- N. **"Motor vehicle"** means:
1. A private passenger auto, pickup or **van**;
 2. A **motorcycle** that is not used in any business or occupation but only if a **motorcycle** is shown on the current Declarations.
- O. **"Newly acquired vehicle."**
1. **"Newly acquired vehicle"** means a **motor vehicle** or **trailer**, not insured under another policy, that is acquired by **you** or any **family member** during the policy period.
 2. **We** will automatically provide for the **newly acquired vehicle** the broadest coverages as are provided for any vehicle shown on the Declarations. If **your** policy does not provide Comprehensive Coverage or Collision Coverage, **we** will automatically provide these coverages for the **newly acquired vehicle** subject to a \$500 deductible for each loss.
 3. Any automatic provision of coverage under paragraph N.2 will apply for up to 30 days after the date **you** or any **family member** becomes the owner of the **newly acquired vehicle**. If **you** wish to continue coverage for the **newly acquired vehicle** beyond this 30-day period, **you** must request it during this 30-day period, and **we** must agree to provide the coverage **you** request for this vehicle. If **you** request coverage after this 30-day period, any coverage that **we** agree to provide will be effective at the date and time of **your** request unless **we** agree to an earlier date.
- P. **"Nonowned vehicle."**
1. **"Nonowned vehicle"** means any private passenger auto, pickup, **van**, **miscellaneous vehicle**, or **trailer** not owned by, or furnished or available for the **regular use** of, **you** or a **family member**. This applies only when the vehicle is in the custody of or being operated by **you** or a **family member**.
 2. A **nonowned vehicle** does not include any of the following vehicles used in any business or occupation other than farming or ranching:
 - a. A pickup,
 - b. A **van** or
 - c. A **motorcycle**.
- Q. **"Occupying"** means in, on, getting into or out of.
- R. **"Regular use"** for purposes of this policy means having care, custody or control of a vehicle for more than 60 days, regardless of whether the use is continuous during the 60 days.
- S. **"Repair."**
1. **"Repair"** means restoring the damaged property to its pre-**loss** operational safety, function and appearance. This may include the replacement of component parts.
 2. **"Repair"** does not require:
 - a. A return to the pre-**loss** market value of the property,
 - b. Restoration, alteration or replacement of undamaged property, unless such is needed for the operational safety of the vehicle or
 - c. Rekeying of locks following theft or misplacement of keys.
- T. **"Ride sharing activity"** means use of **your covered auto** to provide prearranged transportation of persons or property in conjunction with a **transportation network company**.
- U. **"Trailer"** means a vehicle designed to be pulled by a **motor vehicle**. It also means a farm wagon or implement while towed by such vehicles.
- V. **"Transportation network company"** means a person or entity that provides prearranged transportation services for compensation using an online-enabled application or platform to connect clients with drivers who use their personal vehicles to provide the requested transportation. Examples of a transportation network company include but are not limited to Uber and Lyft.
- W. **"Van"** means a four-wheeled land motor vehicle of the van type with a rated load capacity of not more than 2,000 pounds.
- X. **"Your covered auto"** means:

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

1. Any vehicle shown on the Declarations.
2. Any **newly acquired vehicle**.
3. Any **trailer you own**.

PART A - LIABILITY COVERAGE

Neither Bodily Injury Liability Coverage nor Property Damage Liability coverage is afforded by this policy.

PART B - MEDICAL COVERAGE

No Medical Coverage is afforded by this policy.

PART C - UNINSURED MOTORISTS COVERAGE (referred to as UM Coverage)

Neither Uninsured Motorists Coverage nor Underinsured Motorists Coverage is afforded by this policy.

