

Mortgage Payment Protection Insurance



Tailored protection

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Introduction

This **policy** provides **you** with everything **you** need to know about **your** Mortgage Payment Protection Insurance. It contains the full details of **your policy** including the exclusions.

It is important that **you** read it carefully along with **your** schedule of insurance (which confirms the details of **your** cover) and keep them in a safe place.

This **policy** uses words and phrases that have specific meanings, **you** will find these explained in the 'Definitions' section. Defined words are shown in '**bold**' wherever they appear.

Make sure that **you**:

- are eligible for the insurance cover
- know what this insurance does and does not cover
- understand how changes to **your work** affect **your** eligibility and the terms and conditions of making a claim

If **you** have any questions about **your** eligibility for this insurance or changes to **your** circumstances **you** should call Plus One Insurance Solutions Limited on 0845 345 1962 between 8.00am and 6.00pm Monday to Friday (9.00am to 2.00pm Saturday.)

To register a claim (or check progress on a claim) call **us** on 0800 092 9518 between 9.00am and 5.00pm Monday to Friday. If **you** are registering a claim **you** should read the 'Making A Claim' section before calling to make sure **you** have the relevant information available.

Telephone calls may be recorded and monitored.

Changing Your Mind – Your Cancellation Rights

This insurance is optional and **you** have a right to cancel **your policy** during a period of 30 days from the day of purchase of the **policy** or the day on which **you** receive **your policy**, whichever is the later. This is called the 'statutory cooling off period'.

If **you** wish to cancel during this period, **you** will be entitled to a full refund of the premium paid. If **you** have made a claim and then cancel within this period, **we** may seek to recover any monies paid to **you** in settlement of the claim.

To exercise **your** right to cancel in the statutory cooling off period, please contact Plus One Insurance Solutions Limited, 1 Maitland House, Warrior Square, Southend-on-Sea, Essex SS1 2ZP.

If **you** do not exercise **your** right to cancel **your policy** in the statutory cooling off period, it will continue in force and **you** will be required to pay the premium.

For **your** cancellation rights after the statutory cooling off period, please see the 'When Does Your Policy End' Section of this **policy**.

Customers With Disabilities

This **policy** is also available in large print, audio and Braille. If **you** require any of these formats please contact Plus One Insurance Solutions on 0845 345 1962 between 8.00am and 6.00pm Monday to Friday (9.00am to 2.00pm Saturday).

Eligibility, Joint Borrowers, Important Notes And Material Facts

Eligibility

You are eligible for this insurance if at the start date you:

- are aged 18 years or over but under 64,
- **work** at least 16 hours per week and have done so for at least the last 6 months,
- live in the **UK**,
- are paying or about to pay a **mortgage agreement**, and
- are up to date with **your monthly repayments**, if **you** have an existing **mortgage agreement**.

For the purposes of this insurance **work** means any paid **work** of at least 16 hours per week. This includes **self-employed work** and statutory maternity and parental leave but it does not include **temporary work**.

If **you** are self-employed or **you work** on fixed-term contracts **you** are eligible for this insurance but **you** should read the **policy** carefully to make sure it is suitable for **your** needs – **you** should pay particular attention to the ‘Employment Circumstances’, ‘Unemployment Cover’ and ‘Things To Keep In Mind When Claiming’ sections.

Joint Borrowers

If **you** have a joint **mortgage agreement** and only one of **you** requires cover then this must be the main income earner.

- If **you** have a joint **mortgage agreement** both of **you** may apply for cover if **you** are both eligible. The **monthly benefit** payable will be split in proportion to **your** incomes at the date of arranging **your** agreement. Should the percentages of income change, one of **you** reaches 65 or retires and does not intend to seek further **work** please write to Plus One Insurance Solutions who will amend cover accordingly provided there is no claim in progress.

The percentages of **monthly benefit** applicable to each of **you** will be shown on **your** schedule of insurance.

Important Notes:

1. This **policy** does not cover a medical condition or related symptoms **you** knew about at the **start date** whether the condition had been diagnosed or not. This is known as a **pre-existing medical condition**. If **you** have seen a **doctor** in the last 12 months **your** ability to claim may be affected. This is explained in the ‘Accident Or Sickness Cover’ section.
2. If **you** are off **work** due to **accident or sickness** at the **start date**:

You may still be eligible for the insurance. However, **you** should be aware that **you** will not be able to claim for **accident or sickness** cover during the first 12 months following the **start date** if the condition returns.

