



Complete Accident and Health policy wording



Contents

Thank you for choosing Allianz Insurance plc. We are one of the largest general insurers in the UK and part of the Allianz Group, one of the world's foremost financial services providers.

With Allianz Insurance plc, you can be confident that you're insured by a company which is relentless in its commitment to protecting and serving you. You can trust us to insure your business, as we've been providing leading insurance solutions in the UK for over 100 years.

We work in partnership with your insurance adviser to ensure you receive the highest levels of product and service excellence. Our technical experts understand how best to protect you against the risks your business faces.

If you need to make a claim you will be in safe hands. Our professionally trained staff aim to treat you, as you would expect, both promptly and fairly. By listening to you, and understanding your needs we will provide you with the most appropriate solutions to get your business trading again as quickly as possible.



IMPORTANT
Should you need further details or have any questions your insurance adviser will be delighted to help.

This document provides details of your Policy and the terms and conditions that apply. Please read it carefully and keep it in a safe place.

Introduction	1
How to make a claim	5
Complaints Procedure	4
Insuring Clause	5
Policy Definitions	7
Operative Time Definitions	15
Policy Conditions	16
Policy Exclusions	21

THE COVER PROVIDED

Personal Accident Section	22
Sickness Section	29
Business Travel Section	30
Suggested action before you travel	31
Item 1 – Medical and Emergency Travel Expenses	31
Item 2 – Cancellation, Curtailment and Change of Itinerary	35
Item 3 – Personal Property	38
Item 4 – Money	39
Item 5 – Personal Liability	40
Item 6 – Hijack and Kidnap	42
Item 7 – Political Evacuation	43
Item 8 – Legal Expenses	44

Privacy Notice Summary	49
------------------------	----

Introduction

Your Complete Accident & Health Policy is made up of several parts which must be read together as they form your contract of insurance with Allianz Insurance plc. Please take time to read all parts of the Policy to make sure they meet your needs and that you understand the terms, conditions and exclusions. If you wish to change anything or there is anything you do not understand, please let your insurance adviser know.

The parts of the Policy are:

- the Statement of Fact
- this Policy Wording which contains
 - this Introduction; the Insuring Clause; the Policy Definitions, the Policy Exclusions and the Policy Conditions, all of which apply to all Sections of the Policy
 - the Sections of cover provided, including the Section Definitions, Extensions, Conditions and Exclusions
- the Schedule, which confirms the Sections of cover that are insured and includes any additional clauses applied to the Policy

Any Section stated to be 'Not Insured' in the Schedule shall be inoperative.

Any word or expression in the Policy which has a specific meaning has the same meaning wherever it appears in the Policy, unless stated otherwise.

Changes to your circumstances

Please tell your insurance adviser as soon as reasonably possible if there are any changes to your circumstances which could affect your insurance.

Please refer to Policy Condition 12 (Change of Risk) on page 19 of this Policy.

If your circumstances change and you do not tell your insurance adviser, you may find that you are not covered if you need to claim.

Financial Services Compensation Scheme

Allianz Insurance plc contributes to the Financial Services Compensation Scheme (FSCS).

The Insured may be entitled to compensation from the FSCS if the Insurer is unable to meet their liabilities. Further information about compensation scheme arrangements is available at [fscs.org.uk](https://www.fscs.org.uk), by emailing enquiries@fscs.org.uk or by phoning the FSCS on **0800 678 1100 or 0207 741 4100**.

Policyholder helplines

These added value services are provided as automatic benefits under your **Policy** and are administered by Healix Medical Services Limited on behalf of **the Insurer**.

When the Business Travel Section is shown as insured on the schedule, the Insured is entitled to the following service:

**Security and Emergency Medical Assistance Service
Telephone +44(0) 1483 265696**

In the event of an employee suffering an illness or accident, there are medical professionals who will take control and manage the process.

Their services include:

- Evacuation or repatriation for security or medical reasons with a qualified medical escort if medically advised
- Multi-lingual medical staff to converse with doctors and hospital overseas
- Contacting the hospital and dealing with any necessary fees covered under the policy
- Arranging for loved ones to visit

This includes advice and assistance for:

- Loss of passport and travel documents
- Lost luggage
- Stolen and lost credit cards
- Referral to English speaking lawyers
- Medical treatment for illness or accident

When contacting the Assistance operator please inform them that you are an Allianz Policyholder and ensure you have the following information available:

- The name of the Insured and policy number as stated on the policy schedule
- The name of the patient and the nature of the assistance required
- Who you are and your relationship to the policyholder and the patient, for example, I am the spouse of an **Employee** and looking after our child (the patient) we are all Insured under this policy
- Your contact number and email address
- Where you are and the contact details, for example, the doctors name, land line and hospital contact details

Tips learnt from prior calls:

- Keep you mobile charged, turned on, check your signal strength and ask for wifi
- Check the dial code for the country you're in, for example, you might have been skiing in Switzerland and been taken to France for medical treatment

Additional Services provided with the Business travel Section

**Pre-travel Helpline
Telephone +44(0) 1483 260757**

Planning a business trip to a country can be a journey in itself. That is why there is a pre-travel helpline on hand to provide support and assistance for travel enquiries ranging from visa queries to inoculations required.

The Insured is entitled to the following service under any Section of this Policy

**Medical Advice Line
Telephone +44(0) 1483 260757**

The medical advice helpline can provide advice and information on a wide range of issues from:

- All medical and surgical conditions
- Medications
- Pre and post treatment advice
- The rights of patients and their families **Hospital** procedures
- Location of specialist practitioners, hospitals and consultants
- Dos and don'ts before and after treatment
- The right questions to ask the doctor/consultant/hospital in plain English
- Details of local and national help and support groups

If they don't have the answer, the medical team will source the required details and call back, email or post these to the employee.

The Medical Advice Line provides comprehensive advice and information, however, it is not an emergency service and will not provide a diagnosis or prescribe treatments.

Policyholder helplines (continued)

The Allianz Travel Oracle Website & Mobile App

The Allianz travel website and App provides business travellers with an invaluable source of pre-travel advice and destination information. Access can be from anywhere in the world via a secure log-on, and includes the following tools:

- Country Profiles
- Travel Alerts
- Pre-trip Advice and safety information
- Travel Tips
- Customizable Country Watch List
- Risk Map

Website Instructions

The Website and App provide current travel information, advice and real-time alerts on breaking news globally.

The Allianz Travel Oracle Website is traveloracle.healix.com/Allianz

Register using master policy Number ALZ193112.

Mobile App Instructions

The mobile app is available on iOS and Android platforms and includes all the benefits of the Travel Oracle website, as well as an emergency mayday feature.

This feature provides the traveler with an email alert function to your emergency contact and a lifeline to medical and security assistance 24 hours a day.

Search the App Store or Play Store for **“Travel Oracle”**
Install and then register using the master policy Number ALZ193112.

After registration you will receive the bespoke Allianz version of the App.

How to make a claim

Claims under this **Policy** should be notified to **the Insurer** in accordance with Policy Condition 3 at the following Allianz Claims Handling Offices.

Claims under the **Personal Accident Section** and **Business Travel Section Items 1 to 7** of this **Policy** should be referred to:

Claims Division Allianz Insurance plc
PO Box 10509
51 Saffron Road Wigston
LE18 9PF

Telephone: **0344 893 9500**
Email: casualtyclaims@allianz.co.uk

Lines are open from 9am to 5pm Monday to Friday.

Claims under **Item 8 Legal Expenses** of this **Policy** should telephone **Allianz Legal Protection** on **0370 241 4140** and quote Master Policy Number **34445**.

Complaints procedure

Our aim is to get it right, first time every time. If you have a complaint we will try to resolve it straight away but if we are unable to we will confirm we have received your complaint within five working days and do our best to resolve the problem within four weeks. If we cannot we will let you know when an answer may be expected.

If we have not resolved the situation within eight weeks we will issue you with information about the Financial Ombudsman Service (FOS) which offers a free, independent complaint resolution service.

If you have a complaint, please contact our Customer Satisfaction Manager at:

Customer Satisfaction Manager
Allianz Insurance plc
57 Ladymead
Guildford
Surrey
GU1 1DB

Telephone number: **01483 552438**
Email: commercialcomplaints@allianz.co.uk

You have the right to refer your complaint to the Financial Ombudsman, free of charge – but you must do so within six months of the date of the final response letter.

If you do not refer your complaint in time, the Ombudsman will not have our permission to consider your complaint and so will only be able to do so in very limited circumstances. For example, if the Ombudsman believes that the delay was as a result of exceptional circumstances.

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Website: financial-ombudsman.org.uk
Telephone: **0800 023 4567** or **0300 123 9123**
Email: complaint.info@financial-ombudsman.org.uk

Using our complaints procedure or contacting the FOS does not affect your legal rights.

Alternatively, you can contact the Financial Ombudsman Service directly.

Insuring Clause

In consideration of payment of the premium **the Insurer** will indemnify or otherwise compensate **the Insured** against loss, destruction, damage, injury or liability (as described in and subject to the terms, conditions, limits and exclusions of this **Policy** or any **Section** of this **Policy**) occurring or arising in connection with the **Business** during the **Period of Insurance** or any subsequent period for which **the Insurer** agrees to accept a renewal premium.

For Allianz Insurance plc

A handwritten signature in black ink, appearing to read 'SMG', with a horizontal line extending to the right.

Simon McGinn
Chief Executive Allianz Commercial

Policy Definitions

The following definitions apply to this Policy, unless amended by Section Definitions, and are denoted by bold text throughout this Policy.

Accidental Bodily Injury

Bodily injury and **Associated Illness** directly and solely caused by:

- a a sudden unexpected identifiable physical injury or
- b unavoidable exposure to the elements

which

- i does not result from a series of events which occur or develop over time that cannot be wholly attributable to a single accident or
- ii is not intentionally self-inflicted or
- iii does not result from sickness, disease or psychological condition other than in respect of **Benefit 4** of the **Continental Scale**.

Additional Insured Persons

The **Insured Person(s)** who are included within **Personal Accident Extensions** numbered 1 to 4.

Aircraft Accumulation Limit

The **Insurer's** maximum liability in the aggregate under this and any other group personal accident and/or business travel policies issued or to be issued by the **Insurer** to the **Insured** for all **Losses** involving any **Scheduled Air Transport**.

Annual Salary

The total annual basic salary including overtime bonus or commission payments and dividend payments as declared and upon which the premium is based. Overtime bonus or commission payments and **Directors** dividend payments shall be based on the average payments made during the twelve months immediately prior to the date of the **Accidental Bodily Injury**.

Associated Illness

Sickness, disease or Post Traumatic Stress Disorder that results directly from the **Insured Person** sustaining **Accidental Bodily Injury** that would not otherwise have arisen and had not previously arisen.

Benefit

The sum or sums of money that the **Insurer** has agreed to pay the **Insured** or, as applicable, the **Insured Person** as shown in the **Schedule**.

Business

The Business Description stated in the **Schedule**.

Business Equipment

Articles which are the property of the **Insured** for which the **Insured Person** is responsible or acquired during an **Insured Trip** to enable an **Insured Person** to perform their duties on behalf of the **Insured**.

Business Trip

Any journey undertaken by an **Insured Person** on behalf of the **Insured** in connection with the Business of the **Insured**.

Cancellation, Curtailment and Change of Itinerary Accumulation Limit

The **Insurer's** maximum liability in the aggregate under this and any other group personal accident and/or business travel policies issued or to be issued by the **Insurer** to the **Insured** in respect of any one **Loss** under **Item 2 – Cancellation, Curtailment and Change of Itinerary** and **Item 7 – Political Evacuation** as shown in the **Schedule**.

Capital Sum Benefit

A **Benefit** that is not payable at a weekly rate.

Cheque

For which the **Insured Person** is the authorised signatory.

Clause

Any addition, variation or alteration to the terms of this **Policy** as detailed on the **Schedule**.

Computer System

Any computer, hardware, software, information technology and communications system or electronic device, including any similar system or any configuration of the aforementioned and including any associated input, output or data storage device, networking equipment or back up facility.

Policy Definitions (continued)

Contamination

Contamination or poisoning of people by nuclear and/or chemical and/or biological substances that cause illness and/or disablement and/or **Death**.

Contamination by Terrorism Accumulation Limit

The Insurer's maximum liability in the aggregate under this and any other group personal accident and/or business travel policies issued or to be issued by **the Insurer to the Insured** in respect of any one **Loss** involving **Contamination by Terrorism** as shown in the **Schedule**.

Continental Scale

Compensation under **Benefit 2** of the **Schedule** is extended to include the following **Benefits** provided that the **Insured Person** has survived for at least one month from the date of the **Accidental Bodily Injury**.