PART D - PHYSICAL DAMAGE COVERAGE

INSURING AGREEMENT

A. Comprehensive Coverage (excluding **collision**).

1. Physical damage. **We** will pay for **loss** caused by other than **collision to your covered auto**, including its equipment, and personal property contained in **your covered auto**, minus any applicable deductible shown on the Declarations. The deductible will be waived for **loss** to window glass that can be repaired rather than replaced. In cases where the repair proves unsuccessful and the window glass must be replaced, the full amount of the deductible, if any, must be paid.
2. Transportation expenses. **We** will also pay:
 - a. The reasonable amount for transportation expenses incurred by **you** or any **family member** but no more than the cost of renting an Economy Class vehicle as defined under Rental Reimbursement Coverage. This applies only in the event of a total theft of **your covered auto**. **We** will pay only transportation expenses incurred during the period beginning 48 hours after the theft and ending when **your covered auto** is returned to use or, if not recovered or not **repairable**, up to seven days after **we** have made a settlement offer.
 - b. If Rental Reimbursement Coverage is afforded, the vehicle class for transportation expenses is the vehicle class shown on the Declarations for Rental Reimbursement for that vehicle.

B. Collision Coverage. **We** will pay for **loss** caused by **collision to your covered auto**, including its equipment, and personal property contained in **your covered auto**, minus any applicable deductible shown on the Declarations.

C. Rental Reimbursement Coverage (for **loss** other than total theft). This is an optional coverage for a fee.

1. **We** will reimburse **you** for expenses **you** or any **family member** incurs to rent a substitute for **your covered auto**. This coverage applies only if:
 - a. **Your covered auto** is withdrawn from use due to a **loss** other than a total theft to that vehicle; and
 - b. The **loss** is covered under Comprehensive Coverage or caused by **collision**, and the cause of **loss** is not otherwise excluded under Part D - Physical Damage of this policy.
2. **We** will reimburse **you** only for that period of time reasonably required to **repair** or replace **your covered auto**. If **we** determine **your covered auto** is a total loss, the rental period will end no later than seven days after **we** have made a settlement offer.

D. Towing and Labor. This is an optional coverage for a fee. **We** will pay the reasonable costs **you** or any **family member** incurs for the following services each time **your covered auto** is disabled:

1. Jumpstarting.
2. Locksmith services to gain entry to **your covered auto**. This does not include the rekeying of locks following theft or misplacement of keys.
3. Towing or transporting to the nearest place where necessary repairs can be made during regular business hours if the vehicle will not run or is stranded on or immediately next to a public road.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

4. Winching.
5. Delivery of gas or oil to, or a change of tire on a disabled vehicle. However, **we** do not pay for the cost of these items.

LIMIT OF LIABILITY

- A. Total loss to **your covered auto**. **Our** limit of liability under Comprehensive Coverage and Collision Coverage is the **actual cash value** of the vehicle, inclusive of any **custom equipment**, and the cost to transfer or replace any equipment, furnishings or parts designed to assist persons with disabilities.
1. The maximum amount **we** will include for **loss** to **custom equipment** in or on **your covered auto** is \$5,000.
 2. **We** will declare **your covered auto** to be a total loss if in **our** judgment the cost to **repair** it would be greater than its **actual cash value** minus its salvage value after the **loss**.
- B. Other than a total loss to **your covered auto**:
1. **Our** limit of liability under Comprehensive Coverage and Collision Coverage is the amount necessary to **repair** the **loss** based on **our** estimate or an estimate that **we** approve if submitted by **you** or a third party. Upon request, **we** will identify at least one facility that is willing and able to complete the **repair** for the amount of the estimate.
 2. **Our** estimate may specify used, rebuilt, remanufactured or non-Original Equipment Manufacturer (non-OEM) parts.
 3. **You** may request that damaged parts be replaced with new Original Equipment Manufacturer (OEM) parts. However, **you** will be responsible for any cost difference between the parts included in **our** estimate and the new OEM parts used in the **repair**.
 4. **We** will not take a deduction for depreciation. **We** will take a deduction if prior damage has not been **repaired**. Prior damage does not include wear and tear.
- C. Personal property in **your covered auto**. The limits of liability described below are separate from the limits available for a **loss** to **your covered auto**.
1. **Our** limit of liability under Comprehensive Coverage and Collision Coverage is the lesser of:
 - a. The amount necessary to replace the damaged or stolen property, or
 - b. \$250.
 2. **We** will not take a deduction for depreciation.
- D. Under Rental Reimbursement Coverage, **our** maximum limit of liability is the reasonable amount necessary to reimburse **you** for expenses incurred to rent a vehicle in the applicable class shown on the Declarations. For purposes of this coverage:
1. Economy Class means "mini," small or compact 2- and 4-door cars that are not considered sports or luxury vehicles and are not the estate/station wagon type.
 2. Standard Class means standard and full-size 2- and 4-door cars that are not considered sports or luxury vehicles and are not the estate/station wagon type.
 3. Multipassenger/Truck Class means:
 - a. Sports, convertible and luxury cars with an engine size of no more than 2.5 liters;
 - b. Estate/station wagons;
 - c. Minivans;
 - d. Mid-size cargo and passenger **vans**;
 - e. Pickup trucks;
 - f. "Mini," small and midsize sport utility vehicles (SUVs) that are not considered luxury SUVs; and
 - g. Any private passenger vehicle equipped to assist persons with disabilities (when available).
- E. Under Towing and Labor, **our** limit of liability is the reasonable price for the covered service.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

