

Your Group Personal Accident, Sickness and Business Travel Policy

**Please keep this document safe and
refer to it if you need to make a claim.**

If you need this document in an alternative
format, please speak to your insurance adviser.

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Inside the front cover you will find your:

Policy Schedule

Important Information

Statement of Fact



The Contract of Insurance

The contract of insurance between you and us consists of the following elements, which must be read together:

- ü your policy wording;
- ü the information contained on your risk presentation and Statement of Fact document issued by us;
- ü the policy schedule;
- ü any notice issued by us at renewal;
- ü any endorsement to your policy; and
- ü the information under the heading "Important Information" which we give you when you take out or renew your policy.

In return for You having paid or agreed to pay the premium, We will provide the cover set out in this policy, to the extent of and subject to the terms contained in or endorsed on this policy.

Important

This policy is a legal contract. You must tell Us about any material circumstances which affect Your insurance and which have occurred either since the policy started or since the last renewal date.

A circumstance is material if it would influence Our judgement in determining whether to provide the cover and, if so, on what terms. If You are not sure whether a circumstance is material ask Your insurance adviser. If You fail to tell Us it could affect the extent of cover provided under the policy.

You should keep a written record (including copies of letters) of any information You give Your insurance adviser when You renew this policy.

Breach of Term

We agree that where there has been a breach of any term (express or implied) which would otherwise result in Us automatically being discharged from any liability, then such a breach shall result in any liability We might have under this policy being suspended. Such a suspension will apply only from the date and time at which the breach occurred and up until the date and time at which the breach is remedied. This means that We will have no liability in respect of any loss occurring, or attributable to something happening, during the period of suspension.

Terms not relevant to the actual loss

Where there has been non-compliance with any term (express or implied) of this policy, other than a term that defines the risk as a whole, and compliance with such term would tend to reduce the risk of:

- ß loss of a particular kind, and/or
- ß loss at a particular location, and/or
- ß loss at a particular time,

then We agree that We may not rely on the non-compliance to exclude, limit or discharge Our liability under this policy if You show that non-compliance with the term could not have increased the risk of the loss which actually occurred in the circumstances in which it occurred.



Risks situated within the UK and other countries excluding the EEA are underwritten by Aviva Insurance Limited. Registered in Scotland, No. 2116. Registered Office: Pitheavlis, Perth PH2 0NH. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority and our firm's reference number is 202153.

Risks situated within the EEA are underwritten by Aviva Insurance Ireland Designated Activity Company. Aviva Insurance Ireland Designated Activity Company, trading as Aviva, is regulated by the Central Bank of Ireland. Our firm's reference number is No. C171485. A private company limited by shares. Registered in Ireland, No. 605769. Registered Office: Cherrywood Business Park, Dublin, Ireland D18 W2P5. Registered UK Branch Address: 80 Fenchurch Street, London, EC3M 4AE. UK Branch authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority (FCA reference No. 827591) and limited regulation by the Prudential Regulation Authority. Details about the extent of our regulation by the Prudential Regulation Authority are available from us on request.

Introduction

Welcome to Aviva. We are committed to providing a first-class service. Aviva has the experience and longevity of a company who can trace its roots back to the establishment of the Hand in Hand Fire & Life Insurance Society in London in 1696.

This is your Group Personal Accident, Sickness and Business Travel policy which sets out your insurance protection in detail.

Your premium has been calculated on the basis of the extent of cover you have selected which is specified in The Schedule, the information you have provided and the declaration you have made. Please read the policy and The Schedule carefully to ensure that the cover meets your requirements, and the details on The Schedule are correct.

Please contact your insurance adviser if you have any questions or if you wish to make adjustments. Your insurance adviser's details are:

CREDENT COMMERCIAL INSURANCE LTD
100 BOWEN COURT
SAINT ASAPH BUSINESS PARK
SAINT ASAPH
DENBIGHSHIRE, LL17 0JE

Choice of Law

The appropriate law as set out below will apply unless you and the insurer agree otherwise.

- The law applying in that part of the UK, the Channel Islands or the Isle of Man in which you normally live or (if applicable) the first named policyholder normally lives, or
- In the case of a business, the law applying in that part of the UK, the Channel Islands or the Isle of Man where it has its principal place of business, or
- Should neither of the above be applicable, the law of England and Wales will apply.

Use of Language

All communications relating to this contract will be in English.



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Cover

We will pay the amount shown in The Schedule to You, for Accidental Bodily Injury to an Insured Person occurring during the Period of Insurance which, within 24 months of the date of the Accident, solely directly and independently of any other cause results in any of the benefits listed below

- (1) Death
- (2) Capital Benefits
- (3) Temporary Total Disablement
- (4) Temporary Partial Disablement.

Amount Payable

The amount payable to You in respect of any Insured Person shall be the amount as stated in The Schedule for that category of Insured Person.

Clauses

These clauses apply and are stated in The Schedule

Accidental Death of, or Capital Benefit for, Visitors

We will pay You a benefit, in the event that a third party visits Your premises during the Operative Time of Cover, in an authorised business capacity, and sustains Accidental Bodily Injury that, had the visitor been a Business Partner, Director or Employee, would have resulted in a valid death or Capital Benefits claim. The amounts We will pay are stated in The Schedule.

Animal Attack Benefit

We will pay for cosmetic surgery in the event that the Insured Person is subject to an Animal Attack and the Insured Person sustains Accidental Bodily Injury and scarring which results in a valid Capital Benefits claim. The maximum We will pay any one claim is stated in The Schedule.

Catastrophe

In the event that a single Accident during the Period of Insurance results in payment of a death benefit under this policy for five or more Business Partners, Directors or Employees of The Policyholder, We will pay You an additional maximum total amount as stated in The Schedule.

Childcare Expenses

In the event of a claim being paid for Capital Benefits, We will pay You on behalf of the Insured Person for up to a maximum of 104 weeks for necessary childcare expenses incurred during the recovery/rehabilitation process. The maximum We will pay per week is stated in The Schedule.

Coma Benefit

In the event that an Insured Person sustains Accidental Bodily Injury during the Operative Time of Cover which results in a continuous unconscious state, We will pay You on behalf of the Insured Person, an additional sum for each complete day of continuous unconsciousness up to a maximum of 730 days. The maximum We will pay per day is stated in The Schedule.

