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Rules on the Collection and Exchange of Motor Insurance Information

قواعد جمع وتبادل المعلومات التأمينية للمركبات
These instructions were issued based on the powers vested in SAMA under Law on Supervision of Cooperative Insurance Companies issued by royal decree No. (M/32) dated 2/6/1424 and its Implementing Regulations issued by Minister of Finance’s decision No. 1/596 dated 1/3/1425.

Section One
Introduction

1. The following terms and phrases, wherever mentioned herein, shall have the meanings assigned thereto unless the context otherwise requires:

- SAMA: Saudi Arabian Monetary Authority.
- Law: Cooperative Insurance Companies Control Law.
- Rules: Rules on the Collection and Exchange of Motor Insurance Information.
- Insurance Information: The information provided in the Insurance Record as specified in Article 9 of these Rules.
- Insurance Information Owner: The insurance applicant, insured, driver or third party when filing an insurance claim under an insurance policy.
- Insurance Record: A report issued by the Company containing the Insurance Information of the Insurance Information Owner.

- Company: The company approved by SAMA to collect, maintain and exchange Insurance Information.

- Negative Insurance Information: Any Insurance Information that is against the interest of the Insurance Information Owner.

- Negative Decision: Any decision against the interest of the Insurance Information Owner taken by the Member based on the Insurance Record.

- Member: The insurance company or insurance service provider that has a Membership Agreement with the Company to exchange Insurance Information.

2. The objectives of these Rules are to:

a) Regulate the process of collecting, maintaining and exchanging of the Insurance Information necessary to enhance the ability of insurance and/or reinsurance companies in the Kingdom to analyze insurance risks associated with motor insurance.

b) Maintain confidentiality of Insurance Information.

c) Improve the quality of Insurance Information in the insurance sector.

d) Reduce insurance fraud.
Section Two

General Provisions

3. Insurance Information shall not be collected or exchanged, and Insurance Record shall not be established, without a prior written consent from the Insurance Information Owner.

4. No natural or legal person shall provide the services of collecting and maintaining Insurance Information for exchange purposes without obtaining SAMA’s prior approval.

5. Insurance Information shall not be maintained, transferred or exchanged outside the Kingdom of Saudi Arabia, and traffic accidents data shall not be stored before obtaining the approval of the competent authority.

6. The Company and the Member shall not use or benefit from Insurance Information in any manner other than the objectives set forth in these Rules.

7. The Company and Member shall maintain the confidentiality of Insurance Information, and shall use and exchange such Insurance Information in accordance with the controls set forth in these Rules.

8. The staff of the Company or Member may not divulge any Insurance Information known by reason of their job or maintain such information after leaving the service.
Section Three

Insurance Record Contents

9. The Insurance Record shall contain all or any of the following information of the Insurance Information Owner:

a) Natural person’s name, ID number and national address.

b) Legal person’s name, commercial register and address.

c) Data about motor insurance policies coverage of the Insurance Information Owner, whether valid or expired.

d) Data about settled and unsettled motor claims.

e) Data about denied motor claims and reasons of denial.

f) Data about motors deemed as total loss.

g) Data about insurance claims recovery.

h) Data about traffic violations, after obtaining the approval of the competent authority.
i) Data about traffic accidents, after obtaining the approval of the competent authority.

j) Data about motor damage appraisals.

k) Claims found by the competent court to be fraudulent.

Section Four

Company Obligations

10. The Company shall take all measures and precautions necessary to ensure the soundness, validity, accuracy and completeness of Insurance Information obtained in accordance with the provisions of these Rules. The Company shall also obtain Insurance Information only from Members, Insurance Information Owner after obtaining his/her written consent, or official competent authorities after obtaining their approval and in accordance with the Company's approved standards.

11. The Company shall obtain SAMA’s non-objection before enter into a Membership Agreement with any insurance companies or insurance service providers it desires to exchange Insurance Information therewith.

12. The Company shall keep updated records of all Members, their contracts and agreements and durations and terms thereof.
13. The Company shall take all measures necessary to, and put in place operating guidelines to, protect Insurance Information from unauthorized or unlawful access, use, modification or disclosure.

14. The Company shall ensure that any disputed Insurance Information that is undecided upon is stated in the Insurance Record as “Disputed Insurance Information.”

15. The Company may issue an Insurance Record only upon a request of:

   a) A Member after obtaining a prior written consent from the Insurance Information Owner.

   b) An official national dispute settlement authority.

   c) SAMA.

   d) The Insurance Information Owner.