PAYMENT OF LOSS

We may pay for **loss** in money, or **we** may **repair** or replace the damaged or stolen property. **We** may return any stolen property to **you** or to the address shown on the Declarations at **our** expense. If **we** return stolen property, **we** will pay for any damage resulting from the theft. **We** may keep all or part of the damaged or stolen property and pay **you** an agreed or appraised value for it. **We** cannot be required to assume the ownership of damaged property. **We** may settle a claim either with **you** or with the owner of the property.

CUSTOMS DUTY

In addition to **our** limit of liability, **we** will pay any legally valid judgment for a customs duty charged against **you** by any governmental authority because **you** were unable to export **your covered auto** that was not available for export due to a **loss**. **We** will pay this customs duty judgment only if **we** also provide Comprehensive Coverage or Collision Coverage, as applicable, for the **loss**.

You must give **us** immediate notice in writing with complete details about the customs charges. **We** may deal directly with the customs authorities and in **your** name defend against such a levy.

LOSS PAYABLE CLAUSE

Loss or damage under this policy will be paid, as interest may appear, to the named insured and the loss payee shown on the Declarations. This insurance with respect to the interest of the loss payee will not become invalid because of **your** fraudulent acts or omissions unless the **loss** results from **your** conversion, secretion or embezzlement of **your covered auto**. **We** may cancel the policy as permitted by policy terms, and the cancellation will terminate this agreement as to the loss payee's interest. **We** will give the same advance notice of cancellation to the loss payee as **we** give to the named insured shown on the Declarations. **We** may send notices to the loss payee either by mail or by electronic means. However, if the loss payee requests in writing that **we** not send notices, including a notice of cancellation, **we** will abide by that request. When **we** pay the loss payee, **we** will be subrogated to the loss payee's rights of recovery to the extent of payment.

WAIVER OF COLLISION DEDUCTIBLE

We will not apply the deductible to **loss** caused by **collision** with another vehicle if all these conditions are met:

1. The **loss** to **your covered auto** is greater than the deductible amount, and
2. The owner and driver of the other vehicle are identified, and
3. The owner or driver of the other vehicle has a liability policy covering the **loss**, and
4. The driver of **your covered auto** is not legally responsible in any way for causing or contributing to the **loss**.

EXCLUSIONS

We will not pay for:

1. **Loss** to **your covered auto** that occurs while it is being used to carry persons for a fee. This exclusion (1) does not apply to:
 - a. A share-the-expense car pool or
 - b. **Your covered auto** used for volunteer work when reimbursement is limited to mileage expenses.
2. Damage due and confined to:
 - a. Road damage to tires,
 - b. Wear and tear,
 - c. Freezing, or
 - d. Mechanical or electrical breakdown or failure, including such damage resulting from negligent servicing or repair of **your covered auto** or its equipment. **We** will pay for ensuing damage only to the extent the damage occurs outside the major component (such as transmission/transaxle, electrical system, engine including cooling and lubrication thereof, air conditioning, computer, suspension, braking, drive assembly, and steering) in which the initial mechanical or electrical breakdown or failure occurs.