Commuting Expenses

In the event that an Insured Person sustains Accidental Bodily Injury during the Operative Time of Cover, which results in a payment of Capital Benefits or Temporary Total Disablement or Temporary Partial Disablement, We will pay You on behalf of the Insured Person for any reasonable costs of a taxi or chauffeur or other additional costs incurred to transport the Insured Person to and from their normal place of residence and their usual place of work. The amounts We will pay are stated in The Schedule.

Corporate Event

In the event that a person not insured under any category of the Group Personal Accident section of this insurance attends a Corporate Event, and their attendance is agreed by You, and sustains Accidental Bodily Injury resulting in death or a Capital Benefits loss the amounts We will pay are stated in The Schedule.

Cosmetic Surgery

In the event an Insured Person has a valid claim under Capital Benefits and the benefit amount is £50,000 or more, We will pay for the reasonable costs incurred for cosmetic reconstructive treatment (other than for injury as a result of surgical procedure) as recommended by the treating Qualified Medical Practitioner if incurred within 104 weeks of the Accident.

The maximum We will pay any one claim is stated in The Schedule.

We will not pay this benefit in addition to the Third Degree Burns benefit and Facial Disfigurement benefit.

Damage to Personal Property

If, during the Operative Time of Cover, an Insured Person sustains damage to their personal property as a result of unprovoked assault causing Accidental Bodily Injury, We will pay You the cost of repairing or replacing such personal property. The maximum We will pay any one claim is stated in The Schedule.

Disappearance

If an Insured Person has been missing for a period of 180 consecutive days and there is sufficient evidence to support the conclusion that death has been caused by Accidental Bodily Injury, such Insured Person will be presumed to have died. However, You will repay any benefit if such Insured Person is found to have been alive or is found alive.

Executor Expenses

In the event that an Insured Person sustains Accidental Bodily Injury following an Accident which results in death, We will, on production of an interim death certificate, pay the necessary costs incurred as a direct consequence of the death of the Insured Person which require immediate payment by the executor to the estate of the Insured Person. The maximum We will pay any one claim is stated in The Schedule.

Facial Disfigurement

In the event that an Insured Person suffers an Accidental Bodily Injury which, within two years is the sole cause of permanent facial disfigurement with visible scar tissue of at least one centimetre in length in the area from the hairline to and including the lower jaw and ears, the amounts We will pay are stated in The Schedule.

The benefit will not be paid in addition to Third Degree Burns benefit, Cosmetic Surgery benefit or Animal Attack benefit.

Fracture Benefit

In the event the Insured Person sustains Accidental Bodily Injury and directly as a result, the Insured Person fractures one or more of the bones listed in The Schedule and does not result in a valid Capital Benefits or Temporary Total Disablement or Temporary Partial Disablement claim, the amounts We will pay are stated in The Schedule.

We will pay a fracture benefit only once during the lifetime of this section if the Insured Person is diagnosed with osteoporosis prior to or as a result of the Accident that results in a valid claim under this section.

Funeral Expenses

In the event of the Accidental death of the Insured Person during the Operative Time of Cover and the payment of a death benefit under this section, We will pay the Insured Person's estate for the reasonable costs of a funeral, subject to this not being included in any claim under the Medical and Emergency Travel Expenses cover under the Business Travel section.

The maximum We will pay any one claim is stated in The Schedule.

Home and Workplace Alteration Expenses

In the event that an Insured Person sustains Paraplegia, Hemiplegia, Triplegia or Quadriplegia following Accidental Bodily Injury, We will pay You on behalf of the Insured Person 80% of the costs for the reasonable expenses incurred to make physical changes necessary to the Insured Person's normal place of residence required while living with the permanent disablement. The maximum We will pay any one claim is stated in The Schedule.

In the event that an Insured Person sustains Loss of Limbs, Loss of Sight, Loss of Speech, Loss of Hearing or Permanent Total Disablement following Accidental Bodily Injury, We will pay You on behalf of the Insured Person for the reasonable expenses incurred to make reasonable adjustments necessary to the Insured Person's normal place of work to cater for the physical changes required while living with the permanent disablement. The maximum We will pay any one claim is stated in The Schedule.

Hospitalisation

In the event that an Insured Person is admitted as a Hospital in-patient, as a result of Accidental Bodily Injury occurring during the Operative Time of Cover, We will pay You on behalf of the Insured Person up to the maximum number of days stated in The Schedule the subject to this not being included in any claim under the Medical and Emergency Travel Expenses cover, if a Business Travel section has been purchased.

The maximum We will pay any one claim is stated in The Schedule.

Independent Financial Advice

In the event an Insured Person sustains death or Permanent Disablement from Accidental Bodily Injury, We will pay You on behalf of the Insured Person's Partner or the Insured Person for the fees charged by an Independent Financial Consultant who is authorised and regulated by the Financial Conduct Authority, to provide the Insured Person's legal representatives with professional financial advice.

The maximum We will pay any one claim is stated in The Schedule.

Lifesaver

In the event that a person other than an Insured Person attempts to save the life of an Insured Person, and in so doing sustains Accidental Bodily Injury that results in Death or Permanent Total Disablement, We will at Your request pay a benefit to such person (or to their legal representatives in the event of their death) up to a maximum amount per incident.

The amounts We will pay are stated in The Schedule.

Medical Expenses

In the event of an Insured Person sustaining Accidental Bodily Injury We will pay You on their behalf for the cost of any incurred ambulance charges or medical expenses as an inpatient in a Hospital or nursing home.

The maximum We will pay any one claim is stated in The Schedule.

Medical Expenses following Workplace Assault

In the event of an Insured Person sustaining Accidental Bodily Injury from unprovoked assault in their place of work while carrying out their usual occupational duties, We will pay You for the cost of medical expenses incurred.

The maximum We will pay any one claim is stated in The Schedule.

Outpatient Travel Expenses

In the event that an Insured Person sustains Accidental Bodily Injury which results in them being treated in Hospital as an outpatient, We will pay You on their behalf for any reasonable costs of a taxi or chauffeur or any additional travel costs to transport the Insured Person to and from their usual place of work or normal place of residence and Hospital, for a maximum of 26 weeks from the date of the first claim.

The amounts We will pay are stated in The Schedule.

Partner Training Expenses

In the event of an Insured Person sustaining Accidental Bodily Injury resulting in death or Permanent Total Disablement, We will pay You for the costs of training the Partner of the Insured Person for an occupation or retraining for an alternative occupation up to a maximum of 26 weeks.

The maximum We will pay any one claim is stated in The Schedule.

