

**F2- FORMULAR EXONERARE SI DECLARATIE DE  
CONSINTAMANT****- DOSAR DE DAUNA -**

**(asigurare de accident, de viata, de sanatate, calatorii  
in strainatate, asigurare de raspundere civila, asigurare  
casco, etc)**

Subsemnatul (a) \_\_\_\_\_ , domiciliat(a)  
In \_\_\_\_\_  
identificat cu \_\_\_\_\_ seria \_\_\_\_\_ nr. \_\_\_\_\_  
eliberat de \_\_\_\_\_  
la data de \_\_\_\_\_  
CNP \_\_\_\_\_ ,  
prin prezenta imi exprim in mod specific consimtamantul  
pentru urmatoarele:

GrECo Romania GmbH Viena Sucursala Bucuresti are  
acordul meu expres si este pe deplin imputernicita de  
catre mine sa receptioneze si sa prelucreze documente  
si informatii referitoare la datele mele personale (CNP,  
nume, adresa, data de nastere etc), incluzand datele  
despre starea de sanatate, datele socio-profesionale si  
orice alte date necesare in vederea indeplinirii unor  
operatiuni si scopuri legitime legate de desfasurarea  
activitatii de intermediere in asigurari.

Inteleg pe deplin si sunt intru totul de acord ca prezenta  
este valabila atat pentru perioada dinaintea semnarii  
cererii de asigurare, cat si pentru intreaga durata a  
asigurarii, precum si dupa incetarea asigurarii pana la  
data finalizarii unui dosar de dauna, si nu poate fi folosita  
decat in contextul analizei medicale a unui dosar de  
dauna deschis in numele meu.

Inteleg pe deplin si sunt intru totul de acord ca informatiile  
si datele furnizate vor fi prelucrate de persoane autorizate  
in acest scop, in conformitate cu prevederile  
Regulamentului UE nr 679/ 2016 privind protectia  
datelor.

Prelucrarea datelor din prezentul formular a fost inregistrata  
in Registrul de Evidenta a Prelucrarilor de Date cu  
Caracter Personal al Comisiei de Protectie a Datelor din  
Austria sub nr. DVR.4003944.

Prezenta declaratie de consimtamant reprezinta acordul  
expres dat de catre subsemnatul in calitate de asigurat,  
are valoare de autorizare si constituie exonerare de  
responsabilitate.

**F2- CLEARANCE FORM and CONSENT DECLARATION \*)****- CLAIM FILE-**

**(accident, life, health, travel, general liability, motor  
insurance, etc.)**

I, the undersigned, \_\_\_\_\_ ,  
domiciled at \_\_\_\_\_  
possessing the ID \_\_\_\_\_ serial \_\_\_\_\_ no \_\_\_\_\_  
issued by \_\_\_\_\_  
on the date of \_\_\_\_\_  
Personal identity number \_\_\_\_\_  
I hereby give my explicit consent to:

GrECo Romania GmbH Vienna Branch Bucharest has my  
explicit consent and is fully empowered by me to receive  
and process documents and information regarding my  
personal data (Personal identity number, name, address,  
birth date, etc.), including the state of health, socio-  
professional data and any other data necessary to perform  
legitimate operations and purposes related to the conduct  
of insurance mediation activity.

I fully understand and fully agree that this document is  
valid for both the period before signing the insurance  
claim request form and for the whole insurance duration,  
as well as after the termination of the insurance until the  
date of claim file settlement, and can be used only in  
respect of the medical analysis of claim file opened on my  
behalf.

I fully understand and fully agree that the information  
and data provided will be processed by persons  
authorized to do so in accordance with the provisions of  
EU Data Protection Regulation 679/2016.

The processing of the data according to this form was  
entered in the Personal Data Processing Register of the  
Austrian Data Protection Commission under no.  
DVR.4003944.

This declaration of consent is the express consent given by  
the undersigned as an insured person, has the value of an  
authorization and constitutes a disclaimer of liability.



Declaratia GrECO Romania GmbH Viena Sucursala Bucuresti cu privire la protectia datelor poate fi consultata pe website-ul companiei: <http://www.greco.services/ro/default.html>

Accept prezentul formular pentru a indica faptul ca:

- am citit si am inteles cele de mai sus, si
- consimt la prelucrarea si utilizarea datelor mele cu caracter personal, in conformitate cu cele indicate in prezentul formular, si
- imi dau consimtamantul explicit pentru transferul datelor procesate catre terte parti, in special catre societatile de asigurari, si
- am luat la cunostinta ca pot sa-mi revoc oricand consimtamantul.

Versiunea in limba romana a acestui formular prevaleaza.

Nume si prenume: \_\_\_\_\_

Semnătură : \_\_\_\_\_

Data: \_\_\_\_\_

(Pentru minori semnatura persoanei care ii au in intretinere/reprezentantului legal.)

The GrECO Romania GmbH Vienna Bucharest Branch' data protection declaration can be read on the company's website: <http://www.greco.services/en/default.html>

I accept this form to indicate that:

- I read and understand the above, and
- I consent to the processing and use of my personal data in accordance with what is stated in this form, and
- I give my explicit consent to the transfer of the data processed to third parties, especially to insurance companies, and
- I acknowledge that I can revoke this consent at any time.

\*) The Romanian version of this form prevails.

Name and surname: \_\_\_\_\_

Signature: \_\_\_\_\_

Data: \_\_\_\_\_

(For minors: the signature of the person on whom the minors are dependants/ legal representative)