This exclusion (2) does not apply if the damage results from the total theft of **your covered auto**, and it does not apply to Towing and Labor
3. **Loss** or abandonment due to or as a consequence of war, insurrection, revolution, nuclear reaction, radioactive contamination or discharge of a nuclear weapon (even if accidental). This exclusion (3) does not apply to loss to **your covered auto** that is insured for Comprehensive Coverage or Collision Coverage under this policy if **your covered auto** is:

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

- a. Subject to United States of America Federal Act 31 USC 3721 as amended and supplemented (Military Personnel and Civilian Employee Claims Act), and
- b. Within the policy territory shown in Part E - General Provisions of this policy.

In lieu of the policy deductibles, a \$2,000 deductible applies to **loss to your covered auto** once per period of sustained hostility, unless the **loss** occurs during U.S. government authorized shipment, in which case a \$20,000 deductible applies. However, no one will be entitled to duplicate payments for the same elements of **loss**.

4. **Loss** to a camper body or **trailer** owned by **you** or any **family member** that is not shown on the Declarations. This exclusion (4) does not apply to a camper body or **trailer you** or any **family member** acquires during the policy period and asks **us** to insure within 30 days after **you** or any **family member** becomes the owner.
5. **Loss** to any **nonowned vehicle** when used by **you** or any **family member** without a reasonable belief that **you** or that **family member** is entitled to do so.
6. **Loss** to equipment designed or used to evade or avoid the enforcement of motor vehicle laws.
7. **Loss** to any **nonowned vehicle** arising out of its use by **you** or any **family member** while employed or otherwise engaged in **auto business** operations.
8. **Loss** to **your covered auto** while it is rented or leased to others, or shared as part of a personal vehicle sharing program.
9. **Loss** to any vehicle while it is being operated in or in practice for any **driving contest or challenge**.
10. **Loss** resulting from:
 - a. The acquisition of a stolen vehicle,
 - b. Any legal or governmental action to return a vehicle to its legal owner, or
 - c. Any confiscation or seizure of a vehicle by governmental authorities.

This exclusion (10) does not apply to innocent purchasers of stolen vehicles for value under circumstances that would not cause a reasonable person to be suspicious of the sales transaction or the validity of the title.

11. **Loss** resulting from use in any illicit or prohibited trade or transportation.
12. Any **loss** arising out of any act committed:
 - a. By or at the direction of **you** or any **family member**, and
 - b. With the intent to cause a **loss**.
13. **Loss** caused by **fungi**, wet or dry rot, or bacteria. This means the presence, growth, proliferation, spread or any activity of **fungi**, wet or dry rot, or bacteria. This exclusion (13) does not apply to damage directly resulting from a **loss** covered under Comprehensive Coverage or Collision Coverage.
14. Loss to your **covered auto** that occurs while it is being used in **ride sharing activity**. This exclusion (14) applies during the time the **covered person** is logged on to the **transportation network company's** online-enabled application or platform and available to accept a passenger or delivery assignment, whether or not a passenger or delivery assignment has been accepted. When a passenger or delivery assignment has been accepted, coverage is excluded while the passenger or property to be delivered is **occupying your covered auto**. However, this exclusion (14) does not apply to a share-the-expense car pool.

NO BENEFIT TO BAILEE

This insurance shall not directly or indirectly benefit any carrier or other bailee for hire.

OTHER SOURCES OF RECOVERY

If other sources of recovery also cover the **loss**, **we** will pay only **our** share of the **loss**. **Our** share is the proportion that **our** limit of liability under this policy bears to the total of all applicable limits. However, any insurance **we** provide with respect to a **nonowned vehicle** will be excess over any other collectible source of recovery including, but not limited to:

1. Any coverage provided by the owner of the **nonowned vehicle**.
2. Any other applicable physical damage insurance.

Any other source of recovery applicable to the **loss**.

This provision does not apply to Towing and Labor

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

APPRAISAL

If **we** and **you** do not agree on the amount of **loss**, either may demand an appraisal. In this event, each party will select a competent appraiser. The two appraisers will select an umpire. The appraisers will state separately the **actual cash value** and the amount of **loss**. If they fail to agree, they will submit their differences to the umpire. A decision agreed to by any two will be binding. Each party will pay its chosen appraiser and share the expenses of the umpire equally. Neither **we** nor **you** waive any rights under this policy by agreeing to an appraisal.