Prosthesis Cover

In the event of Accidental Bodily Injury being sustained by an Insured Person that results in a valid claim for Loss of Limb and the benefit amount is £50,000 or more, We will pay You on behalf of the Insured Person for the costs of providing a prosthesis recommended by the treating Qualified Medical Practitioner.

The maximum We will pay any one claim is stated in The Schedule.

Psychological Assistance

In the event of Accidental Bodily Injury being sustained by an Insured Person that results in a valid claim for Permanent Total Disablement or Permanent Partial Disablement, We will pay You for the cost of professional psychological counselling treatment for the Accidental Bodily Injury provided that such treatment is started within 12 months of the date of the Accident and it is prescribed by the treating Qualified Medical Practitioner.

The maximum We will pay any one claim is stated in The Schedule.

Relocation Expenses

In the event of Accidental Bodily Injury being sustained by an Insured Person that results in a valid claim for Permanent Total Disablement, Loss of Limb(s) or Loss of Sight in both eyes, We will pay for necessary expenses incurred for stamp duty payments, solicitors' and estate agents' fees and removal costs necessitated as a direct result of the Insured Person having to relocate from their current address.

The maximum We will pay any one claim is stated in The Schedule.

Third Degree Burns Benefit

In the event of the Insured Person sustaining third degree burns resulting from Accidental Bodily Injury, the amounts We will pay are stated in The Schedule.

The benefit will not be paid in addition to a Facial Disfigurement benefit or Cosmetic Surgery benefit.

Work Experience Staff

If during the Period of Insurance a person who is not insured under any category of Insured Person suffers Accidental Bodily Injury, whilst engaged in work experience on Your behalf, resulting in death or a Capital Benefits loss We will pay You a benefit amount.

The maximum We will pay any one claim is stated in The Schedule.

Your Business Reputation Protection

If an Insured Person or third party visitor, whilst legally on Your premises suffers Accidental Bodily Injury resulting in a valid claim for death or Capital Benefits, We will pay You for all costs incurred for the engagement

of a public relations consultant and the release of information through the media directly in connection with such Accidental Bodily Injury to protect Your image. Such costs must be incurred within 30 days of Accidental Bodily Injury.

The maximum We will pay any one claim is stated in The Schedule.

Additional Clauses

In the event that the Insured Person is a Business Partner, Director or Employee of The Policyholder these additional clauses apply and are stated in The Schedule

Dental and Optical Expenses

In the event that an Insured Person suffers loss of or damage to teeth, fixed dentures, prescription glasses or contact lenses following Accidental Bodily Injury, We will pay You on behalf of the Insured Person for the cost of necessary dental or optical treatment required within 12 months of the Accident.

The maximum We will pay any one claim is stated in The Schedule.

Family Benefit

In the event of the Accidental death of an Insured Person during the Operative Time of Cover, We will increase the death benefit payable by an additional 5% of the sum insured for each surviving Dependand.

The maximum We will pay any one claim is stated in The Schedule.

Hospital Visiting Expenses

In the event of an Insured Person being hospitalised as an in-patient following Accidental Bodily Injury occurring during the Operative Time of Cover beyond a 10 mile radius from their normal place of residence, We will pay You on behalf of the Insured Person for reasonable costs of transporting the person nominated by the Insured Person to visit them for the duration of such hospitalization.

The maximum We will pay any one claim is stated in The Schedule.

In-home Domestic Services and Commuting

In the event of a claim being paid for Capital Benefits or Temporary Total Disablement, We will pay You on behalf of the Insured Person up to 5% of the benefit claimed for an In-home Domestic Service while recovery is in progress, as well as the cost of a licensed taxi or mini cab service to and from the Insured Person's usual place of work, if they have recovered sufficiently to return to work but it is medically certified that they are unable to travel in their usual way to work by either driving a vehicle or travelling on public transport.

The maximum We will pay any one claim is stated in The Schedule.

Paraplegia, Hemiplegia, Triplegia or Quadriplegia

In the event of a valid Capital Benefits claim, We will pay an additional benefit if, as a direct result of the Accident, the Insured Person becomes a Paraplegic, or Hemiplegic, Triplegic or Quadriplegic.

The amounts We will pay are stated in The Schedule.

Permanent Partial Disablement

In the event of an Insured Person suffering permanent disablement as a direct result of Accidental Bodily Injury, We will pay a percentage of the benefit provided for Permanent Total Disablement depending on the degree of permanent disablement.

Benefits for specific disabilities are: Permanent severance or permanent and total loss of use of

- A thumb 30%
- A forefinger 20%
- Any finger other than a forefinger 10%
- A big toe 15%
- Any toe other than a big toe 5%
- A shoulder or elbow 25%
- A wrist, hip, knee or ankle 20%
- The lower jaw by surgical operation 30%
- Any permanent disability which is not covered by Capital Benefits or any of the benefits above up to a maximum 100% of the Permanent Total Disablement benefit. Any permanent disability under this item will be assessed by considering the severity of the disablement in conjunction with the stated percentages for specific types of permanent disablement stated above. The occupation of the Insured Person will not be taken into consideration during this assessment.

If a claim is made for Capital Benefits then a claim for Permanent Partial Disablement cannot also be made.

Post Traumatic Stress Disorder Directly Resulting from Terrorism

We will pay You a benefit, if, during the Period of Insurance and during the Operative Time of Cover, the Insured Person directly witnesses an act of Terrorism on a publicly licensed conveyance and, without sustaining physical injury, suffers post traumatic stress disorder resulting in Temporary Total Disablement within six months of the act.

The maximum We will pay any one claim is stated in The Schedule.

Pregnancy, Maternity and Paternity Benefits

In the event that an Insured Person is absent through pregnancy, maternity or paternity leave or maternity or pregnancy related illnesses including, but not limited to, miscarriage or still birth, We will pay You a benefit amount for the period the Insured Person is absent from work up to a maximum of 2 weeks. This extension only applies if the Insured Person is eligible for Temporary Total Disablement. No Deferment Period will apply to this extension.

The amounts We will pay are stated in The Schedule.

Rehabilitation Expenses

In the event of a valid claim being paid for Capital Benefits, We will pay You for all reasonable expenses incurred in retraining the Insured Person for either an alternative occupation or in order to improve the quality of their life.

The maximum We will pay any one claim is stated in The Schedule.

Replacement Recruitment Expenses

We will pay You a benefit amount for all costs incurred by You, subject to Our prior written approval, to recruit a replacement Business Partner, Director or Employee following:

- (1) The Accidental death of an Insured Person that results in a valid death claim under this section.
- (2) The suicide or attempted suicide of an Insured Person.

