





PAYING BY CREDIT CARD – Information sheet

1. Who may apply for credit card payments to Medlife?

- → The policyholder to pay his insurance premiums.
- → If the policyholder uses not his own credit card, he needs written authorization by the cardholder to apply for credit card payment to Medlife.

2. What do I need to apply for premium payments to Medlife by credit card?

→ A valid credit card from VISA or MASTERCARD (your own or somebody else's, who authorizes you to use it).

3. Which kind of payments can be effected via credit card?

- → Renewal premiums.
- → Please ALWAYS choose the currency of your policy as a currency of payment in the form as enclosed.

4. How can I apply for credit card payments?

- → First of all, the policyholder has to fill in the application form (his own and the cardholder's personal data and the purpose of payment) and then send it back to us by fax (Fax number: +357 22 66 17 28) or scanned by email (email: office@medlife.net) signed by himself and the cardholder. Copies of the policyholder's and the cardholder's passports have to be enclosed.
- → Your credit card will then be debited with the amount indicated in your application.
- → The payment will then be credited to the policy account.

5. Where can I get the fax application form from?

- → If no application form is attached to this information sheet, you may refer to the download area of our homepage: www.medlife.net
- → On request we will send you the application form by email or by fax.

6. What will the additional cost be, if I pay by credit card?

- → The service fee is 2,1% as before. Therefore, to calculate the right amount of transfer 2,1% must be added to the amount due to be paid.
- → The service fee includes expenses like bank charges, visa fees and other costs suffered from Medlife Insurance Ltd until the premium amount is received and credited to the policy account. Overpayments will be credited to your policy account.

7. How secure is this way of premium payment?

→ Utmost security is guaranteed by the following precautions:

Cardholder has to agree by signing the application form

All your data is treated in strict confidence by Medlife Insurance Ltd.

8. What happens if somebody abuses my credit card?

- → After receipt of his credit card account statement, the cardholder has the right to claim refund of payments that have been improperly collected from his card.
- → The backcrediting of such payments will be authorized by the credit card company and effected according to their terms of business.

9. Where do I find the CVV – number?

→ The CVV-code can be found on the backside of your credit card, it is the 3-digit code on the utmost right side:



© Medlife Insurance Limited V:24.10.2023







Medlife Premium Payment by VISA or MASTERCARD Credit Card Fax ++357- 22 66 17 28 or email: office@medlife.net

I, the policyholder, authorize Medlife Insurance Ltd. to collect premium payment for the following life insurance policies from my VISA or MASTERCARD account and credit them to my policies via either USD premium account No.015541028274 OR EUR premium account No 015506000235 of Medlife Insurance Ltd. at Bank of Cyprus in my corresponding contract currency (All charges and fees shall be born by the card holder):

Policyholder's personal data (copy of passport to be attached):			
Surname: Date of birth: First name: House number: ZIP Code: Fax / Tel: Email:			
Cardholder's data (copy of passport to be attached):			
Name of cardholder:			
Type of credit card: VISA, MASTERCARD			
Card number (16-digit No.):			
CVV number (3 – digit No): (please find more information on point 9 of info sheet)			
Valid until:/ (MM/YY)			
Cardholder´s signature			
Currency of payment (=contract currency of your life insurance):			
Currency of payment (=contract currency of	your life insurance):	
Currency of payment (·	your life insurance): EUR	
	USD □	EUR olicy by checking proper cu	
(Please choose USD for US	USD □	EUR olicy by checking proper cu	
(Please choose USD for US Attention: If wrong box is ch	USD □	EUR olicy by checking proper cu	
(Please choose USD for US Attention: If wrong box is ch Purpose of payment:	USD □ ED policy and EUR for EUR posen any additional charges	EUR olicy by checking proper cu arising shall be borne by ca	ard holder)
(Please choose USD for US Attention: If wrong box is ch Purpose of payment:	USD □ ED policy and EUR for EUR posen any additional charges	EUR olicy by checking proper cu arising shall be borne by ca	ard holder)
(Please choose USD for US Attention: If wrong box is ch Purpose of payment:	D policy and EUR for EUR posen any additional charges Name of policyholder Total amount of premiums + 2,1% service fees	EUR olicy by checking proper cu arising shall be borne by ca	ard holder)
(Please choose USD for US Attention: If wrong box is cher Purpose of payment: Voucher No./Policy No.	D policy and EUR for EUR posen any additional charges Name of policyholder Total amount of premiums + 2,1% service fees Total amount to be paid	EUR olicy by checking proper cu arising shall be borne by ca Amount of premium	Due date
(Please choose USD for US Attention: If wrong box is ch Purpose of payment:	D policy and EUR for EUR prosen any additional charges Name of policyholder Total amount of premiums + 2,1% service fees Total amount to be paid to the paid by the cardholder. By supplying for the above mentioned policies plus fees rourself, or otherwise authorized by the card ect transfer of insurance premiums by the prosent and the prosent a	EUR olicy by checking proper cu arising shall be borne by ca Amount of premium g your credit card details, you authorize M from your credit card account. Further, by holder's signature to debit his credit card accolicyholder. By signing this Agreement you	Due date Edilfe Insurance submitting your count. This way

© Medlife Insurance Limited V:24.10.2023