PART E - GENERAL PROVISIONS

BANKRUPTCY

Bankruptcy or insolvency of the **covered person** as defined in this policy shall not relieve **us** of any obligations under this policy.

CHANGES

- A. The premium is based on information **we** have received from **you** and other sources. **You** agree to cooperate with **us** in determining if this information is correct and complete.
- B. With **your** agreement, **we** will make changes to **your** policy effective the date of change in risk exposure.
1. Change in exposure means the occurrence of an event listed in paragraphs B.1.a through B.1.h or in paragraph E below, or a similar event that may increase or decrease the policy premium. **You** agree to give **us** notice of any exposure change as soon as is reasonably possible. Changes that may result in a premium adjustment include, but are not limited to, the following:
 - a. Change in location where any vehicle is garaged.
 - b. Change in description, equipment, purchase date, registration, cost, usage, miles driven annually or operators of any vehicle.
 - c. Replacement or addition of any vehicle. A replacement or additional vehicle is a **newly acquired vehicle**.
 - d. Deletion of a vehicle. The named insured may request that a vehicle shown on the Declarations be deleted from this policy. The effective date of this change cannot be earlier than the date of the named insured's request unless **we** agree to an earlier date.
 - e. Change in date of birth, marital status, driver's license information or driving record of any operator.
 - f. Addition or deletion of an operator.
 - g. Change, addition or deletion of any coverage or limits.
 - h. Change in ownership. If **you** sell **your covered auto** by normal sale or compulsory auction, **you** must notify **us** promptly of the name and address of the purchaser. This does not apply if **you** provide proof that the vehicle is no longer registered to **you** or any **family member**.
 2. If **we** are notified of any change in risk exposure, **we** will request **your** consent to the policy adjustment. Failure to consent within 30 days of **our** request may result in termination of **your** policy.
- C. **We** will make any calculations or adjustments of **your** premium using the applicable rules, rates and forms as of the effective date of the change.
- D. If **we** make a change that broadens coverage under this edition of **our** policy without additional premium charge, that change will automatically apply to **your** insurance as of the date **we** implement that change in **your** location. This paragraph does not apply to changes implemented with a revision that includes both broadenings and restrictions in coverage. Otherwise, this policy includes all the agreements between **you** and **us**. Its terms may not be changed or waived except by endorsement issued by **us**.
- E. Deployment.
1. If, because of **your** active-duty deployment in one of the military services of the United States, **you** have reduced the coverage on **your covered auto** and placed the vehicle in storage, then, upon **your** return from the deployment, **we** will reinstate the coverage that was on the vehicle prior to the deployment-caused reduction beginning on the date the vehicle is removed from storage.
 2. Any reinstatement of coverage under paragraph E.1 will apply for up to 60 days after the date **you** returned from deployment. If **you** wish to continue the reinstated coverage beyond the 60-day period, **you** must request it during the 60-day period. If **you** request reinstated coverage after this 60-day period, any coverage **we** agree to provide will be effective at the date and time of **your** request unless **we** agree to an earlier date.
 3. **You** must pay an additional premium as set out in Part E - General Provisions, Changes, paragraph B.1.g for the reinstated coverage.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

COHABITANT

Coverage under this policy as a **cohabitant** does not grant membership or associate membership or imply eligibility for membership or associate membership.

COMPLAINT AGAINST US

A. If **you** are not satisfied with **our** service or with **our** handling of a claim, **you** may contact us at:

USAA S.A.
1, avenue du Bois
L-1251 Luxembourg
Grand-Duchy of Luxembourg
Phone: 00-800-531-81110 (toll-free from a landline)

We will acknowledge **your** complaint and attempt to resolve the situation as quickly as possible. When warranted, **we** will provide **you** with a suggested resolution within eight days from receipt of **your** complaint. **We** will inform **you** if **your** complaint cannot be resolved within 8 days, and communicate a suggested resolution within 30 days after the initial notification.