16. The company, prior to issuing any Insurance Record, shall:

   a) Verify the identity and eligibility of the party requesting the Insurance Record and the purpose of the request.

   b) Obtain a pledge from the Member to use the Insurance Information only for the reasons specified in the request.
17. The Company must keep sufficient evidence to prove the existence of a legal purpose for each Insurance Record request for a period not less than 5 years from the request date.

18. The Company must have controls in place to protect Insurance Information, including:
   a) Registering, maintaining, matching, collecting, processing and classifying Insurance Information in a proper manner for easy reference.
   b) Protecting Insurance Information from loss, including through backup systems, a crisis recovery plan and a business continuity plan.
   c) Protecting Insurance Information from access, use, modification or disclosure for purposes other than those permitted by these Rules or other laws, regulations and relevant instructions.
   d) Regularly reviewing the Company’s staff confidentiality controls.
   e) Regularly reviewing patterns of use of information systems in order to detect and investigate any unusual patterns of use.
   f) Keeping, for a period not less than 5 years, records of cases of logging in, modification and validation of the Insurance Information database, including previous query records and incident records that involve confirmed or suspected violations.
g) Providing the necessary information protection knowledge to the Member's employees authorized to transfer and transmit Insurance Information.

19. The Company shall, at least annually, report to SAMA on the efficiency and effectiveness of computer and information security systems used in the Company. SAMA may also request any other data or information it deems necessary.

20. The Company must have the technologies necessary to collect Insurance Information from Members and receive Insurance Record requests therefrom.

21. The Company must obtain an adequate insurance coverage from an insurer licensed to operate in the Kingdom to cover any professional liability resulting from collecting, maintaining or exchanging Insurance Information.

22. The Company may not sell, rent or assign its databases without a prior written consent from SAMA. If the Company ceased to exist for any reason, the ownership of its databases shall be transferred to SAMA or any other entity determined by SAMA.

23. The Company shall establish a department to handle complaints and set procedural guidelines to handle complaints from Insurance Information Owners. The guidelines must contain complaint settlement procedures, including:

a) Full understanding of the complaint settlement procedures by the employee responsible of contacting the Insurance Information Owner.

b) Full and immediate investigation of any complaint.
c) Keeping a record for written complaints and documenting the actions taken thereupon.

d) Clarifying complaint submission methods and available communication channels.

e) Settling complaints within a maximum period of 10 working days of the receipt thereof.

24. The Company shall set procedural guidelines to educate customers about Insurance Information and shall publish the same upon approval of SAMA.

Section Five
Membership Agreement

25. The Membership Agreement shall define the technological and technical requirements to exchange Insurance Information and the standards and regulatory requirements to be followed by the parties.

26. The Member shall designate a certain number of employees, according to the Membership Agreement, authorized to transmit Insurance Information to the Company or request Insurance Record therefrom. The Member shall notify the Company with the employees’ names and shall immediately notify it with any change or update to their authorizations.

27. Without prejudice to other provisions of these Rules, the Members may not withhold or delay the requested Insurance Information behind the period agreed upon in the Membership Agreement.
Section six
Member Obligations

28. The Member may not assign the powers granted thereto under the Membership Agreement without a prior written consent from SAMA.

29. The Member shall obtain a written consent from the Insurance Information Owner before providing the Company with his/her Insurance Information or requesting his/her Insurance Record from the Company.

30. The Member may not provide the Company with any flawed or unfully verified Insurance Information, and shall be responsible for any mistakes in the Insurance Information provided to the Company.

31. The Member shall proactively provide and update Insurance Information to the Company, and may not withhold requested Insurance Information from the Company.

32. The Member may modify any Insurance Information previously sent to the Company only by requesting the Company to do so with the justifications and documents supporting the request.

33. The Member may not provide the Company with any Disputed Insurance Information without indicating its status as disputed.
34. The Member may not take a decision based on any Disputed Insurance Information as long as the Insurance Record indicates that it is disputed.

35. The Member shall provide the necessary ongoing training and qualification to the persons authorized to provide the Company with Insurance Information or enquire about Insurance Records.

36. The Member shall, in accordance with the standards defined in the Membership Agreement, use technologies compatible with the ones operated by the Company and any updates thereof to minimize information loss.

**Section Seven**

**Rights of Insurance Information Owner**

37. The Insurance Information Owner has the right to know the Insurance Information contained in his/her Insurance Record, and may request a copy of his/her Insurance Record from the Company without any fee.

38. The Insurance Information Owner has the right to know the name and address of the authorized Members and official entities that enquired about his/her Insurance Record.

39. The Insurance Information Owner has the right to object, and request correction to, any false information contained in his/her Insurance Record.