If **you** do not return to **work** within the first 30 days following the **start date**, **your accident or sickness** cover will not start until **you** have returned to **work** for 30 consecutive days. In this case, any **pre-existing medical condition** will not be covered if it returns within 12 months of the date **your accident or sickness** cover starts.

3. This **policy** will not pay for any **unemployment you** were aware of at the **start date**. **You** will not be covered for any **unemployment** which **we** reasonably believe **you** knew was likely to happen, whether **you** had official notice or not, when **you** took out this insurance.
4. This **policy** will not pay for any **unemployment** that **you** were advised of or which happens during the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started) of the **start date**, whether **you** were aware of it or not at the **start date**.
5. This **policy** will not pay a **carer** claim if at the **start date** **we** reasonably believe **you** were aware of the need or likely need at any time in the future for a member of **your immediate family** to require a **carer** or **you** are notified of receipt of or apply for **Carer’s Allowance** within the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started) after the **start date**.

If **you** have any questions **you** should call Plus One Insurance Solutions on 0845 345 1962

Material Facts

All material facts must be disclosed. A material fact is one that is likely to influence **us** in the acceptance and assessment of an application e.g. living outside the **UK** or in **work** for less than 16 hours per week. It is **your** responsibility to provide complete and accurate information to Plus One Insurance Solutions when **you** take out **your** insurance **policy** and throughout the life of **your policy**.

Please note that if **you** fail to disclose any material information to **us**, this could invalidate **your** insurance cover and could mean that part or all of a claim may not be paid. **We** recommend **you** keep a record (including copies of letters) of all information provided to Plus One Insurance Solutions for **your** future reference.

Changes During The Lifetime Of Your Policy That May Affect Your Insurance Cover

It is **your** responsibility to ensure that this **policy** continues to meet **your** requirements should the circumstances of **your work** change during the lifetime of **your policy**, as this could affect **your** entitlement to benefits.

Your eligibility for cover under this **policy** may change if **your** personal circumstances change. If this happens or is likely to happen **you** should discuss with Plus One Insurance Solutions. This would include for example:

- **You** retire from **work** and do not intend to actively seek further **work**
- Changing **your** employment e.g. **your work** becomes temporary
- **You** voluntarily reduce **your** hours of **work** to less than 16 hours per week
- **You** reach 65 years of age
- **You** leave the **UK** to live abroad
- **You** change **your mortgage agreement** to another lender
- **You** wish to change **your monthly benefit** amounts, for instance following an increase or decrease in **your monthly repayment**
- If **you** have a joint cover, the **monthly benefit** payable will be split in proportion to **your** incomes at the date of arranging **your** agreement. Should the percentages of income change, one of **you** reaches 65 or retires and does not intend to seek further **work** please write to Plus One Insurance Solutions who will amend cover accordingly provided there is no claim in progress.

If **you** decide the **policy** is no longer suitable and **you** wish to cancel it please see the 'When Does Your Policy End' section for more details.

Employment Circumstances

Your employment circumstances will affect **your** eligibility for cover and entitlement to make a claim. If **your** employment changes or is likely to change or **you** have any questions **you** should contact Plus One Insurance Solutions.

Retiring Before The Age Of 65

If **you** retire before the age of 65 and do not intend to actively seek further **work**, **you** will no longer be eligible for cover.

Fixed-Term Contracts

If **you work** on a fixed-term contract and **your** contract is not renewed, **you** will only be entitled to claim for **unemployment** cover, provided **you** have chosen it, if **you** meet one of the following criteria:

- **you** have worked continuously for the same employer for at least 24 months; or
- **your** contract is for at least 12 months and has been renewed at least once with the same employer; or
- **you** were originally employed on a permanent basis but were transferred to a fixed-term contract by the same employer without a break in employment.

Self-Employed

If **you** have chosen **unemployment** cover **we** will consider **you** to be **self-employed** if **you** meet 1 of the following criteria:

- **you** are carrying on a business in the **UK** either alone or as a partner in a partnership; or
- **you** can control the affairs of a company **you work** for because either **you** or a relative or a member of **your** household individually or jointly hold the majority of the voting rights in that company; or
- **you** can otherwise ensure that the company **you work** for conducts its affairs according to **your** wishes.