1 Permanent loss by physical separation of:

a one thumb:		
i both phalanges		30%
ii one phalange		30%
b one index finger		
i three phalanges		20%
ii two phalanges		20%
iii one phalange		6%
c one other finger		
i three phalanges		10%
ii two phalanges		6%
iii one phalange		3%
d one great toe		
i two phalanges		15%
ii one phalange		15%
e one other toe		
i three phalanges		5%
ii two phalanges		3%
iii one phalange		2%

2 Permanent total loss of use of:

a shoulder or elbow	25%
b wrist, hip, knee or ankle	20%
c total loss of use of the neck or cervical spine with no damage to the spinal cord	30%
d total loss of use of the back or spine below the neck with no damage to the spinal cord	40%
e of one lung or one kidney, the spleen or the liver	25%
f taste	5%
g smell	5%

3 Removal by surgical operation of lower jaw

30%

4 **Sickness** resulting in **Loss of Sight** or Permanent Total Disablement by paralysis

20%

5 Permanent facial scar

a 1cm to 5cm long on the face	5%
b over 5cm long on the face	10%

6 **Loss** of intellectual capacity

100%

The appropriate percentage shall be applied to the amount for **Benefit 2** shown in the **Schedule** or to the Limit per Person under **Benefit 2** whichever is the lesser.

For forms of permanent disablement not specified the degree of disability will be assessed by comparison with the percentages shown in the scale above without taking into account **the Insured Person's** occupation.

Where an amount is claimed in respect of the same **Insured Person** for more than one form of permanent disablement as the result of the same **Accidental Bodily Injury** the total of the percentages shall not exceed 100% of the amount for **Benefit 2**.

If a claim is payable for loss of use of a whole member of the body a claim for parts of that member cannot also be made.

Policy Definitions (continued)

Country of Residence

The country in which the **Insured Person** permanently resides or is the country from which the **Insured Person** is expected to reside for more than six (6) months.

Cyber Event

An unauthorised or malicious act or series of related unauthorised or malicious acts, regardless of time and place, or the threat or hoax thereof involving access to, processing of, use of or operation of any **Computer System** or any data by any person or group(s) of persons.

Death

Death caused by **Accidental Bodily Injury**.

Declared Travel Pattern

The number of journeys, details of destinations and average duration of each journey as provided by **the Insured** to **the Insurer** before the inception or the renewal of cover.

Deferment Period

The uninsured period that must pass before payment for **Temporary Total Disablement** or **Temporary Partial Disablement** begins.

Denial of Service

Any actions or instructions constructed or generated with the ability to damage, interfere with or otherwise affect the availability of networks, network services, network connectivity or information systems. **Denial of Service** includes, but is not limited to, the generation of excess traffic into network addresses, the exploitation of system or network weaknesses and the generation of excess or non-genuine traffic between and amongst networks.

Dental Injury

Damage to or loss of teeth, gingival tissues, alveoli or dental prostheses including implants, bridges or crowns (whilst in situ within the mouth of the **Insured Person**) which is caused solely by a force external to the mouth of the **Insured Person**.

Dependant Adult

Any person other than a **Dependant Child** who is dependent on the **Insured Person** and where either the **Insured Person** or the dependant adult is in receipt of a carers or attendance allowance from the government of the United Kingdom.

Dependant Child

The unmarried children, stepchildren, foster children and legally adopted children who are either under eighteen (18) years of age or under twenty three (23) years of age if studying in full time education at the time of **Death** of the **Insured Person** and for whom the **Insured Person** was the parent or legal guardian.

Directors

The registered company directors of **the Insured**, and any other persons agreed with **the Insurer** in writing to be treated as directors under this **Policy**.

Employee

Any employee of **the Insured** or any other person acting in the capacity of an employee whilst working for **the Insured** in connection with the **Business of the Insured**.

Europe

The **United Kingdom** and Eire, the continent of Europe, islands in the Mediterranean, former member states of the Soviet Union west of the Ural Mountains and Turkey west of 30° East.

Event Accumulation Limit

The Insurer's maximum liability in the aggregate under this and any other group personal accident and/or business travel policies issued or to be issued by **the Insurer** to **the Insured** for all **Losses** not involving air travel.

Financial Card

Debit or credit or charge cards for which the **Insured Person** is the authorised cardholder.

Policy Definitions (continued)

First Aid Expenses

Expenses necessarily incurred by the **Insured Person** or **the Insured** on behalf of the **Insured Person** for immediate and urgent treatment due to the **Insured Person** having sustained **Accidental Bodily Injury** which results in a valid claim for any of **Benefits 1 to 6** as shown under Personal Accident **Section** of the Table of Sums Insured in the **Schedule**.

Hemiplegia

The permanent and total paralysis of one side of the body.

Hijack

Unlawful seizure or unlawful control of an aircraft or other conveyance in which the **Insured Person** is travelling as a passenger.

Hospital

Any National Health Service Trust or registered private hospital in the **United Kingdom** licensed by a recognised body for the undertaking of surgical operations or any equivalent establishment outside of the **United Kingdom**.

Hospitalisation/Hospitalised

Any continuous period of 24 hours or more during which time the **Insured Person** has been confined to **Hospital** by a **Qualified Medical Practitioner**.

Insured Person

Any person described on the **Schedule** who is under the age of eighty (80) at the start of the **Period of Insurance** and is resident in the **United Kingdom** unless specifically stated otherwise on the **Schedule**.

Insured Trip

a Any **Business Trip** under six (6) months and any holiday which is purely ancillary to the **Business Trip** undertaken by an **Insured Person** and their accompanying **Spouse** and immediate family when approved by **the Insured** and forms part of the **Declared Travel Pattern**

or

b Any other journey under six (6) months duration undertaken by an **Insured Person** or guest or Contractor of **the Insured** and their accompanying **Spouse** and immediate family when approved by **the Insured** and forms part of the **Declared Travel Pattern**

or

c Any journey under thirty (30) calendar days duration undertaken by **Directors of the Insured** and their accompanying **Spouse**, immediate family and domestic staff

or

d Any journey undertaken by business colleague friend or family of an **Insured Person** travelling on compassionate grounds with the agreement and at the expense of the Insurer.

Keys

Key(s) to the doors to the residence safes alarms or usual place of employment of the **Insured Person** or vehicles owned by or hired by or leased to **the Insured** or the **Insured Person**.

Kidnapped/Taken Hostage

The unlawful taking and holding captive of an **Insured Person**.

Loss/Losses

A loss or series of losses arising out of or consequent upon or contributed to directly or indirectly by one originating event.

Loss of Hearing

Total and permanent hearing loss greater than 90 decibels across frequencies between 500 Hz and 3,000 Hz as tested by a **Qualified Medical Practitioner**. The maximum amount payable for **Loss of Hearing** in one ear is 25% of the **Sum Insured** for **Benefit 2** or £5,000 whichever the greater.

Policy Definitions (continued)

Loss of Limb

In respect of

- a an arm – physical severance or permanent loss of use of all four fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand)

or

- b a leg – physical severance or permanent loss of use at or above the level of the ankle (talo-tibial joint).

Loss of Sight

Total and permanent loss of sight which will be considered as having occurred:

- 1 in both eyes if the **Insured Person** has been certified as severely sight impaired,

or

- 2 in one eye if the **Insured Person** has been certified as sight impaired,

on a Certificate of Vision Impairment from a fully qualified ophthalmologist and registered it with their local social services department

Such vision impairment must have lasted 3 consecutive months of the **Insured Person's** lifetime and is, at the end of that period, in the opinion of an independent ophthalmologist (acceptable to **the Insurer**), beyond hope of improvement.

Loss of Speech

Total and permanent loss of the ability to speak or communicate verbally.

Maximum Benefit

The maximum amount of **Benefit** payable, as shown in the Table of **Sums Insured** in the **Schedule**.

Maximum Benefit Period

The maximum period (not necessarily consecutive) for which **Temporary Total Disablement** or **Temporary Partial Disablement** are payable after the **Deferment Period** has expired

i as shown in the **Schedule** or

ii when **the Insured Persons** contract of employment with **the Insured** ends

whichever the earlier.

Money

Any Coins or Banknotes bankers draft bill of exchange postal or money order signed travellers cheque and other **Cheque** letter of credit luncheon voucher money order phone card travel ticket **Financial Card** gift token and prepaid coupon which are taken on or acquired during an **Insured Trip** by the **Insured Person** and are intended for personal expenditure or business expenditure that is reclaimable from **the Insured**.

Non-Scheduled Air Accumulation Limit

The Insurer's maximum liability in the aggregate under this and any other group personal accident and/or business travel policies issued or to be issued by **the Insurer** to **the Insured** for all **Losses** involving air travel other than **Scheduled Air Transport**.

Operative Time

The time and circumstances when cover under this **Policy** is effective within the **Period of Insurance** shown in the **Schedule**.

Paraplegia

The permanent and total paralysis of the two lower limbs, bladder and rectum.

Policy Definitions (continued)

Period of Insurance

The period of insurance shown in the **Schedule** being the period during which this **Policy** remains valid subject to the **Operative Time**.

The **Period of Insurance** will end on the earliest date of the following for **the Insured**

- a 11.59pm on the day immediately prior to the renewal date shown in the **Schedule**.
- b when **the Insured** or **the Insurer** cancels this **Policy** under Condition 4 or 5.

The **Period of Insurance** will end on the earliest date of the following for an **Insured Person**

- a 11.59pm on the day immediately prior to the renewal date shown in the **Schedule**.
- b when **the Insured** or **the Insurer** cancels this **Policy** under Condition 4 or 5.
- c the date the **policy** is cancelled.
- d on the date an **Insured Person** notifies **the Insured** that they no longer wish to be included in this **Policy**.
- e if the **Insured Person** is an **Employee of the Insured** on the date on which the **Insured Person** cease their employment with **the Insured**.
- f at the end of the contract period for a person who is employed by **the Insured** on a contract of fixed duration unless otherwise agreed by **the Insured**.

whichever the sooner other than

- i if the **Insured Person** is on an **Insured Trip** that continues beyond the expiry of the **Period of Insurance** for up to ninety (90) consecutive days from the end of the **Period of Insurance** or until the completion of the **Insured Trip** whichever is the sooner.
- ii if the **Insured Person** is subject to a claim for **Hijack** and **Kidnap** then the **Period of Insurance** is extended for up to fifty two (52) weeks or until the **Insured Person** returns to their usual residence whichever is the sooner.

Permanent Partial Disablement

Loss of Sight, Loss of Hearing, Loss of Speech or Loss of Limb

Permanent Total Disablement

Any permanent disablement other than

- a **Loss of Sight**
- b **Loss of Hearing**
- c **Loss of Limb**
- d **Continental Scale**

which having lasted without interruption for at least twelve (12) months, has no reasonable prospect of improving, and in the opinion of an independent referee who is a **Qualified Medical Practitioner** and acceptable to **the Insurer**, will in all probability permanently, completely and continuously prevent the **Insured Person** from engaging in or giving attention to:

- i their Usual Occupation if employed by **the Insured**
- ii business profession or occupation of each and every kind if the **Insured Person** is not employed by **the Insured**
- iii business profession occupation or schooling of each and every kind if the **Insured Person** is under eighteen (18) years of age or under twenty three (23) years of age and in full time education

for the remainder of their life.

Personal Property

Clothing and other personal articles the property of the **Insured Person**.

Policy

The contract of insurance formed of the documents described in the Introduction.

Premises

The interior portion of a building with a singular identifiable address in the United Kingdom or the **Insured Persons Country of Residence** owned or leased by **the Insured** in the conduct of the **Business**.

Quadriplegia

The permanent and total paralysis of the two upper limbs and the two lower limbs.

Policy Definitions (continued)

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practice medicine ophthalmology or dentistry under the laws of the country in which they practice and who is not

- i an Employee of **the Insured** or
- ii the **Insured Person** or
- iii the **Spouse** of the **Insured Person** or
- iv a member of the immediate family of the **Insured Person**

Replacement Value

The full value to replace **Personal Property** or **Business Equipment** without deduction for wear and tear or depreciation.

Schedule

The part of this **Policy** that details information forming part of this contract of insurance and that shows the **Sections** of this **Policy** that are operative.

Scheduled Air Transport

A registered fixed wing aircraft which flies from an internationally recognised airport on a published schedule and which has more than eighteen (18) seats.

Section/Sections

The parts of this **Policy** that detail the insurance cover provided for each individual **Section** of this **Policy**.

Sickness

An identifiable illness, disease, medical complaint or medical condition which is not **Accidental Bodily Injury**.

Spouse

The spouse, partner or civil partner of the **Insured Person** with whom the **Insured Person** has been cohabiting for at least 3 months as though they were their spouse, partner or civil partner.

Strike or Industrial Action

Any form of industrial action, whether or not organised by a trade union which is carried out with the intention of preventing, restricting or otherwise interfering with the production of goods or the provision of services.

Sum Insured

The maximum amount **the Insurer** will pay for each item insured under any **Section**.

Temporary Partial Disablement

Temporary Disablement that completely prevents the **Insured Person** from performing more than 50% of the functions of their Usual Occupation.

Temporary Total Disablement

Temporary Disablement which completely prevents the **Insured Person** from performing each and every function of their Usual Occupation.

Terrorism

An act including but not limited to the use of force or violence and/or the threat thereof of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or Government(s) committed for political, religious, ideological, ethnic or similar purposes or reasons including the intention to influence any Government and/or to put the public or any section of the public in fear.

The Insurer

Allianz Insurance plc.