B. If, after receiving **our** written response, **you** remain dissatisfied, **you** have the right to file **your** complaint with one of the following two authorities:

1. The Médiateur en Assurances (Insurance Ombudsman) at:

Médiateur en Assurances
Association des Compagnies d'Assurances et de Réassurances (ACA)
12, rue Erasmus
L-1468 Luxembourg
Phone: +352 442 1441
Fax: +352 44 02 89
Email: mediateur@aca.lu

The Insurance Ombudsman provides a free mediation service for unresolved disputes between insurance companies and consumers. Further information (in French) is available at <https://www.aca.lu/en/insurance-obudsman>.

2. The Commissariat aux Assurances (CAA) at:

Commissariat aux Assurances (CAA)
11, rue Robert Stumper
L-2557 Luxembourg
Grand-Duchy of Luxembourg
+325 22 69 11-1
Fax: +352 22 69 10
Email: caa@caa.lu

USAA S.A. is regulated by the CAA in Luxembourg. The CAA will contact us for additional details about the complaint and an explanation for our decision. Further information (in French) is available at <http://www.caa.lu>.

C. Further complaint information specific to services obtained online or via email is available on the Online Dispute Resolution platform at <http://ec.europa.eu/consumers/odr/>.

CONFORMITY TO LAW

If any of the terms of this policy conflict with local law, local law will apply.

DETAILS ABOUT OUR REGULATORS

You may contact the supervisory authority responsible for **us**. USAA S.A is authorised by the Luxembourg Minister of Finance and supervised by the Commissariat aux Assurances:

Commissariat aux Assurances
11, rue Robert Stumper
L-2557 Luxembourg
Grand-Duchy of Luxembourg
+325 22 69 11-1

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

Ministère des Finances
3, rue de la Congrégation
L-1352 Luxembourg
Grand-Duchy of Luxembourg
+352 247 82600

DISPUTE RESOLUTION

It is hereby expressly agreed that the Courts competent for the settlement of disputes that may arise between **us** and **you** with regard to this policy are the Courts of the Grand Duchy of Luxembourg, unless **we** agree otherwise.

You may introduce a case before Court in respect of this Contract in Luxembourg or in **your** Country of residence. Where in this contract **we** refer to **your** Country of residence **we** mean the Country where the risk is located. The Law governing the General Terms and Conditions is the Law where the risk is located. **We** will always file a case before the Courts of **your** Country of residence as per the applicable European and/or the UK Consumer Code Rules.

Cases introduced before Courts in respect of claims may only be introduced before Courts in:

- Luxembourg
- **Your** country of residence at the time when the accident took place which is also the Country where the risk is located.
- The country where the accident took place where different from **your** country of residence provided the Insurance Certificate, the Green Card and/or the General Terms and Conditions clearly provide coverage for the said risks in the said country.

Court decisions in respect of the indemnification of claims will only be enforceable against the Company where rendered in the above detailed Countries and provided **your** Contract covers such risks. **You** may seek additional coverage to mitigate such risks.

DUTIES AFTER AN ACCIDENT OR LOSS

We may not be required to provide coverage under this policy if there has not been full compliance with the following duties and **our** ability to investigate or settle the claim has been prejudiced:

- A. **We** must be notified promptly of how, when and where an accident or **loss** happened.
1. Notice should also include the names and addresses of any injured persons and any witnesses.
 2. **You** may notify **us** by calling Claims at 00-800-531-82220.
- B. A person or entity seeking any coverage or payment of any benefit will be treated fairly and must:
1. Cooperate with **us** in the investigation, settlement, or defense of any claim or suit.
 2. Promptly send **us** copies of any notices or legal papers received in connection with a suit, accident or loss.
 3. Authorize **us** to obtain medical reports and other pertinent records.
 4. Submit a proof of loss when required by **us**.
 5. Promptly notify the police if a hit-and-run driver is involved.
 6. Take reasonable steps after **loss** to protect **your covered auto** and its equipment from further **loss**. **We** will pay reasonable expenses incurred to do this.
 7. Permit **us** to inspect and appraise the damaged property before its **repair** or disposal.

FEES

We will send notice of premium payment required and the date on which the payment is due. If **your** payment is returned, **we** will charge a fee of \$15.

