

# CERTIFICATE OF LIABILITY INSURANCE

**INSURER:** Allianz - Slovenská poisťovňa, a. s.  
Dostojevského rad 4  
815 74 Bratislava, Slovakia

Registered in the Corporate registry of District Court  
Bratislava I, section Sa, file no. 196/B  
ID No.: 00 151 700  
Tax reg. No.: 2020374862  
VAT reg. No.: SK2020374862



Space Trans s.r.o.  
Bzovicka 20  
851 07 Bratislava

**INSURED:** Space Trans s.r.o.  
Bzovicka 20  
851 07 Bratislava  
ID No.: 46563601

This certificate is issued as a matter of information only. This certificate does not amend, extend or alter the coverage afforded by the policy below.

This is to certify that the policy listed below has been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policy described herein is subject to all the terms, limitations, exclusions and conditions of such policy. The limits shown may have been reduced by paid claims.

Policy number: 511084924  
Policy effective date (DD.MM.YYYY): 20.08.2015  
Issue Date (DD.MM.YYYY): 21.08.2015  
This certificate is valid from 20.08.2015 to 19.08.2016

## COVERAGES

### Carriers Legal Liability for Carriage of Goods by Road

**Coverage territory:** Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Great Britain, Greece, Hungary, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland

**Plate No of truck/float:** BL696HZ, BL417FY, BL962KE, BL225GY

**Trailer/semi trailer owned, operated by, leased to or by the Insured or declared in the policy:**

**Limit of any one occurrence and in the aggregate during the policy period:**  
EUR 20 000,00 and EUR 20 000,00

### Carriers Legal Liability for Carriage of Goods by Road - Cabotage - NOT INSURED

**Coverage territory:**

**Plate No of truck/float:**

**Trailer/semi trailer owned, operated by, leased to or by the Insured or declared in the policy:**

**Limit of any one occurrence and in the aggregate during the policy period:**  
EUR 0,00 and EUR 0,00



SIGNATURE AND STAMP OF THE INSURER