The Insured

The Insured named and shown in the **Schedule**.

Travel Documents

Passport visa travel tickets passes driving licence or any other essential travel documentation belonging to the **Insured Person** that are necessary for them to complete the purpose of **the Insured Trip**.

Policy Definitions (continued)

Triplegia

The permanent and total paralysis of three limbs.

United Kingdom

Great Britain, Northern Ireland, the Isle of Man and the Channel Islands.

Usual Occupation

The tasks, duties and other functions, which **the Insured** normally pays the **Insured Person** to perform in connection with the **Business of the Insured**.

Visitor

Any individual visiting the **Premises of the Insured** in a business capacity with the knowledge and consent of **the Insured** excluding any Emergency Services personnel and third party contractors undertaking work on behalf of **the Insured**.

War

Invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.

Weekly Benefit

The amount shown in the **Schedule** that **the Insurer** will pay to **the Insured** for each complete working week, during any period of **Temporary Total Disablement** or **Temporary Partial Disablement** of an **Insured Person**.

Weekly Wage

The gross basic weekly amount (or in the case of salaried employees 1/52nd of the **Annual Salary**) normally paid (excluding bonus payments) by the **Insured** to the **Insured Person** as at the date of occurrence of the accident giving rise to **Accidental Bodily Injury** for their Usual Occupation.

Operative Time Definitions

Show the time and circumstances that cover applies to the Insured Person as selected by the Insured and shown in the Schedule

24 Hours

At anytime.

Occupational including Commuting

- a While an **Insured Person** is carrying out their occupational duties for the Insured whilst on an Insured Production in the United Kingdom or travelling between:
 - i an **Insured Person's** place of residence and place of work
 - ii places of work at the expense of the Insured.
- b Business Travel outside or within the United Kingdom
- c Away from premises
- d Assault
- e Motor Vehicle Travel
- f While an **Insured Person** is
 - i at any ground or premises where the Insured has arranged a social activity or charity event or sport or training for the purpose of taking part in sport or
 - ii travelling to or from the ground or premises as a member of an organised party under the direction of the Insured.

Occupational

- a While an **Insured Person** is carrying out their occupational or voluntary duties for **the Insured** or while travelling between places of work at the expense of the Insured.
- b **Business Travel outside or within the United Kingdom**
- c **Away from premises**
- d **Assault**
- e **Motor Vehicle Travel**

Away from premises

While an **Insured Person** is:

- a carrying out their occupational for the Insured and is not on the Insured's **Premises**
- b travelling between places of work where the travel is at the expense of the Insured.

Assault

At any time where **Accidental Bodily Injury** is the direct result of an unprovoked physical assault by another person.

Motor Vehicle Travel

Whilst getting in and out of, travelling in, loading or unloading, carrying out emergency road-side repairs to, and refueling of, any vehicle used for the Business of the Insured.

Business Travel outside or within the United Kingdom

While on an **Insured Trip** at the expense of **the Insured**

- a outside the **United Kingdom** or **Country of Residence**:
 - or
 - b in the **United Kingdom** or **Country of Residence** involving
 - i an overnight stay away from the **Insured Person's** residence or
 - ii a flight in an aircraft or
 - iii involves either a journey by road rail or sea

excluding commuting between the **Insured Person's** residence or work place

Cover starts from the time of leaving the residence or work place whichever is last, until return to the residence or work place whichever is first.

Business Travel outside the United Kingdom

While on an **Insured Trip** outside the **United Kingdom** or **Country of Residence**.

Cover starts from the time of leaving the residence or work place whichever is last, until return to the residence or work place whichever is first.

Policy Conditions

1 Fair Presentation of the Risk

- a **The Insured** must make a fair presentation of the risk to **the Insurer** at inception, renewal and variation of the **Policy**.
- b **The Insurer** may avoid the **Policy** and refuse to pay any claims where any failure to make a fair presentation is:
 - i deliberate or reckless; or
 - ii of such other nature that, if **the Insured** had made a fair presentation, **the Insurer** would not have issued the **Policy**.

The Insurer will return the premium paid by **the Insured** unless the failure to make a fair presentation is deliberate or reckless.

- c If **the Insurer** would have issued the **Policy** on different terms had **the Insured** made a fair presentation, **the Insurer** will not avoid the **Policy** (except where the failure is deliberate or reckless) but **the Insurer** may instead:
 - i reduce proportionately the amount paid or payable on any claim, the proportion for which **the Insurer** is liable being calculated by comparing the premium actually charged as a percentage of the premium which **the Insurer** would have charged had **the Insured** made a fair presentation; and/or
 - ii treat the **Policy** as if it had included such additional terms (other than those requiring payment of premium) as **the Insurer** would have imposed had **the Insured** made a fair presentation.

For the purposes of this condition references to:

- a avoiding a **Policy** means treating the **Policy** as if it had not existed from the inception date (where the failure to make a fair presentation of the risk occurs before or at the inception of the **Policy**), the renewal date (where the failure occurs at renewal of the **Policy**), or the variation date (where the failure occurs when the **Policy** is varied);

- b refunds of premium should be treated as refunds of premium back to the inception date, renewal date or variation date as the context requires;
- c issuing a **Policy** should be treated as references to issuing the **Policy** at inception, renewing or varying the **Policy** as the context requires;
- d premium should be treated as the premium payable for the particular contract of insurance which is subject to this condition (where there is more than one contract of insurance).

2 Misrepresentation of facts relevant to an Insured Person

If any claim is made under the **Policy**, **the Insurer** will not invoke the remedies which might otherwise have been available to it under **Policy Condition 1. Fair Presentation of the Risk** as against **the Insured**, if the failure to make a fair presentation of the risk concerns only facts or information which relate to a particular **Insured Person**. If the **Insured Person** concerned or **the Insured** on their behalf makes a careless misrepresentation of facts, **the Insurer** may invoke the remedies available to it under **Policy Condition 1. Fair Presentation of the Risk** as against that **Insured Person** only, as if a separate insurance contract had been issued to such person, leaving the remainder of the **Policy** unaffected.

3 Claims Conditions

No claim will be paid unless the Insured and where applicable the **Insured Person** complies strictly with these conditions:

- a **the Insured** or **Insured Person** must give notice to **the Insurer** within ninety (90) calendar days of any loss damage or occurrence which may result in a claim under this **Policy**
- b the Insured or **Insured Person** must provide **the Insurer** with all information and evidence which **the Insurer** may reasonably require at no cost to **the Insurer**
- c **the Insured** or **Insured Person** must at **the Insurer's** request provide a medical examination report in respect of any **Accidental Bodily Injury** where **the Insured** requires **the Insurer** to consider a claim under this **Policy** for which **the Insurer** will pay the cost of the medical examination fee

Policy Conditions (continued)

- d** the **Insured** must ensure that as soon as possible after the occurrence of any **Accidental Bodily Injury** the **Insured Person** obtains and follows the advice of a **Qualified Medical Practitioner**
- e** **The Insurer** will not be liable for any bodily injury or medical condition which is worsened or prolonged or any other consequences which arise as a result of the **Insured Person's** failure to obtain and follow such advice and to use such treatment remedies or appliances as may be prescribed
- f** in the event of the **Death** of an **Insured Person**, **the Insurer** will be entitled to have a post-mortem examination carried out at its expense
- g** for **the Insured** to claim for Weekly **Benefits**, under this **Policy** the **Insured Person** must have no other weekly benefits insurance in force except as declared to and accepted by **the Insurer** during the **Period of Insurance**.

4 Cancellation

Insured's Cancellation Rights

The Insured has the right to immediately cancel the cover within 14 days of the commencement of cover or the receipt of Policy documentation, whichever is the later (this period is referred to as the "cooling off period").

The Insured should exercise this right by contacting their insurance adviser or by writing to the Allianz office which issued the Policy documentation.

If the Insured does exercise their right to cancel during the "cooling off period", and provided no claim has been made or incident has arisen which is likely to give rise to a claim during the current Period of Insurance, the Insured will be entitled to a return of premium calculated on a pro-rata basis. The amount of premium to be refunded under this condition will be reduced by all unpaid premiums or unpaid premium instalments outstanding at the date of cancellation.

If the "cooling off period" has expired, the Insured may cancel the Policy during the Period of Insurance by giving 14 days notice in writing to their insurance adviser or the Allianz office which issued the Policy. Provided no claim has been made or incident has arisen which is likely to give rise to a claim during the current Period of Insurance the Insured will be entitled to a refund of the premium paid calculated on a pro-rata basis. The amount of any premium to be refunded under this condition will be reduced by all unpaid premiums or unpaid premium instalments due.

Insurer's Cancellation Rights

In addition to the Insurers' rights set out elsewhere in the Policy, including but not limited to Condition 2 (Fair Presentation of the Risk) and Condition 5 (Fraud), where there is a valid reason for doing so the Insurer may cancel this Policy at any time by giving the Insured at least 14 days' notice in writing sent to the Insured's last known address. The notice will set out the reason for cancellation.

Valid reasons for cancellation may include but are not limited to:

- a** Non payment of premium (including if the premium for this Policy is paid by instalments and in the event that the Insured fails to pay one or more instalments whether in full or in part);
- b** Continued failure by the Insured to comply with the terms and conditions of this Policy;
- c** Material change in the risk or the sums insured;
- d** Failure by the Insured to co-operate with the Insurer or provide the Insurer with information or documentation reasonably required by the Insurer and the lack of co-operation by the Insured affects the Insurers ability to process a claim or defend the Insurers interests or make risk based underwriting decisions. In this case the Insurer will write to the Insured giving notice of cancellation of this Policy in the event that the Insured does not cooperate to provide the information or documentation reasonably required within a period of 14 days starting from the date provided in the letter; or
- e** The Insured's use of threatening, abusive or intimidating behaviour or inappropriate language or bullying of the Insurers staff or suppliers.

Policy Conditions (continued)

If the Insurer does cancel this Policy, provided no claim has been made or incident has arisen which is likely to give rise to a claim during the current Period of Insurance the Insured will be entitled to a proportionate return of the premium in respect of the unexpired Period of Insurance. The amount of premium refund payable will be reduced by all unpaid premiums or unpaid premium instalments due.

5 Fraud

If **the Insured** or anyone acting on **the Insured's** behalf:

- a** makes any false or fraudulent claim;
- b** makes any exaggerated claim;
- c** supports a claim by false or fraudulent documents, devices or statements (whether or not the claim is itself genuine);
- d** makes a claim for loss or damage which **the Insured** or anyone acting on **the Insured's** behalf deliberately caused,

the Insurer will:

- i** refuse to pay the whole of the claim; and
- ii** recover from **the Insured** any sums that it has already paid in respect of the claim.

The Insurer may also notify **the Insured** that it will be treating the **Policy** as having terminated with effect from the date of the earliest of any of the acts set out in sub-clauses **a – d** above. In that event, **the Insured** will:

- a** have no cover under the **Policy** from the date of the termination; and
- b** not be entitled to any refund of premium.

6 Reasonable Precautions

The Insured shall take all reasonable precautions to prevent accidents and any injury, loss, destruction or damage and shall take all reasonable steps to observe and comply with statutory or local authority laws, obligations and requirements.

7 Loss Reduction Conditions Fraudulent Claims

If any fraud to which **Policy Condition 5** relates is perpetrated by or on behalf of an **Insured Person** (and not on behalf of **the Insured**), **Policy Condition 5** should be read as if it applies only to that **Insured Person's** claim and references to the **Policy** should be read as if they were references to the cover effected for that person alone and not to the **Policy** as a whole.

8 Law Applicable and Jurisdiction

Unless agreed otherwise by the Insurer:

- a** the language of the **Policy** and all communications relating to it will be English; and,
- b** all aspects of the **Policy** including negotiation and performance are subject to English law and the decisions of English courts.

9 Rights of Parties

A person or company who was not a party to this **Policy** has no right under the Contracts (Rights of Third Parties) Act 1999 or any subsequent legislation to enforce any term of this **Policy** but this does not affect any right or remedy of a third party which exists or is available apart from such Act.

10 Assignment

The Insured shall not assign any of the rights or benefits under this **Policy** or any **Section** of this **Policy** without the prior written consent of **the Insurer**.

The Insurer will not be bound to accept or be affected by any notice of trust charge lien or purported assignment or other dealing with or relating to this **Policy** or any **Section** of this **Policy**.

11 Payment of Premium

The Insured must pay to the Insurer all premiums due to **the Insurer** together with all taxes due on the premiums.

If **the Insurer** agrees to accept payment of premiums by instalments and payment of any instalment is not made on a due date for whatever reason the full outstanding balance shall become payable immediately.

Policy Conditions (continued)

12 Change in Risk

It is a condition precedent to the liability of **the Insurer** that **the Insured** must give immediate notice to **the Insurer** of any change to the occupation of any **Insured Person** from that which **the Insured** originally advised to **the Insurer**.