MISREPRESENTATION

We do not provide any coverage under this policy for any person who has knowingly concealed or misrepresented any material fact or circumstance relating to the claim:

1. At the time application was made, or
2. At any time during the policy period, or
3. In connection with the presentation or settlement of a claim.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

Where a misrepresentation is identified, then **we** are able to cancel or void this policy of insurance.

NONDUPLICATION OF PAYMENT

When a claim or part of a claim is payable under more than one provision of this policy, **we** will pay the claim only once under this policy.

NOTICE OF RIDE SHARING ACTIVITY

You have a duty to notify **us** if any **covered person** is participating in **ride sharing activity**.

OUR RIGHT TO RECOVER PAYMENT

- A. If **we** make a payment under this policy and the person to or for whom payment was made has a right to recover damages from another, **we** will be subrogated to that right. The person to or for whom payment was made shall do whatever is necessary to enable **us** to exercise **our** rights and shall do nothing after loss to prejudice them. However, **our** rights in this paragraph (A) do not apply against any person using **your covered auto** with a reasonable belief that that person is entitled to do so.
- B. If **we** make a payment under this policy and the person to or for whom payment was made recovers damages from another, the person to or for whom payment was made shall hold in trust for **us** the proceeds of the recovery and reimburse **us** to the extent of **our** payment.
- C. If any insured person recovers from the party at fault and **we** share in the recovery, **we** will pay **our** share of the legal expenses. **Our** share is that percent of the legal expenses that the amount **we** recover bears to the total recovery. This paragraph (C) does not apply to any amounts recovered or recoverable by **us** from any other insurer under any inter-insurer arbitration agreement.
- D. If **we** make payment for a claim under this policy and **you** or any **family member** has knowingly concealed or misrepresented any material fact or circumstance relating to this insurance, then **you** shall reimburse **us** to the extent of **our** payment.

OWNERSHIP

For purposes of this policy, a vehicle is deemed to be owned by a person if leased under a written agreement to that person for a continuous period of at least six months.

POLICY PERIOD AND TERRITORY

- A. This policy applies only to accidents and losses that occur during the policy period as shown on the Declarations and within the policy territory.
- B. The policy territory is:
 1. Countries that are member states of the European Union (EU) and the European Free Trade Association (EFTA).
 2. The countries of Albania, Andorra, Bosnia and Herzegovina, Montenegro, Former Yugoslav Republic of Macedonia, Serbia and Turkey.
 3. The United Kingdom, the British overseas territory of Gibraltar and the Crown Dependencies of the United Kingdom of Great Britain.
 4. The United States of America, its territories or possessions, Puerto Rico and Canada, subject to the following conditions:
 - a. Coverage under this policy will extend for up to 30 days after the effective date of the policy while **you** are preparing to release **your covered auto** for shipment to Europe.
 - b. Coverage will extend for up to 30 days from the date **your covered auto** is released from a port in the United States, its territories or possessions, Puerto Rico or Canada after its shipment from any location in paragraphs B.1, B.2 or B.3 above.
 5. The policy territory includes transportation of **your covered auto** between any ports of these locations.

REDUCING THE RISK OF LOSS

We may occasionally provide **you** with products or services that assist **you** in preventing or reducing the risk of loss, and **we** may provide an incentive for **your** use of these items.

RIGHTS OF THIRD PARTIES

As used in this Part, third party means anyone other than the named insured.

- A. Subject to the exclusions, conditions and other provisions of this policy, third party intended and incidental beneficiaries have the rights to coverage under the policy as set out in the Insuring Agreement of Part D if the third party is the owner of a **nonowned vehicle** that is covered under Part D.
- B. In defending a claim brought by any third party, **we** are entitled to rely on:

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

1. Defenses and rights of set-off that would be available had the claim been brought by the named insured, and
2. Defenses and rights of set-off and any counterclaims that would be available if the third party were a party to the policy.

We may not set off premium owed by the named insured against a claim brought by a third party, other than the spouse, registered civil partner or a **family member** of the named insured.