The maximum We will pay any one claim is stated in The Schedule.

Return Home Expenses

Where Accidental Bodily Injury during the Operative Time of Cover results in the Insured Person being incapacitated more than 10 miles from their normal place of residence for more than 72 hours, We will pay You for the additional and reasonable expenses necessarily incurred in returning the Insured Person, their personal belongings and any portable Business Equipment carried by them on the journey, to their normal place of residence, or an alternative destination within the United Kingdom.

The maximum We will pay any one claim is stated in The Schedule.

Surviving Dependants Benefits

In the event that the Insured Person and their Partner (whether or not the Partner is an Insured Person under this section) suffer a fatal injury in the same Accident during the Operative Time of Cover, the Family Benefit will not be payable, but instead We agree to double the death benefit payable to the Insured Person or their Partner (if the Partner is also an Insured Person under this section), for apportionment equally to all surviving Dependants.

The maximum We will pay any one claim is stated in The Schedule.

Conditions

The following conditions apply to this Section in addition to the Policy Conditions at the back of this policy

Accumulation Limit

Any one accident

The maximum We will pay, in respect of all benefits under this section in aggregate, in respect of all Insured Persons involved in the same Accident shall not exceed the any one Accident limit stated in The Schedule and individual benefits shall where necessary be reduced proportionally until the total aggregate of individual benefits does not exceed the maximum accumulation limit.

Multi-Engined Aircraft

The maximum We will pay, in respect of all benefits under this section in aggregate, in respect of all Insured Persons involved in the same multi-engined aircraft accident or series of multi-engined aircraft accidents caused by, contributed by or consequent upon the same original cause or event shall not exceed the multi-engined aircraft limit stated in The Schedule and individual benefits shall where necessary be reduced proportionately until the total aggregate of individual benefits does not exceed the multi-engined aircraft limit.

Single-Engined Aircraft

The maximum We will pay, in respect of all benefits under this section in aggregate, in respect of all Insured Persons involved in the same single-engined aircraft accident or series of single-engined aircraft accidents caused by, contributed by or consequent upon the same original cause or event shall not exceed the single-engined aircraft limit stated in The Schedule and individual benefits shall where necessary be reduced proportionately until the total aggregate of individual benefits does not exceed the single-engined aircraft limit.

Medical Evidence

- (1) We may, at Our expense, arrange for an Insured Person to undergo
 - (a) a medical examination, or
 - (b) a post-mortem examination.
- (2) You or Your legal representative will supply to Us, at Your expense any
 - (a) medical certificate
 - (b) medical information or
 - (c) medical evidencein the format We require.

Minors

If the Insured Person is under the age of 16 at the date of the Accident giving rise to a claim

- (1) The maximum amount payable for death will be £20,000 or the sums insured shown in The Schedule whichever is the lesser
- (2) The definition of Permanent Total Disablement will be disablement wholly preventing the Insured Person from engaging in or giving attention to occupational duties of any and every kind caused other than by Loss of Limb or Loss of Sight or Loss of Speech or Loss of Internal Organ or Loss of Hearing which disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life
- (3) No benefit will be payable for Temporary Total Disablement or Temporary Partial Disablement.

Non Employees

In respect of any Insured Person who is not a Business Partner, Director or Employee of The Policyholder, the definition of Permanent Total Disablement will be disablement wholly preventing the Insured Person from engaging in/or giving attention to occupational duties of any and every kind caused other than by Loss of Limb or Loss of Sight or Loss of Speech or Loss of Hearing, where disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.

In respect of any Insured Person who is not a Business Partner, Director or Employee of The Policyholder, the definition of Temporary Total Disablement and Temporary Partial Disablement shall be restricted to out of pocket expenses only.

Payment of Benefit

All payments to be made by Us under this section will be made to You unless You otherwise instruct Us in writing. This includes (but is not limited to) any payment or indemnity which is expressed to be payable to You for the benefit of or on behalf of an Insured Person, or is expressed to be paid to an Insured Person or their estate.

- (1) We will not pay under more than one of the benefits listed below in connection with the same Accident for the same Insured Person
 - (a) death
 - (b) Loss of Limb, Loss of Sight, Loss of Speech, Loss of Internal Organ or Loss of Hearing
 - (c) Permanent Total Disablement.After payment has been made for
 - (a) death
 - (b) Loss of Limb, Loss of Sight, Loss of Speech, Loss of Internal Organ or Loss of Hearing
 - (c) Permanent Total Disablementno further payments shall be made by Us in respect of that Insured Person during the current Period of Insurance.
- (2) If death benefit is not covered then We will not pay for benefits for Loss of Limb or Loss of Sight or Loss of Speech or Loss of Hearing until at least 13 weeks after the date of the Accident and only then if the Insured Person has not died as a result of the Accident

- (3) The payment of a valid claim under Group Personal Accident - Additional Clauses shall only be made where a valid claim is payable under death, Capital Benefits, Temporary Partial Disablement or Temporary Total Disablement other than for
- (a) Coma Benefit
 - (b) Damage to Personal Property
 - (c) Dental and Optical Expenses
 - (d) Hospitalisation
 - (e) Medical Expenses following Workplace Assault
 - (f) Partner and Dependants benefit.
- (4) A valid claim under Paraplegia, Quadriplegia, Hemiplegia or Triplegia shall only be payable in addition to a valid claim under Permanent Total Disablement other than where Paraplegia or Quadriplegia are payable under Partner and Dependants benefit.
- (5) Any claim under Executor Expenses shall only be payable subsequent to You having provided a signed undertaking that if the cause of death is subsequently found to be other than as a result of Accidental Bodily Injury such Executor Expenses shall be refunded to Us.
- (6) The cover under the following benefits shall immediately cease - once a valid claim for death or Permanent Total Disablement becomes payable in respect of the same loss
- (a) Childcare Expenses
 - (b) In-home Domestic Service and Commuting.
- (7) In respect of each of the following a valid claim shall only be payable under one of the benefits in respect of the same loss
- (a) Paraplegia, Quadriplegia, Hemiplegia, and Triplegia
 - (b) Rehabilitation Expenses and Partner Training Expenses.
- (8) The cover under the following shall immediately cease two years from the date of the Accident
- (a) Commuting Expenses
 - (b) Medical Expenses
 - (c) Medical Expenses following Workplace Assault;
 - (d) Partner Training Expenses
 - (e) Rehabilitation Expenses
 - (f) Relocation Expenses
 - (g) Replacement Recruitment Expenses.
- (9) Maximum Weekly Benefit
- The maximum Weekly Wage payable for
- (a) Temporary Total Disablement will not exceed 100%
 - (b) Temporary Partial Disablement will not exceed 50%
- of the Insured Person(s) Weekly Wage or the amount stated in The Schedule providing this does not exceed the percentages as stated above.
- It is the duty of the Insured or Insured Person to inform Us if any claim payment does exceed these limits. Payment will be proportionately reduced until these limits are not exceeded.
- We will not pay more than the death sum insured until at least 13 weeks after the Accident and only then if the Insured Person has not died as a result of the Accident.
- (10) If an Insured Person is covered for death but the sum insured shown in The Schedule is less than The maximum Weekly Wage payable for
- (i) Loss of Limb, Loss of Sight, Loss of Speech or Loss of Hearing
 - (ii) Permanent Total Disablement
- We will only pay the amount for death if the Insured Person dies in the 13 weeks following the date of the Accident.