13 Benefit Limits

a If the **Insured Person** is included in more than one **Category, Section or Clause** of this **Policy** the **Insurer** will only pay the larger **Benefit or Extension** respect of the same **Loss**.

b Dental Expenses shall be limited to £250 unless recommended safety equipment for protection against **Dental Injury** was being worn by the **Insured Person** whilst participating in any sport or activity for which the wearing of such safety equipment is reasonably required.

c **The Insurer** will not pay more than the **Maximum Benefit** for **Benefits 1 to 6** or any other **Sum Insured** as shown in the **Schedule** for any one **Insured Person**.

d The **Maximum Benefit** payable in respect of **Death** of an **Insured Person** under 16 years of age or under 18 years of age and in full time education shall not exceed £25,000 or the **Benefit** stated in the **Schedule** whichever is the lower.

e i If payment is made to **the Insured** the maximum **Weekly Benefit** payable for

- **Temporary Total Disablement** will not exceed 100%
- **Temporary Partial Disablement** will not exceed 50%

of the **Insured Person's** normal **Weekly Wage**.

ii If **the Insured** requests payment to be made to the **Insured Person** the maximum **Weekly Benefit** payable for

- **Temporary Total Disablement** will not exceed 75%
- **Temporary Partial Disablement** will not exceed 30%

of the **Insured Person's** normal **Weekly Wage**.

It is the duty of **the Insured** to inform **the Insurer** if any claim payment exceeds these limits. **The Insurer** shall be entitled to seek recovery of any overpayment or adjust future payment of any **Personal Accident** benefit or extensions until these limits are not exceeded.

f Payment by **the Insurer** to **the Insured** of any **Weekly Benefit** does not prejudice **the Insured's** entitlement to any other **Benefit** but payment of **Weekly Benefits** will cease if **the Insurer** pays any of the **Capital Sum Benefits** and **the Insurer** will not be liable to pay any further **Benefits** in respect of the same **Insured Person** for the same **Loss**.

g The **Schedule** shows the **Weekly Benefit** payable to **the Insured** for each complete working week of **Temporary Total Disablement** or **Temporary Partial Disablement**.

Payment for any incomplete working week will be calculated as a proportion of the **Weekly Benefit** shown in the **Schedule** equivalent to the number of days of disablement compared to the number of days which the **Insured** normally pays the **Insured Person** to work in a normal week.

h **The Insurer** will not pay more than one of the **Benefits 1 to 4** shown in the Table of Sums Insured in respect of any one **Insured Person** for injuries arising from the same **Loss**.

i **The Insurer** will not pay **Temporary Total Disablement** and **Temporary Partial Disablement** concurrently for the same **Loss**.

j If **the Insurer** has offered a rehabilitation service and the **Insured Person** does not comply with the medical treatment or advice provided **the Insurer** may reduce proportionately the amount paid or payable on any claim.

k If the **Insured Person** sustains **Accidental Bodily Injury** as a result of flying as a pilot

i the **Maximum Benefit** payable in respect of **Death** or **Capital Sum Benefit** is the **Sum Insured** shown on the **Schedule** or £10,000 whichever the less and

ii **Temporary Total Disablement** and **Temporary Partial Disablement** and all **Personal Accident Extensions** other than **Funeral Expenses** and **Urgent Estate Expenses** are excluded

Policy Conditions (continued)

- l If the **Insured Person** is not an **Employee of the Insured Temporary Total Disablement** and **Temporary Partial Disablement** are not payable unless otherwise stated by a **Clause**.
- m **Temporary Partial Disablement Sum Insured** shall not exceed 50% of **Temporary Total Disablement Sum Insured**.
- n If the period of disablement is not consecutive a new **Deferment Period** does not apply.
- o **The Insurer** will only pay **Temporary Total Disablement** or **Sickness Section** in respect of any one **Insured Person** for the same **Loss**

14 Accumulation Limits

The Insurer's maximum liability for all accepted claims in total in respect of all **Insured Persons** involved in the same **Loss** shall not exceed the:

- a **Aircraft Accumulation Limit,**
- b **Event Accumulation Limit,**
- c **Non-scheduled Air Accumulation Limit,**
- d **Contamination by Terrorism Accumulation Limit**
- e **Cancellation, Curtailment and Change of Itinerary Limit**

Where the total of all individual claims exceeds the limit applicable the individual claims shall be reduced proportionately until the total of all individual claims does not exceed the limit applicable in the **Schedule**.

15 Disappearance

Death of any **Insured Person** shall not be presumed by reason of their disappearance.

If after a reasonable period of time has elapsed **the Insurer** having examined all the evidence available has no reason to suppose other than that the **Insured Person** has sustained an accident during the **Operative Time** resulting in their **Death**, the disappearance of such **Insured Person** shall be deemed to constitute **Death** by accident for the purposes of this **Policy**.

In the event of the **Insured Person's** re-appearance after payment of the **Death Benefit** the beneficiary thereof will repay such compensation to **the Insurer**.

Policy Exclusions

This Policy does not provide any cover or benefit for any business or activity to the extent that the provision of such cover, payment of any claim or provision of such benefit would expose the Insurer 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.

For the avoidance of doubt any valid licence from the Office of Financial Sanction Implementation or similar authorised regulatory body shall have no bearing on this insurance, and this Policy will consider the sanction, prohibition or restriction to remain in force.

This Policy does not cover:

- 1** Any claim for any **Section** of this **Policy** arising out of or consequent upon or contributed to directly or indirectly by:
 - a** any **Insured Person** taking part or whilst engaged in civil commotions or riots of any kind.
 - b** the **Insured Person**
 - i** taking illegal drugs or taking non-prescribed drugs for recreational purposes or taking drugs prescribed for the **Insured Person's** own drug addiction or alcoholism
 - ii** serving in the Armed Forces of any Nation or International Authority
 - iii** participating in any sport as a professional
 - c** **War** (whether declared or not):
 - i** between any of the Major Powers (specifically China, France, the United Kingdom, any of the former member states of the Soviet Union and the United States of America) and/or

- ii** within **Europe** in which any of such Major Powers or their armed forces are involved or any enforcement action within **Europe** by or on behalf of the United Nations.

- d** ionising radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel.
- e** the radioactive, toxic, explosive or other hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof.

2 Any claim in excess of:

- a** **Aircraft Accumulation Limit**
- b** **Non-scheduled Air Accumulation Limit**
- c** **Event Accumulation Limit**
- d** **Contamination by Terrorism Accumulation Limit**
- e** **Cancellation, Curtailment and Change of Itinerary Limit**
- f** £25 million

whichever shall be the lower.

3 Any claim in any way caused or contributed to by a **Cyber Event** or **Denial of Service**.

Write-back

Where coverage is provided, this exclusion does not apply to:

- a** **Accidental Bodily Injury**
- b** **Sickness**
- c** **Medical and Emergency Travel Expenses**
- d** **Hijack and Kidnap**
- e** **Political Evacuation**

Personal Accident Section

Cover

The Insurer will pay the Insured the **Sums Insured** shown in the **Schedule** if any **Insured Person** suffers **Accidental Bodily Injury** during the **Period of Insurance** and **Operative Time** which, within twelve (12) months solely, directly and independently of any other cause results in the:

- 1 **Death**
- 2 **Loss of Sight** in one eye or **Loss of one Limb** or **Loss of Hearing** in one ear or **Loss of Speech**
- 3 **Loss of Sight** in both eyes or **Loss of two or more Limbs** or **Loss of Hearing** in both ears
- 4 **Permanent Total Disablement**
- 5 **Temporary Total Disablement**
- 6 **Temporary Partial Disablement**

of that **Insured Person**.

Personal Accident Extensions

Additional Insured Persons

The following Additional **Insured Persons** are included provided they are not insured elsewhere under this Policy. The maximum amount payable for Additional Insured Persons is £300,000 in respect of any one Loss.

1 Visitors to the Insured Premises

If within the **Period of Insurance** a **Visitor** or student on a work experience placement on the **Insureds Premises** suffers **Accidental Bodily Injury** which, within twelve (12) months thereof solely, directly and independently of any other cause results in **Death, Permanent Partial Disablement** or **Permanent Total Disablement** the Insurer will pay at the request of **the Insured** a sum to each such individual or their legal representatives.

Death	£30,000
Permanent Partial Disablement	£30,000
Permanent Total Disablement	£30,000

2 Spouse and Children

Provided that an **Insured Person** is

- a a Director or Employee of the Insured and
- b is Insured with an Operative Time of Occupational, Occupational including Commuting or 24 Hour

then if within the **Period of Insurance** their **Spouse** or **Dependant Child** sustains **Accidental Bodily Injury** which, within twelve (12) months solely, directly and independently of any other cause results in **Permanent Partial Disablement, Permanent Total Disablement** or **Quadriplegia** the Insurer will pay at the request of **the Insured** a sum to each such individual or their legal representatives.

Permanent Partial Disability	£30,000
Permanent Total Disability	£30,000
Quadriplegia	£100,000

3 Guests or Contractors of the Insured

If within an **Insured Trip** a guest or contractor of the **Insured** sustains **Accidental Bodily Injury** which, within twelve (12) months solely, directly and independently of any other cause results in **Death, Permanent Partial Disablement** or **Permanent Total Disablement** the Insurer will pay at the request of **the Insured** a sum to each such individual or their legal representatives.

Death	£30,000
Permanent Partial Disablement	£30,000
Permanent Total Disablement	£30,000

4 Members of the public rendering assistance

If within the **Period of Insurance** an individual who is not a member of the emergency services whilst trying to save the life of an **Insured Person** sustains **Accidental Bodily Injury** which, within twelve (12) months solely, directly and independently of any other cause results in **Death, Permanent Partial Disablement** or **Permanent Total Disablement** the Insurer will pay at the request of **the Insured** a sum to each such individual or their legal representatives.

Death	£30,000
Permanent Partial Disablement	£30,000
Permanent Total Disablement	£30,000

Personal Accident Section (continued)

Assault Injury Enhanced Benefit

If an **Insured Person** sustains **Accidental Bodily Injury** as a direct result of a unprovoked physical assault whilst they are acting in connection with the **Business of the Insured** which causes **Death, Permanent Partial Disablement or Permanent Total Disablement** the **Insurer** will pay the **Insured** an additional **Benefit** equivalent to 10% of the **Capital Sum Benefit** amount shown in the **Schedule** for the **Insured Person**.

The maximum amount payable in respect of this additional **Benefit** is £25,000 in respect of any one **Insured Person**.

Bereavement counselling

If within the **Operative Time** an **Insured Person** or **Additional Insured Person** sustains **Accidental Bodily Injury** resulting in **Death** the **Insurer** shall indemnify the **Insured** for fees charged by a bereavement counsellor registered with the British Association for Counselling and Psychotherapy or equivalent body in the **Insured Person's Country of Residence** for up to five one hour sessions of bereavement counselling for the **Spouse** and/or **Dependant Adult** and/or **Dependant Child(ren)** of the **Insured Person** where such counselling is on the medical advice of a **Qualified Medical Practitioner**.

The maximum amount payable for such sums for any one **Insured Person** £2,000.

Catastrophe

If during the **Operative Time** any single **Loss** results in payment of the **Death Benefit** for five or more **Directors** or **Employees** of the **Insured** who are all covered by this **Policy** the **Insurer** will increase their **Sum Insured** by 25% subject to the **Accumulation Limits** shown on the **Schedule**.

Childcare Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Permanent Partial Disablement** or **Permanent Total Disablement** the **Insurer** shall indemnify the **Insured** for the benefit of the **Insured Person** for reasonable expenses necessarily incurred for the services of a registered childcare provider but only in respect of additional costs that would not otherwise have been incurred up to a maximum period of one hundred and four (104) weeks.

The maximum amount payable for such sums for any one **Insured Person** £5,000.

Crisis Management

If within the **Period of Insurance** an **Insured Person** or **Additional Insured Person** sustains **Accidental Bodily Injury** resulting in **Death Permanent Partial Disablement** or **Permanent Total Disablement** the **Insurer** shall indemnify the **Insured** costs incurred for

- i Fees of a Public Relations consultant approved by the **Insurer**
- ii the cost of releasing information to the media via the most appropriate route, including but not limited to radio, television, newspaper and Internet.

Provided that

- a the **Insured** is subject to negative publicity in the local or national media and
- b the **Insured** agree to contribute 20% of i and ii and
- c costs must be incurred within thirty (30) calendar days of **Accidental Bodily Injury**.

The maximum amount payable for the **Period of Insurance** is £50,000

Dental Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Dental Injury** the **Insurer** shall indemnify the **Insured** for the benefit of the **Insured Person** up to £2,500 for reasonable expenses necessarily incurred on the advice of a **Qualified Medical Practitioner**.

Dependant Adult and Child Benefit

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Death** and the **Insurer** pays a **Death Benefit** for that **Insured Person**, the **Insurer** will in addition pay

- a £25,000 for each **Dependant Adult**
- b £7,500 for each **Dependant Child**

Personal Accident Section (continued)

The maximum amount payable for all such dependants for any one **Insured Person** is £50,000. Any **Dependant Adult** or **Dependant Child** shall only receive one payment irrespective of the number of **Insured Persons** killed in the same Loss.

Domestic Assistance Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Permanent Partial Disablement** or **Permanent Total Disablement** the **Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** up to £100 per week for reasonable expenses necessarily incurred in employing a bona fide domestic services company for domestic assistance provided to the **Insured Person** at their residence.