- C. **We** reserve the power to rescind, cancel, nonrenew, or vary the term, coverage and provisions of this policy without the consent of, or notice to, any third party beneficiary of the policy, except as otherwise provided in the policy.
- D. The named insured has the power to cancel the policy or vary the term or coverage of the policy without the consent of, or notice to, any third party beneficiary of the policy, except as otherwise provided in the policy.
- E. There are no third party rights under this policy that may be assigned to others.

SPOUSE/REGISTERED CIVIL PARTNER ACCESS

- A. The named insured and **we** agree that the resident spouse or registered civil partner will have access to the same information available to the named insured, including all information regarding the named insured as a "data subject" under local privacy laws, and may initiate the same transactions as the named insured.
- B. The named insured may notify **us** that he/she no longer agrees that the resident spouse or registered civil partner may have access to the named insured's information, and **we** will not permit the resident spouse or registered civil partner to access that information.

TERMINATION

- A. Cancellation. This policy may be canceled during the policy period as follows:
 1. **You** have the right to cancel this policy at any time if it does not meet **your** needs, but the effective date of cancellation cannot be earlier than the date of the request unless **we** agree to an earlier date.
 2. **We** may cancel this policy by sending notice to the named insured shown on the Declarations. This cancellation notice may be delivered to the named insured, mailed by postal mail to the most recent address **you** provided to **us** or sent electronically if **we** have **your** consent and agreement on file to receive documents electronically. In any event, **we** will give:
 - a. At least 10 days' notice if
 - (1) Cancellation is for nonpayment of premium, or
 - (2) Notice is sent during the first 60 days this policy is in effect and this is not a renewal policy, or
 - b. At least 20 days' notice in all other cases.
 3. After this policy is in effect for 60 days or if this is a renewal policy, **we** will cancel only:
 - a. For nonpayment of premium, or
 - b. For fraud or material misrepresentation affecting the policy or the presentation of a claim, or
 - c. For a violation of the terms or conditions of the policy, or
 - d. If **your** driver's license or that of any driver who either lives with **you** or customarily uses **your covered auto** has been suspended or revoked, or
 - e. For failure to consent to a policy adjustment when the risk exposure has changed as required in the Changes section of this Part E – General Provisions, or
 - f. For any other reason not prohibited by law.
- B. Nonrenewal. If **we** decide not to renew this policy, **we** will send notice to the named insured shown on the Declarations. This notice may be delivered to the named insured, mailed by postal mail to the most recent address **you** provided to **us** or sent electronically if **we** have **your** consent and agreement on file to receive documents electronically. In any event, notice will be sent at least two months before the end of the policy period.
- C. Automatic Termination.
 1. If **we** offer to renew and **you** or **your** representative do not accept, this policy will automatically terminate at the end of the current policy period. Failure to pay the required renewal premium when due will mean that **you** have not accepted **our** offer.
 2. If **you** obtain other insurance on **your covered auto**, any similar insurance provided by this policy will terminate as to that vehicle on the effective date of the other insurance.

FRANCE AUTO POLICY

for Policy #: EUSA 033984720 7101

D. Other Termination Provisions.

1. Proof of mailing or electronic transmission of any notice will be sufficient proof of notice.
2. If this policy is canceled, the named insured shown on the Declarations may be entitled to a premium refund. The premium refund, if any, will be computed pro rata. However, making or offering to make the refund is not a condition of cancellation.
3. The effective date of cancellation stated in the notice will become the end of the policy period.

TRANSFER OF YOUR INTEREST IN THIS POLICY

Your rights and duties under this policy may not be assigned without **our** written consent. However, if the named insured shown on the Declarations dies, **we** will provide coverage until the end of the policy period for:

1. The surviving spouse or registered civil partner if resident in the same household at the time of death. Coverage applies to the spouse or registered civil partner as if the named insured shown on the Declarations, and
2. The legal representative of the deceased person as if the named insured shown on the Declarations. This applies only with respect to the representative's legal responsibility to maintain or use **your covered auto**.

TWO OR MORE MOTOR VEHICLE POLICIES

If this policy and any other **motor vehicle** insurance policy **we** issued to **you** apply to the same accident, the maximum limit of **our** liability under all the policies will not exceed the highest applicable limit of liability under any one policy.