Payment of Permanent Total Disablement

Benefit in respect of Permanent Total Disablement will be payable after the expiry of 52 consecutive weeks disablement and on certification by a Qualified Medical Practitioner appointed by Us that disablement is permanent and without expectation of recovery.

Payment of Temporary Total Disablement and/or Temporary Partial Disablement

- (1) Payment of benefit for Temporary Total Disablement and/or Temporary Partial Disablement shall not preclude entitlement to any other benefit but shall cease immediately following payment of

- (a) death
 - (b) Loss of Limb, Loss of Sight, Loss of Speech, Loss of Internal Organ or Loss of Hearing
 - (c) Permanent Total Disablement.
- (2) Payment of benefit for Temporary Total Disablement and/or Temporary Partial Disablement will be paid at 4 weekly intervals in arrears commencing after the expiry of the Deferment Period, on the supply of certificates from a Qualified Medical Practitioner.
- (3) In respect of any one Accident benefit will not be payable in respect of Temporary Total Disablement and/or Temporary Partial Disablement for longer than the Benefit Period shown in The Schedule.

Exceptions

The following exceptions apply to this Section in addition to the Policy Exceptions at the back of this policy

We will not pay any claim for Accidental Bodily Injury if any of the following have contributed in any way, or if the injury was caused directly or indirectly by the Insured Person suffering from

- (1) any gradually operating cause
- (2) any naturally occurring condition or degenerative process
- (3) Sickness or disease (unless resulting directly from Accidental Bodily Injury).

Definitions

The following definitions apply to this Section in addition to the Policy Definitions at the back of this policy and keep the same meaning wherever they appear in the Section, unless an alternative definition is stated to apply

Animal Attack

The clamping of skin and subjacent soft tissues between the upper and lower mandible of an animal, which may cause puncture wounds, lacerations, cause infections or, act as a disease vector.

Benefit Period

The total period, after the expiry of any Deferment Period stated in The Schedule, for which We will pay benefits for Temporary Total Disablement and/or Temporary Partial Disablement in respect of any one Accident to any Insured Person.

Capital Benefits

Loss of Hearing, Loss of Limb, Loss of Sight, Loss of Speech, Loss of Internal Organ and Permanent Total Disablement.

Deferment Period

The number of calendar days at the commencement of each and every period of Temporary Total Disablement and/or Temporary Partial Disablement for which benefit is not payable.

Fracture

A break in a bone into two or more pieces.

Hemiplegia

The total and permanent paralysis of both limbs on one side of the body that results from Accidental Bodily Injury, which in all probability shall continue for the remainder of the Insured Person's life. The term Hemiplegic shall be interpreted accordingly.

In-home Domestic

Any person employed (excluding any member of the Insured Person's family) in one or more of the following capacities: nanny, cook, cleaner or house-keeper.

Loss of Hearing

Total and permanent loss of hearing in one or both ears to the extent that the hearing loss is greater than 95 decibels across all frequencies using a pure tone audiogram.

Loss of Internal Organ

Total and permanent loss of by removal or effective loss of use of one lung or one kidney, the spleen or the liver.

Loss of Limb

Shall mean in respect of

- (1) an arm - physical severance of all four fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand), and/or
- (2) a leg - physical severance at or above the level of the ankle (talo-tibial joint)

and shall also mean permanent total loss of use of an entire hand or arm at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand), or leg at or above the level of the ankle (talo-tibial joint).

Loss of Sight

The total and permanent loss of sight, which shall be deemed to have occurred

(1) in both eyes when the Insured Person's name has been added to the register of Blind Persons on the authority of a fully qualified ophthalmic specialist

(2) in one eye when the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (which means the Insured Person is only able to see at 3 feet that which they should normally be able to see at 60 feet) and We are satisfied that the condition is permanent and without expectation of recovery.

Loss of Speech

Total and permanent loss of speech.

Paraplegia

The total and permanent paralysis of both lower limbs, bladder and rectum as a result of Accidental Bodily Injury, which in all probability shall continue for the remainder of the Insured Person's life. The term Paraplegic shall be interpreted accordingly.

Permanent Total Disablement

Permanent disablement, wholly preventing the Insured Person from engaging in or giving attention to their usual occupational duties on Your behalf, caused other than by Loss of Limb or Loss of Sight or Loss of Speech or Loss of Internal Organ or Loss of Hearing. Where disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.

Quadriplegia

The total and permanent paralysis of all four limbs as a result of Accidental Bodily Injury, which in all probability shall continue for the remainder of the Insured Person's life. The term Quadriplegic shall be interpreted accordingly.

Rehabilitation Expenses

The reasonable expenses necessarily incurred in engaging professional rehabilitation advice and assistance to retrain the Insured Person, including payment at Our discretion for consultations, diagnostics, physiotherapy treatment, and operations.

Salary

The Insured Person's wages/salary, including overtime, commission or bonus payments, drawings or Director dividend payments received in the 12 months immediately preceding the date of Accident or sickness (all prior to deductions) or for weekly paid Employees 52 times the Insured Person's weekly wage immediately preceding the date of Accident or sickness (all prior to deductions).

Temporary Partial Disablement

Disablement which prevents the Insured Person from engaging in or attending to over 50% of their usual occupational duties on Your behalf.

Temporary Total Disablement

Disablement which entirely prevents the Insured Person from engaging in or attending to their usual occupational duties on Your behalf.