The maximum amount payable is £10,400 in respect of any one **Insured Person**.

Enhanced Permanent Total Disablement Benefit

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Paraplegia** or **Quadriplegia** or **Hemiplegia** or **Triplegia** and the **Benefit** for **Permanent Total Disablement** becomes payable, **the Insurer** will in addition pay **the Insured** one of the following benefits:

Paraplegia	£50,000
Quadriplegia	£125,000
Hemiplegia	£50,000
Triplegia	£85,000

First Aid Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** the **Insurer** will pay for expenses necessarily incurred by the **Insured Person** for immediate and urgent treatment incurred in the **United Kingdom** or the **Insured Person's Country of Residence** up to a maximum of:

- i £25,000 in respect of any one **Insured Person**
- ii £1,000 to replace a workplace defibrillator or its consumables.

Fracture benefit

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in a break to the full thickness of a bone that does not result in a claim payment under any other **Benefit** the **Insurer** will pay for fracture of the:

- i hip or pelvis (excluding coccyx or thigh) £750
- ii femur or heel £750
- iii skull (excluding jaw and nose), lower leg, collar bone, ankle, elbow, upper or lower arm (including the wrist but not a Colles fracture) £500
- iv spine (vertebrae but excluding coccyx) £750

Up to a maximum payment of £2,500 for all fractures.

The **Insurer** will pay this extension only once during the lifetime of the policy if the **Insured Person** is diagnosed with osteoporosis prior to or as a result of the **Accidental Bodily Injury** that results in a claim under this policy.

Funeral Expenses and Urgent Estate Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in payment of the **Death Benefit** of that **Insured Person**, the **Insurer** will in addition pay to their legal representatives

- a the reasonable costs incurred with the **Insurer's** prior written consent for the funeral expenses of that **Insured Person**.

The maximum amount payable for such costs for any one **Insured Person** is £10,000.

- b reasonable expenses necessarily 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** whilst the administration of the estate is being arranged.

The maximum amount payable for such expenses for any one **Insured Person** is £2,000.

Personal Accident Section (continued)

Hospitalisation Benefits

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** results in **Hospitalisation** on the recommendation of a **Qualified Medical Practitioner** the **Insurer** will pay the **Insured** the following amounts:

a In-Patient Benefit

£50 for each continuous twenty four (24) hour period that the **Insured Person** spends in **Hospital** as an in-patient.

b Coma Benefit

if the **Insured Person** is in a Coma an additional sum of £50 for each full day of the Coma.

The maximum amount payable for In-Patient **Benefit** and Coma **Benefit** is £37,500 in respect of any one **Insured Person**.

c Convalescence Benefit

£50 for each continuous twenty four (24) hour period of convalescence immediately following **Hospitalisation** during which the **Insured Person** is confined to their home or a registered nursing home on the recommendation a **Qualified Medical Practitioner**.

The maximum amount payable is £2,000 in respect of any one **Insured Person**.

Independent Financial Advice

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Death** or **Permanent Partial Disablement** or **Permanent Total Disablement** the **Insurer** shall indemnify the **Insured** up to £2,500 for the benefit of the **Insured Person** for fees charged by an Independent Financial Adviser authorised and regulated by the Financial Conduct Authority or equivalent regulatory authority in the **Insured Person's Country of Residence** to provide the **Insured Person** with two sessions of professional financial advice.

Modification Expenses Benefit

If within the **Operative Time** an **Insured Person** suffers **Accidental Bodily Injury** resulting in the **Benefit** for **Permanent Partial Disablement** or **Permanent Total Disablement** being paid, the **Insurer** will in addition pay the necessary costs incurred with the **Insurer's** prior written consent of alterations that need to be made to

- i adapt the usual residence,
- ii usual vehicle for Loss of Limb only or
- iii usual **Business Premises** of the **Insured Person** to cater for their medical needs.

The maximum amount payable for such costs for any one **Insured Person** is £25,000.

Optical Expenses

If within the **Operative Time** an **Insured Person** suffers **Accidental Bodily Injury** resulting in the need for immediate and urgent eye treatment required to prevent long term damage, the **Insurer** will pay up to £500 towards the costs of treatment.

Personal Property

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in damage to or loss of any **Personal Property** that is not insured elsewhere the **Insurer** will pay to the **Insured Person** the **Replacement Value** of or reasonable costs of repair to the **Personal Property**.

The maximum amount payable for such costs for any one **Insured Person** is £1,000.

Recruitment Expenses

If within the **Operative Time** an **Insured Person**

- a sustains **Accidental Bodily Injury** resulting in **Death** or **Permanent Total Disablement** or
- b the **Insured Person** commits suicide

the **Insurer** shall indemnify the **Insured** for reasonable expenses necessarily incurred in employing a registered recruitment company to recruit a permanent **Employee** as a direct replacement for the **Insured Person**.

The maximum amount payable for such sums for any one **Insured Person** £5,000.

Personal Accident Section (continued)

Rehabilitation Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** that the **Insurer** agrees is likely to result in **Permanent Partial Disablement, Permanent Total Disablement, Temporary Total Disablement or Temporary Partial Disablement** becoming payable the **Insurer** will pay for rehabilitation and necessary travel costs to facilitate the **Insured Person's** return to employment or adjustment to their permanent disability provided that the:

- i **Insured Person** was not over sixty five (65) years of age when **Accidental Bodily Injury** occurred
- ii **Insured Person** was an **Employee of the Insured**
- iii **The Insurer's** prior written approval of any rehabilitation or transport costs is obtained
- iv the **Insured Persons** rehabilitation plan is under the supervision of **the Insurer**

The amounts payable in respect of any one **Insured Person** are

- a up to £2,000 for Physiotherapy
- b up to £100 per week for reasonable expenses necessarily incurred for the services of a taxi or other additional travel costs to convey the **Insured Person** from their usual place of employment or residence to **Hospital**. The maximum amount payable for such sums for any one **Insured Person** is £3,000.
- c up to £100 per day for reasonable expenses necessarily incurred for the services of a taxi or other additional travel costs organised by **the Insured** if the **Insured Person** is unable to commute to their usual place of employment using the method of transport they normally used prior to the **Accidental Bodily Injury**

This benefit shall cease

- i when the **Insured Person** becomes capable of resuming the use of their usual mode of transport or
- ii when the **Insured Person** ceases to be entitled to **Temporary Partial Disablement** or
- iii fifty two (52) weeks after the date of the **Accidental Bodily Injury**

whichever is the earlier. The maximum amount payable for such sums for any one **Insured Person** is £10,000.

- d up to £250 per week up to a maximum of fifty two (52) weeks for other rehabilitation costs planned for returning the **Insured Person** to employment with **the Insured**.

or

up to the £25,000 up to a maximum of fifty two(52) weeks for other rehabilitation costs planned for returning the **Insured Person** to employment.

- e up to 10% of the **Loss of Limb(s) Benefit** paid or £75,000 whichever the lesser for the costs of prosthesis including any consultation costs.
- f up to 20% of the **Loss of Limb(s) or Loss of Sight Benefit** paid or £30,000 whichever the lesser for costs and associated expenditure of Specialist Equipment for the purpose of participation in a sport that forms part of the **Insured Persons** rehabilitation plan is under the supervision of the Insurer.

Relocation Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Permanent Partial Disablement or Permanent Total Disablement** the **Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** for stamp duty payments solicitor and estate agent fees and removal costs necessarily incurred with **the Insurer's** prior written consent as a direct consequence of the **Insured Person** having to move from their permanent residence to an alternative place of residence suitable for their medial needs.

The maximum amount payable for such sums for any one **Insured Person** £25,000.

Retraining Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Permanent Total Disablement** the **Insurer** will pay for retraining costs to facilitate the **Insured Person's** return to gainful employment provided that the:

- i **Insured Person** was an **Employee of the Insured**
- ii **The Insurer's** prior written approval of any retraining costs is obtained.

The maximum amount payable is £25,000 in respect of any one **Insured Person**.

Personal Accident Section (continued)

Retraining Expenses for Spouse of Insured Person

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Permanent Total Disablement** the **Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** for reasonable expenses necessarily incurred by the **Spouse** of the **Insured Person** in training for an occupation or retraining for an alternative occupation up to a maximum period of twenty six (26) weeks.

The maximum amount payable for such sums for any one **Insured Person** £15,000.

Return to Residence from Hospital Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in the **Insured Person** being physically incapacitated and unable to return to their residence for a period in excess of forty eight (48) hours **the Insurer** shall indemnify **the Insured** up to £500 for the benefit of the **Insured Person** for any reasonable additional costs necessarily incurred in returning the **Insured Person** and their **Personal Property** to their residence.

Simultaneous Death of the Insured Person and Spouse

If within the **Period of Insurance** both an **Insured Person** and their **Spouse** sustain **Accidental Bodily Injury** resulting in **Death** in the same event and they leave bereaved a **Dependant Adult** or **Dependant Child** then **the Insurer** will double the **Benefit** payable for **Death** of the **Insured Person** or their **Spouse** whichever is the largest amount.

Temporary Replacement Staff Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Death, Permanent Partial Disablement** or **Permanent Total Disablement** the **Insurer** shall indemnify **the Insured** for reasonable costs necessarily incurred in employing a temporary **Employee** recruited through a registered recruitment company to directly replace the **Insured Person** up to £500 per week for a maximum period of twenty six (26) weeks.

The maximum amount payable for such sums for any one **Insured Person** is £5,000.

Total Blindness

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in total Loss of Sight in both eyes **the Insurer** shall pay £50,000 to **the Insured** for the benefit of the **Insured Person**. The **Sum Insured** for Total Blindness is payable in addition to the **Loss of Sight Sum Insured** stated in the **Schedule**.

Training Interruption Benefit

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** that prevents them from attending training or examinations that are required for their employment by **the Insured** **the Insurer** shall indemnify **the Insured** for

- i costs incurred to resit the training or examinations for the **Insured Person** up to £1,000
- ii the difference between pre and post qualification Weekly Wage as demonstrated by **the Insured's** published pay structure up to £100 per week a maximum period of twenty six (26) weeks.

The maximum amount payable for such sums for any one **Insured Person** is £5,000.

Personal Accident Section (continued)

Trauma Counselling

If within the **Operative Time** an **Insured Person**

- a is a victim of an unprovoked malicious assault by another person that has been reported to the police or
- b directly witnesses an act of **Terrorism** and are interviewed by the police as a witness or
- c directly witnesses the **Death** or **Permanent Partial Disablement** or **Permanent Total Disablement** of
 - i their parent or
 - ii **Spouse** or
 - iii Child or
 - iv **Dependant Child** or
 - v **Dependant Adult** or
 - vi colleague at the **Premises** of the Insured
- d sustains **Accidental Bodily Injury** which resulting in **Permanent Partial Disablement** or **Permanent Total Disablement**

and are diagnosed by a **Qualified Medical Practitioner** as suffering from Post Traumatic Stress Disorder within 90 days of the above mentioned incidents **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** fees charged by a trauma counsellor registered with the British Association for Counselling and Psychotherapy or equivalent body in the **Insured Person's Country of Residence** for up to five one hour sessions of counselling for the **Insured Person**.

The maximum amount payable for such sums for any one **Insured Person** is £2,500.

Travel to Hospital Expenses for family

If an **Insured Person** is receiving the **Hospitalisation Benefits the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** for reasonable expenses necessarily incurred for the services of a chauffeur or taxi or other additional travel costs to convey a **Spouse**, Child, **Dependant Child** or **Dependant Adult** or parent of the **Insured Person** from their residence to the **Hospital** where the **Insured Person** is an In-Patient up to £100 per week a maximum period of 52 weeks.

The maximum amount payable for such sums for any one **Insured Person** £3,000

Sickness Section

Cover

The Insurer will pay the Insured the Sum Insured shown in the Schedule if the Insured Person contracts a Sickness during the Period of Insurance.

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim arising out of or consequent upon or contributed to directly or indirectly by any

- 1 **Sickness** for which medical advice or treatment has been sought or received by the **Insured Person** in the twelve (12) calendar months prior to the original first **Period Of Insurance** or commencement of this **Sickness Section**
- 2 **Sickness** resulting from the **Insured Person** failing to follow advice of a **Qualified Medical Practitioner**
- 3 **Sickness** which commences within the first 28 days after the date from which an **Insured Person** first becomes covered under this **Sickness Section** unless the **Insured Person** was covered by another sickness insurance immediately prior to this **Sickness Section**
- 4 **Sickness** which is suffered as a result of the **Insured Person** being pregnant or giving birth unless **Sickness** arises from a diagnosed medical complication which is not a normal symptom of pregnancy or childbirth.
- 5 **Sickness** contracted by an **Insured Person** who is over sixty five (65) years of age at the start of the latest **Period Of Insurance**

Business Travel Section – Suggested action before you travel

The Insured or **Insured Persons** may also choose to consider the following services which are totally independent of and are not part of this policy:

Foreign, Commonwealth & Development Office (FCDO) Travel Advice

The FCDO periodically issue guidelines about locations around the world and whether it is advisable to travel to, or within, such locations.