24. It is prohibited to act on disputed insurance information unless the insurance record indicates that it is disputed.

25. The Member must provide the necessary ongoing training and qualification to the persons authorized to provide the Company with insurance information or enquire about insurance records.

26. The Member must, in accordance with the standards defined in the membership agreement, use technologies compatible with the ones operated by the company and any updates thereof to minimize information loss.

**Section Seven**

**الفصل السابع**

**حقوق صاحب المعلومات التأمينية**

27. يحق لصاحب المعلومات التأمينية معرفة المعلومات التأمينية التي تحتوي على سجله التأميني، ويمكنه طلب نسخة من سجله التأميني من الشركة دون مقابل مال.

28. يحق لصاحب المعلومات التأمينية معرفة اسم وعنوان الأعضاء والجهات الرسمية المخولة التي قامت بالاستعلام عن سجله التأميني.

29. يحق لصاحب المعلومات التأمينية تقديم اعتراض إذا حوى سجله التأميني معلومات خاطئة وطلب تصحيحها.
Section Eight

Disputing Insurance Information

41. The Insurance Information Owner may, at any time, dispute any Insurance Information contained in the Insurance Record for being incorrect, unupdated or incomplete, and the Company should investigate the dispute without any fees and within a period not exceeding 15 working days of the dispute filing date.

42. Investigating objections shall be in accordance with the following procedures and timeframes:

   a) The Company shall, within two working days from the receipt of the objection, notify the Member which issued the disputed Insurance Information and provide the Member with all insurance information related to the dispute, including the information and documents provided by the Owner. The Member shall

   - Reasons for the Negative Decision.
   - Company’s contact information and a copy of his/her Insurance Record.

40. If the Member took a Negative Decision against the Insurance Information Owner due, in whole or in part, to the Insurance Information contained in his/her Insurance Record, the Member shall, within three working days from the date of the Negative Decision, notify the Insurance Information Owner upon his/her request with the following information:

   a) Reasons for the Negative Decision.
   b) Company’s contact information and a copy of his/her Insurance Record.
respond within three working days. If the Member fails to respond within the specified period, this shall be deemed as evidence proving the dispute is valid.

b) The Company shall make a decision within seven working days from the receipt of the Member’s response or the expiry of the period specified above.

c) If the investigation concluded that the objection was, in whole or in part, valid or that the information cannot be verified, the Company shall, within two working days of the decision date, delete, or modify, as the case may be, the Disputed Insurance Information contained in the Insurance Record.

43. The Company shall, within 10 working days from the objection filing date, notify the Insurance Information Owner of the procedures followed to investigate the Dispute Insurance Information.

44. The Company shall, within five working days from the decision date, notify the Insurance Information Owner of the investigation results, and the notification shall include:

a) A copy of the Insurance Record after modification, if the objection found to be valid.

b) A summary of the Rights of Insurance Information Owner set forth in these Rules, in case the dispute found to be invalid.
45. The Company shall state the dispute in each Insurance Record issued during the investigation. If the investigation did not lead to the settlement of the dispute, the Company, upon the Owner’s request, shall:

a) State the dispute in any subsequent Insurance Record that contains that particular Disputed Insurance Information.

b) Include in the Insurance Record a clear summary of the Disputed Insurance Information from the Owner’s point of view.

c) Send a written notice of the objection to any entity, identified by the Owner, that has obtained his/her Insurance Record during the year preceding the filing of the dispute, if the Insurance Record included that particular Disputed Insurance Information.

46. Upon modification or deletion of any disputed Insurance Information in the Insurance Record, the Company shall notify in writing any entity, identified by the Owner, that has obtained his/her insurance record during the year preceding the filing of the dispute.

47. The Insurance Information Owner may, if the objection was rejected, file to the competent judicial authority to consider and settle his/her dispute against the Insurance Information issuer.

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Section Nine

Control and Supervision

48. For the purposes of the implementation of the provisions of these Rules, SAMA may require the Company to provide it with any data or information and may as well conduct inspection.

49. Without prejudice to the responsibility of the authorized staff of the Company or the Member, the Company and the Member shall be responsible for their employees' violations of the provisions of these Rules.

50. Upon discovery of any violations of the provisions of these Rules, SAMA may take one or more of the following actions:

a) Notifying the Company or Member, as the case may be, in writing and request it to mend its irregularities within a specified period from the notice date.

b) If the Company or Member, as the case may be, fails to mend its irregularities within the period specified in SAMA's notice, SAMA may suspend the Company or Member from exchanging Insurance Information or revoke its approval.

c) Taking any other legal action that is commensurate with the severity of the violation.