Third Degree Burns

Third degree burns or full thickness burns caused by contact with dry heat, moist heat, chemicals, electricity, lightning or radiation. Third degree burns describes where the epithelising elements and those lining the sweat glands, hair follicles, and sebaceous glands are destroyed.

Triplegia

The total and permanent paralysis of both legs below the hip and one arm below the shoulder or both arms below the shoulder and one leg below the hip, which in all probability shall continue for the remainder of the Insured Person's life. The term Triplegic shall be interpreted accordingly.

Weekly Wage

The average gross weekly wage (or in the case of salaried 1/52nd of their Salary) normally paid to the Insured Person as a wage or salary for services (including overtime, commission or bonus payments) prior to all deductions paid in the 12 week period (or any shorter period if the Insured Person has been employed for less than 12 weeks) before the date of commencement of the period of Temporary Total Disablement or Temporary Partial Disablement.

Policy Conditions

The following Policy Conditions apply in addition to the conditions contained in each Section of the policy.

Acquisition

If You acquire a new company or business and the staff from that business are added to this insurance We agree to include the additional staff at no additional premium provided that the exposure does not increase by more than 10%.

Age Limits

Unless otherwise agreed by Us and specifically noted in this policy no person aged

- (1) 86 or over in respect of Group Personal Accident and Business Travel at the commencement of the Period of Insurance will be covered by this policy.

Alteration of Risk

If:

- (1) there has been any alteration to The Business and/or the occupation or pursuits of any Insured Person after the effective date of the current Period of Insurance which increases the risk of loss, liability, destruction, damage, accident or injury,
or
- (2) Your interest ceases except by will or operation of law

We will at Our option avoid the policy from the date of such alteration or when Your interest ceases, unless We accept the alteration.

Arbitration

If We accept liability but You disagree with the amount We offer to pay, the claim will be referred to an arbitrator who will be jointly appointed in accordance with statutory provisions.

Assignment

You may not assign the benefits under this policy. We shall not be bound to accept or be affected by any notice of any trust charge lien purported assignment or other dealing with or relating to this policy.

Associated Companies

Where associated companies are covered You shall provide a list of these to Us.

Cancellation

- (1) You may cancel this policy at any time after the date We have received the premium (or at least one monthly premium instalment) by providing at least 30 days' written notice to Us.
- (2) We may cancel this policy if You do not pay Your monthly premium when it is due. If You do not pay the first monthly premium, Your policy will not be valid. If You miss a payment after that, We will write to You giving You at least 14 days' notice of a further date to pay by. If We do not receive payment by that date, We will cancel the policy and/or additional cover options.

If Your policy is cancelled under (1) or (2) above, We may, at Our discretion, refund to You a proportionate part of the premium paid for the unexpired period. This is provided that, during the current Period of Insurance, there has been no:

- (a) claim made under the policy for which We have made a payment
 - (b) claim made under the policy which is still under consideration
 - (c) incident which You are aware of and which is likely to give rise to a claim, and which has already been, or is yet to be, reported to Us.
- (3) If We have not agreed a monthly premium instalment plan with You, We will cancel this policy from the inception date if the premium is not paid and no return premium will be allowed. Such cancellation will be confirmed in writing by Us to Your last known address.
 - (4) We may also cancel this policy at any time by providing at least 30 days' written notice to Your last known address.

We will refund a proportionate part of the premium for the unexpired period provided that, during the current Period of Insurance, there has been no:

- (a) claim made under the policy for which We have made a payment
- (b) claim made under the policy which is still under consideration
- (c) incident which You are aware of and which is likely to give rise to a claim, and which has already been, or is yet to be, reported to Us.

Cessation of Employment

Payment of benefit will cease immediately if the Insured Person who is the subject of a claim retires or otherwise ceases to be employed by You.

Claims Procedure

If in relation to any claim You have failed to fulfil any of the following conditions, You will lose Your right to indemnity or payment for that claim.

You must

- (1) tell Us as soon as practicable of any event or occurrence which may result in a claim and in any event no later than 60 days after the occurrence of such event
- (2) as soon as practicable and at Your expense, provide Us with a written claim containing as much information as possible of the loss, destruction, damage, accident or injury, including the amount of the claim
- (3) provide Us at Your own expense with all certificates information and evidence reasonably required by Us and in the form and of such nature as We may prescribe
- (4) immediately pass to Us unanswered, all communications from third parties in relation to any event which may result in a claim under this
- (5) not admit or repudiate liability, nor offer to settle, compromise, make payment which may result in a claim or pay any claim under this policy without Our written agreement

And the Insured Person shall

- (1) submit to medical examination at Our request in respect of any alleged Accidental Bodily Injury or Sickness where We shall pay the fee
- (2) as soon as possible after the occurrence of any Accidental Bodily Injury or Sickness obtain and follow the advice of a Qualified Medical Practitioner.

We shall not be liable for any consequences arising due to the Insured Person's failure to obtain and follow such advice and use such appliance or remedies as may be prescribed.

In the case of death We shall be entitled to have a post-mortem examination at Our own expense.

Applicable to all other Sections insured by this Policy.

- (1) Where any loss, destruction, damage or liability covered by the policy is also covered by another policy, or would be but for the existence of this policy, We will only pay a rateable share of the loss.
- (2) If the other insurance is subject to a condition of average and this policy is not, this policy will become subject to the same condition of average.
- (3) If the Property Insured covered by the other insurance is subject to a provision excluding proportional payment in whole or in part, the payment We make will be limited to the proportion of loss, destruction or damage as the Sum Insured bears to the value of the property.

Contribution

If at the time of an event giving rise to a claim there is any other insurance policy in force in Your name which covers You or the Insured Person for the same expense loss or liability We will only pay a proportion of the claim being determined by reference to the cover provided by each of the relevant policies with the exception of Personal Accident benefits which will be payable in full.

Discharge of Liability

We may at any time pay the Limit of Indemnity or the Sum Insured or a smaller amount for which a claim can be settled after deduction of any sum already paid. We will not make any further payment except for costs and expenses incurred prior to the payment of the claim.

Fraud

If a claim made by You or anyone acting on Your behalf is fraudulent or fraudulently exaggerated or supported by a false statement or fraudulent means or fraudulent evidence is provided to support the claim, We may:

- (1) refuse to pay the claim,
- (2) recover from You any sums paid by Us to You in respect of the claim,
- (3) by notice to You cancel the policy with effect from the date of the fraudulent act without any return of premium.