It is strongly recommended that the Insured consults the travel advice section of the FCDO website (gov.uk/foreign-travel-advice) before allowing an **Insured Person** to travel.

Note: Advice from the FCDO will be relevant to the cover provided by **Item 7 – Political Evacuation**.

Global Health Insurance Card (GHIC)

A GHIC entitles a person to reduced-cost, sometimes free, medical treatment that becomes necessary while they are in a European Union (EU).

Subject to restrictions, people who are ordinarily resident in the UK are entitled to a GHIC. There will be a transition period between the old EHIC and new GHIC card.

A person can apply for a GHIC:

- a** by phone on 0300 330 1350
- b** on-line at nhs.uk/ghic

In addition to the above the **Policy** also provides **The Allianz Travel Oracle website & mobile App**

Download and registration details are in the **Policy** introduction.

Business Travel Section Item 1 – Medical and Emergency Travel Expenses

24-hour Emergency Medical Assistance

We are open 24 hours a day, 365 days a year.

Phone: **+44 (0)1483 265696**

You must contact us immediately about any serious illness or accident where you have to go in to hospital, return home early or extend your stay.

For minor illnesses or accidents needing simple outpatient treatment where the medical expenses are under £500, if possible, please pay the bills, keep the receipts and make a claim when you return home.

Our experienced multi-lingual medical assistance team will take full details of the emergency and can help in the following ways:

- Contacting hospitals and the doctors who are treating you. Monitoring your treatment with our medical advisers.
- Contacting your medical practitioner to confirm your medical history, where necessary. Making sure hospital and medical bills are guaranteed, where you have a valid claim. Making sure relatives or travelling companions are kept up to date.
- Arranging travel and accommodation for someone to stay with you (where medically necessary).
- Deciding and arranging the most suitable, practical and reasonable way to bring your way home. This will normally be by regular airline or road ambulance but, where medically necessary, an air ambulance or air taxi with trained medical escorts will be organized. We can also arrange for you to be admitted in to a hospital in your home country.

Note: This is not a private medical insurance policy and only gives cover for emergency medical treatment if you have an accident or suffer an unexpected illness.

For Non-Emergency Medical related claims please refer to Notifying a Claim: Allianz Claims Handling Office Telephone Numbers within the Introduction of this **Policy**.

Cover

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** or becomes ill outside the United Kingdom or their **Country of Residence** the **Insurer** will reimburse **the Insured** (in the case of a **Business Trip**) or **Insured Person** (if otherwise) for additional costs necessarily incurred by **the Insured** following the death, injury or illness of an **Insured Person** for:

a Medical Expenses outside the United Kingdom

All costs necessarily incurred outside the **United Kingdom** or outside of the **Country of Residence** of the **Insured Person** within two years as a result of the injury or illness of an **Insured Person** for reasonable costs for:

- i medical, hospital, surgical, remedial or diagnostic treatment
- ii attention given or prescribed by a registered medical practitioner or nursing home
- iii ambulance fees
- iv dental and optical treatment provided that such treatment is necessarily incurred by reason of a medical, dental or optical emergency.

b Continued Medical Expenses inside the United Kingdom

Medical expenses necessarily incurred, and not otherwise available from the National Health Service, by an **Insured Person** in the **United Kingdom** within six (6) months from the date of return from an **Insured Trip** during which a claim under this **Section** of the **Policy** for the same continuing injury or illness has been accepted by **the Insurer** up to but not exceeding £50,000 any one **Loss** provided that **the Insurer's** written approval is obtained before any expenses are incurred.

Business Travel Section Item 1 – Medical and Emergency Travel Expenses (continued)

c Emergency Travel Expenses

Additional costs necessarily incurred following the death, injury or illness of an **Insured Person** for the:

i Repatriation Costs

The cost of repatriation of an **Insured Person** to the **United Kingdom** or their **Country of Residence** when in the opinion of the **Qualified Medical Practitioner** in attendance and **the Insurer's** medical advisers, **the Insured Person** is fit to travel.

ii Attendants Travel Expenses

Travel and accommodation expenses of up to three relatives or friends of an **Insured Person**, or a **Qualified Medical Practitioner**, who on medical advice is required to travel or remain with the **Insured Person** for the remainder of **the Insured Trip** to escort the **Insured Person** to his or her residence and/or work place as appropriate.

iii Body Transportation Costs

Transportation costs for the carriage of the body or ashes and the personal effects of the **Insured Person** back to their **Country of Residence** or at **the Insurer's** discretion, to any other country as requested by the **Insured Person's** immediate family or Legal Representatives (but not the cost of burial or cremation).

iv Immediate Family's Travel Expenses

Travel expenses in respect of any member of the **Insured Person's** immediate family who is travelling with the **Insured Person** in returning to the **United Kingdom** or their **Country of Residence** in the event of the **Insured Person** being medically repatriated.

The most **the Insurer** will pay for any one **Loss** is

- i expenses for up to two years from the date of injury or commencement of illness
- ii the **Sum Insured** shown in the **Schedule**
- iii £500 unless the **Insured** or the **Insured Person** has contacted and received agreement from the Emergency Medical Assistance service other than where immediate action is required to avert serious health or life threatening consequences. Failure to seek such prior advice and assistance may result in **the Insurer** declining to pay for any costs incurred.

Extensions

Childcare Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** or contracts an illness resulting in **Hospitalisation** outside their **Country of Residence** **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** for reasonable expenses necessarily incurred for the services of a registered childcare provider if on advice of a **Qualified Medical Practitioner** their **Spouse** is required to travel to or remain with the **Insured Person**.

The maximum amount payable for such sums for any one **Insured Person** £5,000.

Dental Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Dental Injury** **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** up to £2,500 for reasonable expenses necessarily incurred on the advice of a **Qualified Medical Practitioner**.

Domestic Animal Costs

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** or contracts an illness resulting in **Hospitalisation** outside their **Country of Residence**, **the Insurer** will pay up to £500 for the additional costs necessarily incurred by the **Insured Person** for additional domestic kennel or cattery fees for pets owned by or entrusted to the **Insured Person**.

Business Travel Section Item 1 – Medical and Emergency Travel Expenses (continued)

Funeral Expenses and Urgent Estate Expenses

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** or contracts an illness resulting in **Death** during an **Insured Trip** the **Insurer** will in addition pay

- a the reasonable costs incurred with the **Insurer's** prior written consent for the funeral expenses of that **Insured Person**.

The maximum amount payable for such costs for any one **Insured Person** is £10,000.

- b reasonable expenses necessarily 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** whilst the administration of the estate is being arranged.

The maximum amount payable for such expenses for any one **Insured Person** is £2,000.

Hospitalisation Benefits

If within the **Operative Time** an **Insured Person** sustains **Accidental Bodily Injury** or contracts an illness that results in **Hospitalisation** outside the **Insured Person's Country of Residence** on the recommendation of a **Qualified Medical Practitioner** the **Insurer** will pay the **Insured** the following amounts:

- a **In-Patient Benefit**
£75 for each full twenty four (24) hour period which the **Insured Person** spends in **Hospital** as an in-patient.
- b **Coma Benefit**
if the **Insured Person** is in a Coma an additional sum of £75 for each full day of the Coma.

The maximum total amount payable for In-Patient Benefit and Coma Benefit is £54,600 in respect of any one **Insured Person**.

c Convalescence Benefit

£75 for each full twenty four (24) hour period of convalescence during which the **Insured Person** is confined to his or her home or a registered nursing home on the recommendation of a **Qualified Medical Practitioner** upon discharge following a period of **Hospitalisation**.

The maximum total amount payable is £2,000 in respect of any one **Insured Person**.

Search and Rescue Costs

If within the **Operative Time** an **Insured Person** is reported as missing and a search or rescue is instigated by an approved rescue or police authority where

- a it is known or believed that the **Insured Person** has sustained **Accidental Bodily Injury** or has contracted illness
- b the **Insured Person** is believed to be at risk from suffering **Accidental Bodily Injury** or contracting illness due to weather and/or safety conditions

the **Insurer** will pay up to a maximum of £50,000 for the necessary and reasonable costs incurred.

Trauma Counselling

If within the **Operative Time** an **Insured Person**

- a is a victim of an unprovoked malicious assault by another person that has been reported to the police or
- b directly witnesses an act of **Terrorism** and are interviewed by the police as a witness or
- c directly witnesses the **Death** or **Permanent Partial Disablement** or **Permanent Total Disablement** of
 - i their parent or
 - ii Spouse or
 - iii Child or
 - iv Dependant Child or
 - v Dependant Adult or

Business Travel Section Item 1 – Medical and Emergency Travel Expenses (continued)

- d** sustains **Accidental Bodily Injury** which resulting in **Permanent Partial Disablement** or **Permanent Total Disablement** and is diagnosed by a **Qualified Medical Practitioner** as suffering from Post Traumatic Stress Disorder **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** fees charged by a trauma counsellor registered with the British Association for Counselling and Psychotherapy or equivalent body in the **Insured Person's Country of Residence** for up to five one hour sessions of counselling for the **Insured Person**.
- e** is the subject of a claim under the **Hijack and Kidnap** or **Political Evacuation Sections** of this **Policy**

The maximum amount payable for such sums for any one **Insured Person** is £2,500.

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim

- a** where an **Insured Person** is travelling:
 - i** against the advice of a **Qualified Medical Practitioner**
 - ii** for the specific purpose of receiving medical treatment or advice
- b** in the last month prior to the most recently advised expected date of delivery as a result of the **Insured Person** being pregnant or giving birth (unless disability arises from a diagnosed medical complication which is not a normal symptom of pregnancy or childbirth)
- c** for cosmetic treatment unless agreed by **the Insurer** and necessary as a result of **Accidental Bodily Injury**
- d** for costs of medication known by the **Insured Person** to be required or continued whilst on the **Insured Trip**
- e** for costs of private medical care in the **United Kingdom** or **Country of Residence** unless covered by **Continued Medical Expenses in the United Kingdom**
- f** for any expenses recoverable under Private Medical Insurance, International Private Medical Insurance, other travel insurance or national insurance programs that cover the **Insured Person**.

Business Travel Section Item 2 – Cancellation, Curtailment and Change of Itinerary

Cover

If during the **Period of Insurance** the Insured or the **Insured Person** is forced to

- a Cancel an **Insured Trip**
- b Curtail an **Insured Trip**
- c Replace an **Insured Person** on an **Business Trip**
- d Rearrange to resume an **Insured Trip**
- e Change the itinerary of a pre booked **Insured Trip**

as a direct and necessary result of any cause outside the control of the Insured or the **Insured Persons** control the Insurer will indemnify **the Insured** for

- i deposits and advance payments (on a proportionate basis in respect of Curtailment)
- ii charges for transport
- iii charges for accommodation and sustenance
- iv any other charges

reasonably and necessarily incurred and that are forfeit under contract or are not otherwise recoverable up to the **Sum Insured** and the **Cancellation, Curtailment and Change of Itinerary Accumulation Limit** shown in the **Schedule**.

Extensions

Delayed Departure

If within the **Operative Time** an **Insured Person** is delayed beyond the published departure time of the:

- a Aircraft
- b Sea vessel
- c Train

in which they are booked to travel during the **Period of Insurance** and **Operative Time** the **Insurer** will pay the Insured (in the case of a **Business Trip**) or the **Insured Person** (if otherwise)

£50 after the first four (4) hours delay

£50 for each subsequent full hour of delay

provided that the:

- i **Insured Person** checks in at the airport or port or other departure point designated by the relevant travel provider not later than the latest check in time indicated by the travel provider
- ii **The Insured** or **Insured Person** obtains written confirmation from the travel provider of the extent of and reason for any delay.

The maximum amount payable is £750 in respect of any one **Insured Person**.

Piste closure

If within the **Operative Time** an **Insured Person** is unable to ski or snow board at their pre-booked resort, because the ski-lifts and ski-schools that you are due to use are closed as a result of adverse weather conditions **the Insurer** will pay up to £50 per day for the cost of extra transport or lift passes to let you ski or snow board at another resort.

The maximum amount payable for any one **Insured Person** is £200.

Business Travel Section Item 2 – Cancellation, Curtailment and Change of Itinerary (continued)

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim in respect of

- a the disinclination of the **Insured Person** or companion or family member to travel
- b the **Insured Person** or family member or companion who accompanies the **Insured Person**:
 - i travelling or planning to travel against the advice of a **Qualified Medical Practitioner**
 - ii being pregnant where the cancellation, curtailment or re-arrangement occurs within one month of the most recently advised expected date of delivery for such person giving birth (unless disability arises from a diagnosed medical complication which is not a normal symptom of pregnancy or childbirth)
- c the cancellation or rescheduling of the intended purpose of the **Insured Trip**
- d the redundancy or the termination of employment of the **Insured Person**
- e the Insured or **Insured Person's** financial circumstances
- f the default of any provider (or their agent) of transport or accommodation, acting for the Insured or **Insured Person**.
- g **Strike or Industrial Action** affecting travel services which is in progress or which had been publicly threatened and/or publicly announced at the time of booking the **Insured Trip**
- h any delay due to the financial failure of the provider of the travel and/or accommodation services or the travel agent or tour operator acting for the Insured or **Insured Person**.
- i the costs recoverable under Business Travel **Section, Item 7 Political Evacuation**.
- j any Losses or claims in any way caused or contributed to by a **Cyber Event** or **Denial of Service**.
- k any **Insured Trip** booked prior to the start of this **Policy**.

