

WITHDRAWAL FORM (ARTICLE 2 PAR.5 OF LAW 2496/1997)

I hereby object to the contents of the insurance policy number _____,
which you have sent to me, as it differs from the insurance application I submitted to you in the following respects

1. _____
2. _____
3. _____
4. _____

Consequently, the contract between us is null and void from the outset, as it has never been concluded, and the above-mentioned insurance policy that you have given me has no validity.

Place _____

Date _____

Yours faithfully