If We cancel the policy under (3) above, then We may refuse to provide cover after the time of the fraudulent act. This will not affect any liability We may have in respect of the provision of cover before the time of the fraudulent act.

If this policy provides cover to any person other than You and a claim made by such person or anyone acting on their behalf is fraudulent or fraudulently exaggerated or supported by a false statement or fraudulent means or fraudulent evidence is provided to support the claim, We may:

- (1) refuse to pay the claim,
- (2) recover any sums paid by Us to You in respect of the claim (from You or such person depending on who received the sums or who benefited from the cover provided),
- (3) by notice to You and such person cancel the policy provided for such person with effect from the date of the fraudulent act without any return of premium in respect of such cover.

If We cancel a person's cover under (3) above, then We may refuse to provide cover after the time of the fraudulent act. This will not affect any liability We may have under such cover occurring before the time of the fraudulent act.

Identification

The policy and The Schedule will be read as one contract.

Interest

We will not pay interest on any claim payable.

Non Disclosure, Misrepresentation or Misdescription

(1) Before this policy was entered into

If You have breached Your duty to make a fair presentation of the risk to Us before the policy was entered into, then:

- β where the breach was deliberate or reckless, We may avoid this policy and refuse all claims, and keep all premiums paid;
- β where the breach was neither deliberate nor reckless, and but for the breach:
 - β We would not have agreed to provide cover under this policy on any terms, We may avoid this policy and refuse all claims, but will return any premiums paid
 - β We would have agreed to provide cover under this policy but on different terms (other than premium terms), We may require that this policy includes such different terms with effect from its commencement, and/or
 - β We would have agreed to provide cover under this policy but would have charged a higher premium, Our liability for any loss amount payable shall be limited to the proportion that the premium We charged bears to the higher premium We would have charged, as outlined in Schedule 1 to the Insurance Act 2015.

(2) Before a variation was agreed

If You have breached Your duty to make a fair presentation of the risk to Us before any variation to this policy was agreed, then:

- β where the breach was deliberate or reckless, We may cancel this policy with effect from the date of the variation, and keep all premiums paid;
- β where the breach was neither deliberate nor reckless, and but for the breach:
 - β We would not have agreed to the variation on any terms, We may treat this policy as though the variation was never made, but will return any additional premiums paid
 - β We would have agreed to the variation but on different terms (other than premium terms), We may require that the variation includes such different terms with effect from the date it was made, and/or
 - β We would have agreed to the variation but would have increased the premium, or would have increased it by more than We did, or would not have reduced it or reduced it by less than We did, Our liability for any loss amount payable shall be limited on a proportionate basis, as outlined in Schedule 1 to the Insurance Act 2015.

This condition operates in addition to any provisions relating to underinsurance in this policy.

Payments of Benefits

All payments to be made by Us under this section will be made to You unless You otherwise instruct Us in writing. This includes (but is not limited to) any payment or indemnity which is expressed to be payable to You for the benefit of or on behalf of an Insured Person, or is expressed to be paid to an Insured Person or their estate.

Paying Monthly

Your monthly premiums will be due on the agreed date and on the same date of each following month. We will give You one month's cover for each monthly premium You pay starting from the cover start date.

If You do not pay Your first monthly premium Your policy will not be valid. If You have paid at least one monthly premium and then You don't pay any premium amount after that when due, We will cancel Your policy as explained in the Cancellation Condition.

Reasonable Precautions

You must take all reasonable precautions to prevent

- (1) loss, destruction or damage to the property insured
 - (2) accident or injury to any person or loss, destruction or damage to their property
- and must comply with all legal requirements and safety regulations and conduct The Business in a lawful manner.

Sanctions

We shall not provide cover nor be liable to pay any claim or provide any benefit under this policy if to do so would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions laws or regulations of the European Union, United Kingdom or United States of America or any of its states.

Subjectivity

At the inception of, or during, each Period of Insurance, the insurance provided by this policy may be subjected to You

- (1) providing Us with any additional information
- (2) completing any actions agreed between You and Us
- (3) allowing Us to complete any actions agreed between You and Us.

If this is the case, then The Schedule will clearly state the information required and the dates We require such information by.

Upon completion of these requirements (or if they are not completed by the required dates), We may, at our option

- (1) modify Your premium
- (2) amend the terms and conditions of this policy
- (3) exercise Our right to cancel Your Policy under Policy Condition Cancellation
- (4) leave the policy terms, conditions, and premium unaltered.

If We proceed with any of (1), (2) and (3) above, You have the right to cancel this policy from a date agreed by You and Us and, providing no claims have been made, We will refund a proportionate part of the premium paid for the unexpired period of cover.

Subrogation

Anyone making a claim under this policy must, at Our request and expense, do everything We reasonably require to enforce a right or remedy or obtain relief or indemnity from other parties to which We will become entitled or subrogated because of payment for or making good loss, destruction, damage, accident or injury.

We may require You to carry out such actions before or after We make any admission of or payment of a claim.

The Contracts (Rights of Third Parties) Act 1999

We will not provide compensation in respect of any claim relating to any non-contracting party's rights to enforce all or any part of this policy. The Contracts (Rights of Third Parties) Act 1999 does not apply to this policy.

Policy Exceptions

The following Policy Exceptions apply to all Sections unless otherwise stated and in addition to the exceptions contained in each Section of the policy.

This policy does not cover

- (1) Any consequence whatsoever resulting directly or indirectly from or in connection with any of the following regardless of any other contributory cause or event.
 - (a) War in the Insured Person's Country of Residence or secondment
 - (b) any action taken in controlling, preventing, suppressing or in any way relating to 1 (a) above.The above exclusion shall be inoperative for an Insured Person in the event of War being declared whilst the Insured Person is actually engaged on an Insured Journey abroad.
- (2) The Insured Person engaging in any kind of flying as a pilot.
- (3) The Insured Person being a full time member of the armed forces of any nation or international authority or a member of any reserve forces called out for permanent service.
- (4) The Insured Person committing or attempting to commit suicide or intentionally inflicting self injury other than Replacement Recruitment Expenses and Repatriation of human remains.
- (5) The Insured Person's own criminal act.
- (6) Any claim incurred in or in respect of travel to Afghanistan, Iran, Iraq, North Korea and Syria or any claim incurred in a country or part of a country where the Foreign and Commonwealth Office has issued warnings against all travel to that country or part, unless referred and agreed by Us in writing.