Business Travel Section Item 3 – Personal Property

Cover

If within the **Operative Time** an **Insured Person** sustains theft or loss of or damage to **Personal Property** during an **Insured Trip** the **Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** the **Replacement Value** up to the **Sum Insured** per **Insured Person** shown in the **Schedule**.

Extensions

Automatic Reinstatement of Sums Insured

If within the **Operative Time** an **Insured Person** sustains theft loss of or damage to their **Personal Property** or **Travel Documents** or **Keys** during an **Insured Trip** the **Insurer** shall not reduce the amount of any such loss from the **Sum Insured** per **Insured Trip** shown in the **Schedule** for any subsequent loss that an **Insured Person** sustains during the same **Insured Trip**.

Business Equipment

If within the **Operative Time** an **Insured Person** sustains theft or loss of or damage to **Business Equipment** during an **Insured Trip** the **Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** the **Replacement Value** up to £3,000 per **Insured Trip**.

Delayed Personal Property

If within the **Operative Time** the **Personal Property** of an **Insured Person** is delayed during an **Insured Trip** the **Insurer** shall indemnify **the Insured** up to £2,000 for the benefit of the **Insured Person** for any reasonable expenses incurred by the **Insured Person** in purchasing essential replacement clothing toilet requisites and/or similar items.

Loss of Keys

If within the **Operative Time** an **Insured Person** sustains theft or loss of or damage to their **Keys** during an **Insured Trip** the **Insurer** shall indemnify **the Insured** up to £1,000 for the benefit of the **Insured Person** for the replacement and fitting costs of lock mechanisms and the reprogramming of remote control car keys.

Loss of Travel Documents

If within the **Operative Time** an **Insured Person** sustains theft or loss of or damage to **Travel Documents** during an **Insured Trip** or during a period of seven days immediately preceding the commencement of an **Insured Trip** or immediately following its completion the **Insurer** shall indemnify **the Insured** up to £2,000 for the benefit of the **Insured Person** for any reasonable additional costs for travel accommodation and other associated costs necessarily incurred to enable the **Insured Person** to obtain essential replacement **Travel Documents**.

Ski Equipment

If within the **Operative Time** the **Insured Person's** skis, ski poles, ski bindings, ski boots, snowboard, snowboard bindings and snowboard boots are:

- a lost or broken as the result of an accident;
- b lost or misplaced by an airline or other carrier on the outward journey and are delayed for at least twelve(12) hours after the arrival of the **Insured Person** at their destination;

during an **Insured Trip** to undertake Winter Sports the **Insurer** will pay the **Insured Person** up to £50 for each twenty four (24) hour period it is necessary for the **Insured Person** to hire replacement items up to a maximum amount of £200.

Business Travel Section Item 3 – Personal Property (continued)

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

Any claim under Business Travel Section, Item 3 (Personal Property) of this Policy in respect of:

- a loss/damage to, or theft of, deeds, securities or manuscripts
- b any property of
 - iii the Insured more specifically insured under this Policy or
 - iv the **Insured Person** more specifically insured under another insurance policy.
- c **Personal Property** stolen or lost from an unattended vehicle unless such **Personal Property** were in the locked boot or concealed in a covered luggage compartment of a fully locked vehicle
- d loss or damage caused by delay, detention or confiscation by order of any Government or Public Authority
- e any single item or set of skis, ski poles, ski binding, ski boots, snowboard, snowboard bindings and snowboard boots over £500 or any other single item or set of **Personal Property** over £3,000
- f any Losses or claims in any way caused or contributed to by a **Cyber Event** or **Denial of Service**.

Business Travel Section Item 4 – Money

Cover

If within the **Operative Time** an **Insured Person** sustains theft or loss of or damage to **Money** during an **Insured Trip** or during a period of one hundred and twenty hours (120) either immediately preceding the commencement of an **Insured Trip** or immediately following its completion **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** up to the **Sum Insured per Insured Trip** shown in the **Schedule**.

Extensions

Automatic Reinstatement of Sums Insured

If within the **Operative Time** an **Insured Person** sustains theft loss of or damage to **Money** during an **Insured Trip** **the Insurer** shall not reduce the amount of any such loss from the **Sum Insured per Insured Trip** shown in the **Schedule** for any subsequent loss that an **Insured Person** sustains during the same **Insured Trip**.

Financial Card and Cheque Misuse

If within the **Operative Time** an **Insured Person** sustains theft or loss of a **Financial Card** or **Cheque** during an **Insured Trip** **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** for any financial loss incurred directly as a result of the **Financial Card** or **Cheque** being fraudulently used up to the **Money Sum Insured per Insured Trip** shown in the **Schedule**.

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim in respect of

- a** loss of monetary value due to depreciation
- b** **Money** stolen or lost from an unattended vehicle
- c** loss of Coins or Banknotes in excess of £3,000
- d** loss of or theft of a **Financial Card** or **Cheque** not reported to the police or other appropriate authority within forty eight (48) hours of the discovery of the loss or sooner as required by the **Financial Card** or **Cheque** issuer
- e** any Losses or claims in any way caused or contributed to by a **Cyber Event** or **Denial of Service**.

Business Travel Section Item 5 – Personal Liability

Cover

If within the **Operative Time** an **Insured Person** on an **Insured Trip** becomes legally liable to pay the amount of any damages or other costs or expenses which result from the **Insured Person** causing death or bodily injury to third parties, or accidental loss of or damage to their property during the **Period of Insurance** and **Operative Time** up to the limit of indemnity shown in the **Schedule** in respect of any one **Loss**

provided that:

- i the Insured or the **Insured Person** must give immediate notice to **the Insurer** of any occurrence which may result in a claim under this **Section** of this **Policy** even if no notice of impending prosecution, inquest or inquiry has been issued to **the Insured** or **Insured Person**. **The Insured** or **Insured Person** must notify **the Insurer** immediately in writing if any notice of prosecution, inquest or inquiry is received by **the Insured** or **Insured Person**.
- ii **the Insured** or **Insured Person** must provide **the Insurer** with all information or documentation that the Insurer requests in connection with any occurrence which may result in a claim under this Section of the Policy.
- iii **the Insured** or **Insured Person** must forward to **the Insurer** every letter, writ or summons received by the **Insured Person** or **the Insured** in connection with any occurrence that is or may be the subject of a claim under this **Section** of this **Policy** immediately it is received.
- iv **the Insured** or **Insured Person** must not make any admission of liability, offer or promise or payment without **the Insurer's** specific written consent.
- v **the Insurer** is able at its discretion to take over the **Insured Person's** rights and conduct the defence or settlement of any claim in the name of the **Insured Person** and **the Insurer** is able to prosecute any other persons at its own expense and for its own benefit and the **Insured Person** gives **the Insurer** all information and assistance as the Insurer may require.
- vi **the Insurer** may at any time and at its sole discretion pay to the **Insured Person** an amount equal to the Limit of Indemnity shown in the **Schedule** or any lower amount for which any claim or claims can be settled and in that event **the Insurer** will not be under any further liability.

Extensions

Court Attendance

If, during the **Period of Insurance**, an **Insured Person** is required to attend Court in connection with a claim under this **Section** of the **Policy**, **The Insurer** will pay compensation to **The Insured** of £500 for each day of attendance up to a maximum of £20,000.

Rental Vehicle Excess

If within the **Operative Time** an **Insured Person** sustains loss of or theft of or damage to a **Rental Vehicle** during an **Insured Trip** **the Insurer** shall indemnify **the Insured** for the benefit of the **Insured Person** in respect of the monetary amount that the **Insured Person** is legally liable to pay as an excess or deductible to that part of a **Rental Vehicle** insurance policy or any other insurance policy applicable to the **Insured Person** for which cover in respect of loss of or theft of or damage to a **Rental Vehicle** is in force up to £25,000 per **Insured Trip**.

Business Travel Section Item 5 – Personal Liability (continued)

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim in respect of

- a bodily injury caused to any member of the **Insured Person's** immediate family or loss or damage caused to property belonging to or in the custody or control of the **Insured Person** or any member of the **Insured Person's** immediate family or employee or any servant or agent of the **Insured Person**
- b bodily injury or loss of or damage to property which arises whilst the **Insured Person** is performing any duty or action in connection with the **Business** of the **Insured** or any other business occupation or profession of the **Insured Person**
- c bodily injury or loss of or damage to property which arises out of the ownership, possession or use of or legal responsibility for any:
 - i land or buildings
 - ii mechanically propelled or towed vehicle
 - iii aircraft, hovercraft or watercraft
 - iv animal (of a species defined as a dangerous species in the Animals Act 1971 or the Dangerous Dogs Act 1991 or Dangerous Dogs Act (Amendment) 1996) by the **Insured Person**
- d Liability in respect of fines, penalties, or liquidated damages, punitive, exemplary or aggravated damages
- e any loss or damage occurring in any country outside the **United Kingdom** in which the Insured Person owns premises or is resident or domiciled
- f Liability arising directly or indirectly by or through or in connection with any or malicious or unlawful act or omission
- g Liability loss or damage for which indemnity is provided under any other insurance.
- h any Loss unless the **Insured Person** has complied with all requirements of the **Rental Vehicle** Agreement and of the **Rental Vehicle** insurance policy or any other insurance policy applicable to the **Insured Person** under which the **Insured Person** is claiming in respect of loss of or theft of or damage to the **Rental Vehicle**
- i any loss of or damage to a **Rental Vehicle** arising out of wear and tear gradual deterioration mechanical or electrical failure not attributable to accidental damage and damage that existed at the commencement of the period of rental
- j any loss or damage to a **Rental Vehicle** caused deliberately by the **Insured Person**.
- k any **Losses** or claims in any way caused or contributed to by a **Cyber Event** or **Denial of Service**.

Business Travel Section Item 6 – Hijack and Kidnap

24-hour Emergency Assistance

We are open 24 hours a day, 365 days a year.

Phone: **+44 (0)1483 265696**

Cover

If within the **Operative Time** an **Insured Person** is the victim of **Hijack**, Kidnap or is **Taken Hostage** the **Insurer** will pay

- a** the **Insured** (in the case of a **Business Trip**) or **Insured Person** (if otherwise) £500 for each complete twenty four (24) hour period that the **Insured Person** is held.
- b** for expenses necessarily incurred for the engagement of the **Insurers** security consultants

The maximum amount payable is the **Sum Insured** shown in the **Schedule** in respect of any one **Insured Person** subject to a maximum of £250,000 for all **Losses** in any one **Period of Insurance**.

Extensions

If the **Insured Person** is subject to a claim under the **Hijack and Kidnap Section** the **Period of Insurance** in respect of that **Insured Person** is automatically extended for up to fifty two (52) weeks or until they return to their usual residence.

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim in respect of:

- a** **Hijack** or being **Kidnapped/Taken Hostage** when the scheduled destination of the flight is or is by way of a country in a state of **War**
- b** being **Kidnapped/Taken Hostage** where the **Insured Person** is **Kidnapped/Taken Hostage** in a country that is in a state of **War**
- c** ransom payments, or reimburse payment of promises of payments of any kind made to secure the release of an **Insured Person**.
- d** confinement of an **Insured Person** by a member of their own family
- e** expenses incurred without prior consent of the **Insurer** or their Assistance provider

Business Travel Section Item 7 – Political Evacuation

24-hour Emergency Assistance

We are open 24 hours a day, 365 days a year.

Phone: **+44 (0)1483 265696**

Cover

If within the **Operative Time** an **Insured Person** is forced to leave the local country or area within the local country during an **Insured Trip** outside their **Country of Residence** as a direct and necessary result of the recommendation of

- a **the Insurer** and **the Insured** agreeing that the **Insured Person** is exposed to a life threatening situation or
- b **United Kingdom** Government via the Foreign, Commonwealth & Development Office (FCDO) or
- c the government of the **Insured Persons Country of Residence** or
- d any legally empowered regulatory governmental or local authority in the country or region in which the **Insured Person** is travelling

the Insurer will reimburse **the Insured** on behalf of the **Insured Person** for all necessary and legitimate expenses incurred for travel accommodation and emergency costs up to the **Sum Insured** shown in the **Schedule** in respect of any one **Insured Person** subject to the **Cancellation, Curtailment and Change of Itinerary Accumulation Limit**.

Section Exclusions

The Policy Exclusions apply to this Section and in addition:

The Insurer will not pay for any claim in respect of

- a any cost recoverable under Business Travel **Section, Item 2 Cancellation, Curtailment and Change of Itinerary**
- b the **Insured Person** not following the regulations laws or advice of the government of the **United Kingdom** or local country or their respective law enforcement or armed forces
- c any cost incurred if the **Insured Person** is a resident of the local country
- d the **Insured Person** not having the correct visa passport work permits or other documents for necessary for the **Insured Trip**.