Definitions

Each time We use one of the words or phrases listed below, it will have the same meaning wherever it appears in Your policy unless an alternative Definition is stated to apply. A defined word or phrase will start with a capital letter each time it appears in the policy, except when used in the sections of this policy headed 'Policy Introduction', 'Contents', 'Contact Details for Claims and Help', 'Complaints Procedure' and 'Important Information' and in headings and titles.

Accident / Accidental

A sudden violent external unforeseen and identifiable event.

Accidental Bodily Injury

- (1) Injury caused by Accidental and/or violent means
- (2) Injury resulting from Exposure occurring within 24 months from the date of such Accident or Exposure.

Business Equipment

Any property which is owned hired or borrowed by The Policyholder and/or Insured Person, other than Business Samples and used in the conduct of The Business.

Business Partner(s)

An individual who has entered into a legal contract with one or more people to manage the business of The Policyholder and to share in the responsibilities, resources, profits and liabilities of such business.

Business Samples

Any samples of the produce created in the normal activities of The Policyholder.

Corporate Event

Any business related event organised by You or on Your behalf to promote Your business.

Country of Residence

The country in which the Insured Person has resided for the last 12 months or more.

Dependant(s)

Any natural or legally adopted children or legal wards of an Insured Person (and/or a Partner where applicable) who at the time of the Accident are no older than 18 years of age, or 25 years of age if in full time education, or any other person who is dependant on the Insured Person for whom the Insured Person is in receipt of a carer's allowance or attendance benefit from the state.

Director(s)

A serving director (other than a non-executive director) of The Policyholder whose details have been notified to Companies House in accordance with Section 288 of the Companies Act 1985 or any statutory amendment modification or re-enactment of such Act or Regulations.

Employee(s)

Any person under a contract of employment, contract of service or apprenticeship with The Policyholder who is not a Director or a Business Partner.

Exposure

Death and/or injury to an Insured Person as a direct result of exposure to the elements.

Hospital

Any establishment which is registered or licensed as a full time facility for surgical and medical diagnosis and treatment of injured and sick persons by and under the supervision of a Qualified Medical Practitioner, continuously providing a 24 hours a day nursing service supervised by State Registered Nurses or nurses with equivalent qualifications and is not primarily a mental institution or a place of rest for the aged, for drug addicts or alcoholics.

Immediate Family

Shall include the following: Partner, grandchild, Dependant(s), brother, sister, parent, or grandparent and corresponding family in-laws of the Insured Person, or anyone noted as next of kin on any legal document.

Insured Journey

Any

- (i) authorised journey in connection with The Business not exceeding twelve months in duration (unless otherwise agreed by Us), or
- (ii) journey taken for leisure purposes (as permitted under The Schedule) not exceeding 60 days in duration (unless otherwise agreed by Us),

occurring during the Period of Insurance. The Operative Time of Cover in respect of such journey is as stated in The Schedule.

Insured Person(s)

You and/or any person or category of persons shown in The Schedule aged 85 or under at the effective date of the current Period of Insurance (65 or under in respect of cover provided under the Sickness Section).

Operative Time of Cover

The period of time during which You or an Insured Person is covered by this policy as described in The Schedule.

Partner

The spouse or civil partner of an Insured Person living at the same address as the Insured Person for at least 12 months.

Period of Insurance

From the effective date until the expiry date, both shown in The Schedule, or any subsequent period for which We accept payment for renewal of this policy.

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practise medicine or dentistry under the laws of the country they practise in, other than a Business Partner, Director or Employee, or Insured Person of The Policyholder, or, a member of the Immediate Family of an Insured Person.

Quarantine

Self-isolation by an Insured Person in their Country of Residence (if different) for a fixed period in order to prevent the risk of spreading a communicable disease, pursuant to a legal requirement by any Government or Public Authority.

Sickness

Sickness or disease (not resulting from Accidental Bodily Injury) contracted anywhere in the world.

Terrorism

- (1) Any act or acts including but not limited to
 - (a) the use or threat of force and/or violence; and/or
 - (b) harm or damage to life or to property (or the threat of such harm or damage) including but not limited to harm or damage by nuclear and/or chemical and/or biological and/or radiological means caused or occasioned by any person(s) or group(s) of persons or so claimed in whole or in part for political, religious, ideological or similar purposes or is claimed to be caused or occasioned in whole or in part for such purposes.
 - (2) Any action taken in controlling, preventing, suppressing or in any way relating to (1) above.
-

The Business

Activities directly connected with the business specified in The Schedule.

The Schedule

The document which specifies details of The Policyholder, Insured Persons, Operative Time of Cover and any Deferment Period(s), Endorsements and Conditions applying to the policy.

United Kingdom

For the purposes of this policy means England, Scotland, Wales and Northern Ireland.

We / Us / Our / Aviva

Aviva Insurance Limited.

War

War, invasion, act of a foreign enemy, hostilities or a warlike operation or operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.

You / Your / The Policyholder

The person, persons, company, companies, partnership, partnerships or unincorporated association, named in The Schedule as The Policyholder.

Complaints Procedure

What to do if you are unhappy

If you have a complaint about this insurance we would encourage you, in the first instance, to seek resolution by contacting your insurance adviser. You can write or telephone, whichever suits you, and ask your contact to review the problem. Your insurance adviser may ask Aviva to handle your complaint.

What will happen if you complain

If your complaint is not resolved quickly:

- ü Your complaint will be acknowledged promptly.
- ü A dedicated complaint expert will be assigned to review your complaint.
- ü A thorough and impartial investigation will be carried out.
- ü You will be kept updated of the progress.
- ü Everything will be done to resolve things as quickly as possible.
- ü A written response will be sent to you within eight weeks of receiving your complaint, this will inform you of the results of the investigation or explain why this isn't possible.

Where your concerns are unable to be resolved or have not been resolved within eight weeks, you may be able to ask the Financial Ombudsman Service (FOS) to carry out an independent review. Whilst firms are bound by their decision you are not. Contacting them will not affect your legal rights.

You can contact the FOS on 0800 023 4567 or visit their website at www.financial-ombudsman.org.uk, where you will find further information.

Financial Services Compensation Scheme

Depending on the circumstances of your claim you may be entitled to compensation from the Financial Services Compensation Scheme (FSCS) if we cannot meet our obligations. See fscs.org.uk

Customers with Disabilities

All documentation is also available in large print, audio and braille. If you require any of these formats, please contact your insurance adviser.