Business Travel Section Item 8 – Legal Expenses

Definitions that only apply to Item 8 Legal Expenses

Allianz Legal Protection

Allianz Legal Protection, a trading name of the Insurer. Their address is: Allianz – ALP, PO Box 10623, Wigston, LE18 9HJ.

Limit of Indemnity

The most Allianz Legal Protection will pay for all Legal Costs for all claims arising from one Insured Event is £50,000.

Territorial Limits

Great Britain, Northern Ireland, the Channel Islands, The Isle of Man, any member country of the European Union and Iceland, Lichtenstein, Norway and Switzerland.

Insured Event

A sudden and specific event that causes death or bodily injury to an **Insured Person**.

Legal Representative

The solicitor or other person appointed with Allianz Legal Protection's agreement under this **Policy** to represent the **Insured Person**.

At any time before Allianz Legal Protection agree that legal proceedings need to be issued, Allianz Legal Protection will choose the Legal Representative. The Legal Representative that Allianz Legal Protection choose will be one of Allianz Legal Protection's approved specialist solicitors.

The **Insured Person** can only choose the Legal Representative if Allianz Legal Protection agree that legal proceedings need to be issued or if a conflict of interest arises which means that the Legal Representative cannot act for the **Insured Person**.

The **Insured Person** must send his or her name to Allianz Legal Protection. If Allianz Legal Protection agree to appoint a Legal Representative that the **Insured Person** chooses, he or she will be appointed on the same terms as Allianz Legal Protection would have appointed one of Allianz Legal Protection's approved specialist solicitors. Allianz Legal Protection may decide not to accept the **Insured Person's** choice of Legal Representative. If Allianz Legal Protection do not agree with the **Insured Person's** choice, the matter will be settled using the procedure in condition 6 of this **Section**.

When choosing the Legal Representative, the **Insured Person** must remember the **Insured Person's** duty to keep the Legal Costs of any legal proceedings as low as possible.

Legal Costs

- 1 The professional fees and expenses reasonably and properly charged by the Legal Representative, up to Guideline Hourly Rates set by the Senior Court Costs Office, which cannot be recovered from the **Insured Person's** opponent.
- 2 The **Insured Person's** opponents Legal Costs which the **Insured Person** is ordered to pay by a court or tribunal.

Allianz Legal Protection will only pay Legal Costs which Allianz Legal Protection consider are necessary and in proportion to the value of the **Insured Person's** claim. Allianz Legal Protection will only start to cover Legal Costs from the time Allianz Legal Protection has accepted the claim and appointed the Legal Representative.

Journey

Any period during which an **Insured Person** is away from his or her normal place of work, as long as

- 1 The **Insured Person** is away for at least 24 hours.
- 2 It is within the **Period of Insurance** and within the Territorial Limits.

Business Travel Section Item 8 – Legal Expenses (continued)

Cover

Allianz Legal Protection will pay the **Legal Costs** of the **Insured Person** taking legal action as a result of an **Insured Event**. The **Insured Event** must happen during the course of a **Journey** within the **Territorial Limits** and any legal action must be brought within the **Territorial Limits**.

Making a Claim under Item 8

To make a claim under this **Section**, the **Insured Person** should telephone Allianz Legal Protection on **0370 241 4140** and quote Master **Policy** Number 34445.

Allianz Legal Protection will send a claim form to the **Insured Person** who must complete the claim form and send it back to Allianz Legal Protection at

The Claims Department,
Allianz – ALP, PO Box 10623,
Wigston, LE18 9HJ

Allianz Legal Protection will contact the **Insured Person** once Allianz Legal Protection has received the claim form. The **Insured Person** must not appoint a solicitor. If the **Insured Person** has already seen a solicitor before Allianz Legal Protection has accepted the **Insured Person's** claim, Allianz Legal Protection will not pay any fees or other expenses that the **Insured Person** has incurred. If the **Insured Person's** claim is covered, Allianz Legal Protection will appoint the **Legal Representative** that they have agreed to in the **Insured Person's** name and on the **Insured Person's** behalf and will only start to cover the **Legal Costs** from the time Allianz Legal Protection has accepted the claim and appointed the **Legal Representative**.

Exclusions

That only apply to Item 8 – Legal Expenses

Allianz Legal Protection will not pay for the following:

- 1 Any amount of money that the **Insured Person** agrees to or has to pay to any **Legal Representative** out of any compensation or damages that the **Insured Person** receives.
- 2 Any claim relating to the **Insured Person** driving a motor vehicle
- 3 Any claim relating to medical treatment.
- 4 Any costs incurred before Allianz Legal Protection have accepted the **Insured Person's** claim in writing.
- 5 Any Legal Costs Allianz Legal Protection has not agreed to in writing.
- 6 Any fines or penalties.
- 7 Disputes between the **Insured Person** and:
 - any other person covered by this **Policy**;
 - someone the **Insured Person** lives with or has lived with;
 - **the Insured**; or
 - Allianz Legal Protection
- 8 Any claim which happens because the **Insured Person** has deliberately, consciously, intentionally or carelessly failed to take all reasonable steps to avoid, prevent and limit that claim.
- 9 An application for a judicial review.
- 10 Any dispute to do with written or verbal remarks which damage the **Insured Person's** reputation.

Business Travel Section Item 8 – Legal Expenses (continued)

- 11** Any claim directly or indirectly caused by or resulting from any equipment (whoever owns it) failing to recognise, interpret or deal with any date change.
- 12** Any **Legal Costs** covered by another insurance policy.
- 13** Claims directly or indirectly caused by, contributed to or arising from:
ionising radiation or radioactive contamination from nuclear fuel or from any nuclear waste arising from burning nuclear fuel;
- or
- radioactive, toxic, explosive or other dangerous properties of any nuclear equipment or nuclear part of that equipment.
- 14** Claims arising from war, invasion, riot, revolution, **Terrorism** or a similar event.
- 15** Any VAT which the **Insured Person** can get back from elsewhere.

Conditions

That only apply to Item 8 – Legal Expenses

If the **Insured Person** does not keep to the following conditions, Allianz Legal Protection will have the right to cancel this **Section** of the **Policy**, refuse any claim and withdraw from the current claim.

- 1** The **Insured Person** must do the following
 - a** Report any claim to Allianz Legal Protection and not to any other person or organisation.
 - b** Give Allianz Legal Protection written details of the claim along with any other supporting information Allianz Legal Protection ask for.
 - c** Make any claim within six months of the date of the Insured Event.
 - d** Not appoint a Legal Representative.
 - e** Follow the **Legal Representative's** advice and provide any information he or she asks for.
 - f** Take every step to get **Legal Costs** back and pay them to Allianz Legal Protection.
 - g** Get Allianz Legal Protection's written permission before making an appeal.
 - h** Make sure that the **Legal Representative** keeps to all parts of Condition 2 below.

- 2** The **Legal Representative** must do the following
 - a** Get Allianz Legal Protection's written permission before instructing a barrister or expert witness.
 - b** Tell Allianz Legal Protection if, at any stage, there is no longer a reasonable chance of successfully getting damages back or getting any other solution.
 - c** Tell Allianz Legal Protection straight away if the **Insured Person** or other party makes a payment into a court or any offer to settle the matter.
 - d** Report the result of the claim to Allianz Legal Protection when it is finished.

Business Travel Section Item 8 – Legal Expenses (continued)

- 3 Allianz Legal Protection will have the right to do the following
- a Take over and conduct, in the **Insured Person's** name, any claim or proceedings.
 - b Settle a claim by paying the amount in dispute.
 - c Appoint the **Legal Representative** in the **Insured Person's** name and on the **Insured Person's** behalf.
 - d Have any legal bill audited or assessed.
 - e Contact the **Legal Representative** at any time, and have access to all statements, opinions and reports relating to the claim.
 - f End the **Insured Person's** cover if, during the course of the claim, Allianz Legal Protection think there is no longer a reasonable chance of success. If the **Insured Person** continues the claim and gets a better settlement than Allianz Legal Protection expected, Allianz Legal Protection will pay his or her reasonable **Legal Costs**.
 - g Settle the **Legal Costs** covered by this **Section** at the end of the claim.
 - h End the **Insured Person's** cover and to recover any costs from the **Insured Person** which Allianz Legal Protection has already paid if the **Insured Person** withdraws their instructions to the **Legal Representative** without Allianz Legal Protection's agreement.
- 4 At any time before Allianz Legal Protection agree that legal proceedings need to be issued, Allianz Legal Protection will choose the **Legal Representative**. The **Legal Representative** that Allianz Legal Protection choose will be one of Allianz Legal Protection's approved specialist solicitors. The **Insured Person** can only choose the **Legal Representative** if Allianz Legal Protection agree that legal proceedings need to be issued or if a conflict of interest arises which means that the **Legal Representative** cannot act for the **Insured Person**. The **Insured Person** must send his or her name to Allianz Legal Protection.

If Allianz Legal Protection agree to appoint a **Legal Representative** that the **Insured Person** chooses, he or she will be appointed on the same terms as Allianz Legal Protection would have appointed one of Allianz Legal Protection's approved specialist solicitors. Allianz Legal Protection may decide not to accept the **Insured Person's** choice of Legal Representative. If Allianz Legal Protection do not agree with the **Insured Person's** choice, the matter will be settled using the procedure in condition 6 of this section.

When choosing the **Legal Representative**, the **Insured Person** must remember the **Insured Person's** duty to keep the **Legal Costs** of any legal proceedings as low as possible.

- 5 Every notice which needs to be given under this **Section** must be given in writing. If the **Insured Person** gives Allianz Legal Protection notice, he or she must send it to Allianz Legal Protection at:

Allianz – ALP
PO Box 10623
Wigston
LE18 9HJ

If Allianz Legal Protection gives the **Insured Person** notice, Allianz Legal Protection must send it to his or her last known address.

- 6 If there is a dispute between the **Insured Person** and Allianz Legal Protection, the matter may be referred to an arbitrator, who the **Insured Person** and Allianz Legal Protection agree to. If Allianz Legal Protection and the **Insured Person** cannot agree on an arbitrator, the President of the Law Society or the Chairman of the Bar Council will choose one.

Whoever loses the arbitration must pay all the costs involved. If the decision is not clearly made against either the **Insured Person** or Allianz Legal Protection, the arbitrator will decide how the **Insured Person** and Allianz Legal Protection will share the costs.

Business Travel Section Item 8 – Legal Expenses (continued)

- 7 Allianz Legal Protection will not be bound by any agreement between the Insured Person and the **legal representative**, or the **Insured Person** and any other person or organisation. This will include any agreement the **Insured Person** has made to pay the **legal representative** out of any damages that the **Insured Person** receive from their opponent.
- 8 Allianz Legal Protection or **the Insured** may cancel this **Section** of the **Policy** by giving 30 days notice. If **the Insured** cancels this **Section** of the **Policy** during this time, **the Insured** will not be entitled to a refund of the money **the Insured** has paid. If Allianz Legal Protection cancel this **Section** of the **Policy** during this time, Allianz Legal Protection will refund any amount **the Insured** has paid for the rest of the **Period of Insurance**, as long as any **Insured Person** has not made a claim.

The **Insured Person** cannot make a claim for an event which occurred after the date this **Section** of the **Policy** was cancelled, but cancelling this **Section** of the **Policy** will not affect an **Insured Person's** right to claim for an event which occurred before the date this **Section** of the **Policy** was cancelled.

Every notice to cancel this **Section** of the **Policy** must be given in writing by recorded delivery. If **the Insured** gives Allianz Legal Protection notice to cancel the **Policy**, **the Insured** must send it to Allianz Legal Protection's address. If Allianz Legal Protection give **the Insured** notice, Allianz Legal Protection will send it to **the Insured's** last known address. **The Insured** will notify all **Insured Person's** of such cancellation.

Privacy Notice Summary

Please find below a summary of our Privacy Notice.
The full notice can be found on the Allianz UK website:
allianz.co.uk/privacy-notice.html.

If you would like a printed copy of our Privacy Notice, please contact the Data Rights team using the details below.

Allianz Insurance plc is the data controller of any personal information given to us about you or other people named on the policy, quote or claim. It is your responsibility to let any named person know about who we are and how this information will be processed.

Allianz Insurance plc, Allianz Engineering Inspection Services Limited, Petplan Ltd and VetEnvoy are companies within Allianz Holdings.

Anyone whose personal information we hold has the right to object to us using it.

They can do this at any time by telling us and we will consider the request and either stop using their personal information or explain why we are not able to.

If you wish to exercise any of your data protection rights you can do so by contacting our Data Rights team:

Telephone: **0208 231 3992**
Email: datarights@allianz.co.uk
Address: Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Any queries about how we use personal information should be addressed to our Data Protection Officer:

Telephone: **0330 102 1837**
Email: dataprotectionofficer@allianz.co.uk
Address: Data Protection Officer, Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Allianz Insurance plc.

Registered in England number 84638
Registered office: 57 Ladymead, Guildford,
Surrey GU1 1DB, United Kingdom.

Allianz Insurance plc is authorised by the
Prudential Regulation Authority and regulated
by the Financial Conduct Authority and
the Prudential Regulation Authority.

Financial Services Register number 121849.