If **you** are **self-employed** **you** will need to provide the following to be entitled to claim for **unemployment** benefit:

- satisfactory proof that **you** have involuntarily ceased trading because **you** could not find enough **work** to meet all **your** reasonable business and living expenses and have declared this to HM Revenue & Customs; and
- are registered as **unemployed** with the Department for Work and Pensions.

Your Benefits At A Glance

This is only a summary of the cover available; full details of **your** cover will be shown in **your** schedule of insurance.

Cover	Waiting Period	Maximum Claim Duration	Maximum Claim Amount
Accident or Sickness	30 days	12 monthly benefit payments	£ 1,650 per month
Unemployment (1) (including Carer (2))	30 days	12 monthly benefit payments	£ 1,650 per month

Note:

If **you** have chosen **unemployment** (which includes **carer** cover) **you** cannot make a claim:

- (1) Under the '**Unemployment** Cover' section during the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started) following the **start date**.
- (2) Under the '**Carer** Cover' section during the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started) following the **start date**, unless the condition giving rise to the claim was unforeseen.

Important – The Type Of Cover The Policy Provides

Please refer to **your** schedule of insurance for the cover options that **you** have selected. If **you** are unclear as to the cover **you** have selected please call Plus One Insurance Solutions on 0845 345 1962 between 8.00am and 6.00pm Monday to Friday (9.00am to 2.00pm Saturday).

If **you** take out **unemployment** cover only or **accident or sickness** cover only, **you** must be aware of the following points:

- If **you** only take out **unemployment** cover and **you** suffer an **accident or sickness** during a period of **unemployment** your **monthly benefit** payments will be suspended until **you** re-register as **unemployed** with the Department for Work and Pensions and are able to actively continue seeking **work**.
- If **you** only take out **accident or sickness** cover and become **unemployed** during a period of **accident or sickness**, **you** will only continue to receive **monthly benefit** payments whilst **you** remain certified unfit to **work** due to **accident or sickness**.

Accident Or Sickness Cover

This cover only applies if **your** current schedule of insurance shows that **you** have chosen 'accident or sickness cover'.

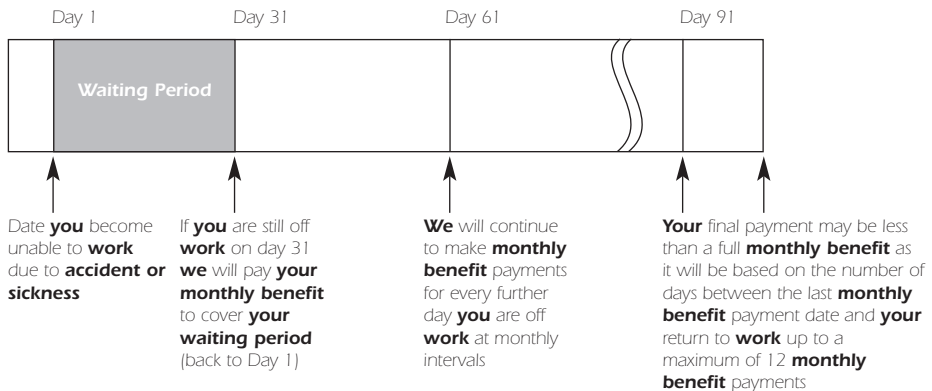
What Is Covered

Option 1

If an **accident or sickness** prevents **you** working for more than 30 days in a row, **we** will pay:

- **your monthly benefit**
- 1/30th of the full **monthly benefit** will also be paid (at monthly intervals) for each further day **you** are unable to **work** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated

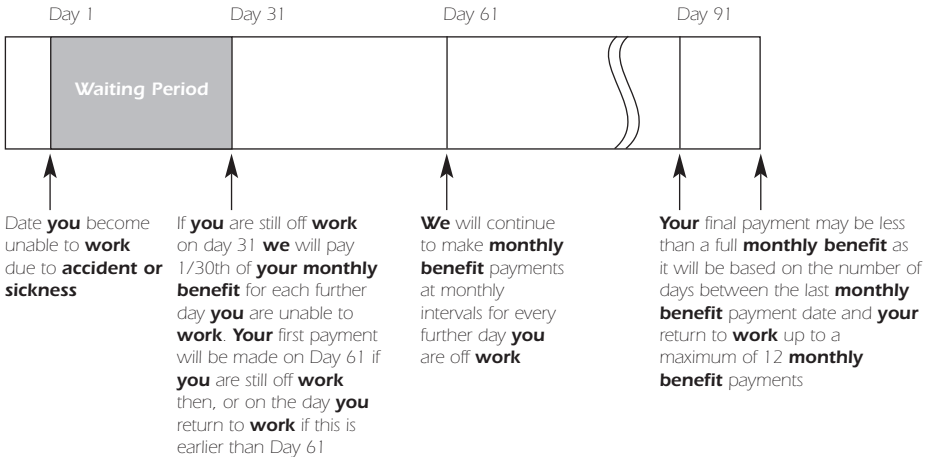


Option 2

If an **accident or sickness** prevents **you** working for more than 30 days in a row, **we** will pay:

- 1/30th of **your monthly benefit** for each further day **you** are unable to **work**
- the full **monthly benefit**, will be paid at monthly intervals, for each further day **you** are unable to **work** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated



- If **you** return to **work** after claiming for **accident or sickness** and then are unable to **work** within 3 months because of the same **accident or sickness** **you** do not have to wait before benefits can be paid. **We** will combine these 2 periods into 1 claim when calculating **your** benefit period subject to a maximum of 12 **monthly benefit** payments per claim.
- Once **we** have paid the maximum number of 12 **monthly benefit** payments, **you** need to return to **work**, free of all symptoms and not receiving medical treatment for **your** original condition, for at least 6 consecutive months before **you** can make another **accident or sickness** claim for the same condition. However, if **your** new claim is for an unrelated condition, **you** will only need to be back at **work** for 30 days to be eligible to claim again.

What Is Not Covered (in addition to General Exclusions)

We will not pay any **accident or sickness** claims due to or arising from:

- Any **pre-existing medical condition** which persists or returns during the first 12 months of **accident or sickness** cover. This exclusion will not apply once **you** have been continuously insured under the **accident or sickness** cover for 12 months, so long as **you** are attending **work** at the start of **your** claim.

This means **we** will not pay for any condition, injury, illness, disease, sickness or related condition and/or associated symptoms, whether diagnosed or not:

- which **you** knew about, or should reasonably have known about, at the **start date**, or
 - which **you** had seen or arranged to see a **doctor** about, during the 12 months immediately before the **start date**.
- Pregnancy or childbirth – unless there has been a **medical complication**.
 - Self-inflicted injuries, cosmetic surgery or other treatment which is not medically necessary.
 - **Your** detention in prison under the direction of a court of law. This will not apply if **you** are later acquitted.
 - **Your** own wilful actions, drug or alcohol abuse. (This does not include any drugs prescribed by **your doctor**, except if they are to treat drug addiction.)

Note:

If **you** have retired, are not actively seeking **work** and are not registered as **unemployed you** will not be able to claim for **accident or sickness**.

Unemployment Cover

This cover only applies if **your** current schedule of insurance shows that **you** have chosen 'unemployment cover'.

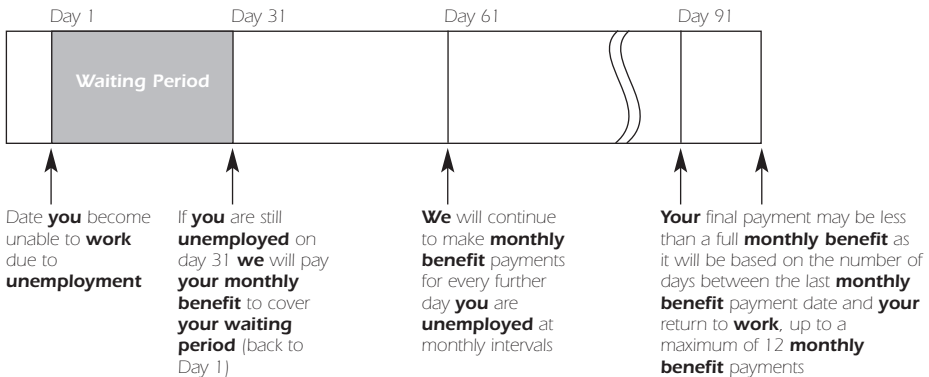
What Is Covered

Option 1

If **you** are **unemployed** for more than 30 days in a row, **we** will pay:

- **your monthly benefit**
- 1/30th of the full **monthly benefit** will also be paid (at monthly intervals) for each further day **you** are **unemployed** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated

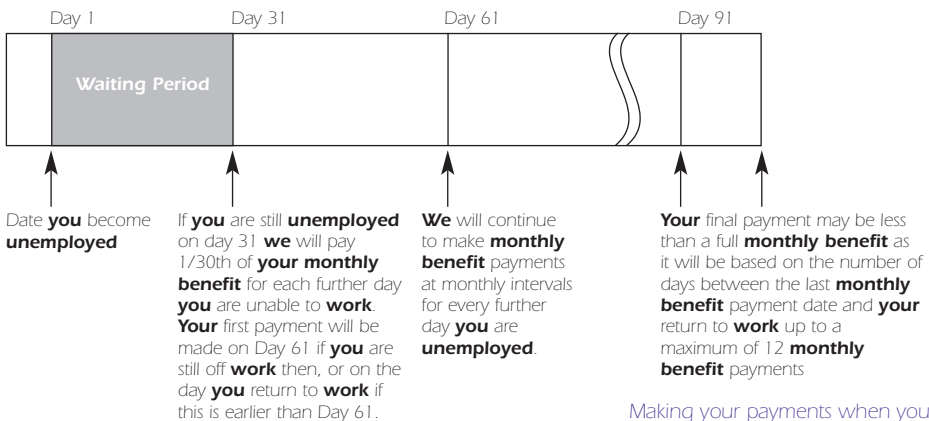


Option 2

If **you** are **unemployed** for more than 30 days in a row, **we** will pay:

- 1/30th of **your monthly benefit** for each further day **you** are **unemployed**
- a full **monthly benefit**, will be paid at monthly intervals, for each day **you** are **unemployed** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated



Making your payments when you can't

- If, after claiming for **unemployment**, **you** are made **unemployed** again within 3 months of returning to **work**, **you** will not have to wait before benefits can be paid. **We** will combine these 2 periods of **unemployment** into 1 claim when calculating **your** benefit period subject to a maximum of 12 **monthly benefit** payments per claim.
- Once **we** have paid the maximum number of 12 **monthly benefit** payments, **you** need to return to **work** for at least 6 consecutive months before **you** can make another **unemployment** claim.

Temporary Work

If **you** do any **temporary work**:

- during a claim, **your monthly benefit** will be suspended during the period of **temporary work** and will be resumed when the **temporary work** finishes.
- during the **waiting period**, the **waiting period** will be suspended until the end of the **temporary work**.

Self-Employed

If **you** are **self-employed** and **you** have involuntarily ceased trading because **you** could not find enough **work** to meet all **your** reasonable business and living expenses and have declared this to HM Revenue & Customs, **you** will be entitled to claim for **unemployment** benefit.

If, for the purpose of this insurance **you** are not **self-employed**, all other terms, conditions and exclusions of this **policy** will apply.

In either case **you** will need to have a Jobseeker's Agreement for the whole time **you** are claiming. If **you** are ineligible for a Jobseeker's Agreement, **you** must be able to provide ongoing alternative evidence that is acceptable to **us** that **you** are **unemployed** and actively seeking **work**. This could include copies of job applications, responses and registration with job agencies.

Payment In Lieu Of Notice

If **you** have been paid or are entitled to be paid in lieu of notice any claim for **unemployment**, including the **waiting period**, will not start until the end of **your** notice period.

What Is Not Covered (in addition to General Exclusions)

We will not pay for any **unemployment**:

- **We** reasonably believe **you** knew was likely to happen, whether **you** had official notice or not, when **you** took out the **policy**.
- **You** are notified of or which happens within the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started), of the **start date**.
- If **you** have resigned or taken voluntary redundancy.
- If **you** retire and do not intend to actively seek further **work**.
- Due to **your** misconduct.
- After **temporary work** (unless **you** have taken **temporary work** during a claim).
- Which is normal, regular or seasonal in **your work**.
- After the end of a fixed-term contract which is not renewed, unless:
 - **you** have worked continuously for the same employer for at least 24 months; or
 - **your** contract is for at least 12 months and has been renewed at least once with the same employer; or
 - **you** were originally employed on a permanent basis but were transferred to a fixed-term contract by the same employer without a break in employment.
- As a result of **you** being detained in prison under the direction of a court of law. This will not apply if **you** are later acquitted.
- Due to **your** own wilful actions, drug or alcohol abuse. (This does not include any drugs prescribed by **your doctor**, except if they are to treat drug addiction.)

Carer Cover

This cover only applies if **your** current schedule of insurance shows that **you** have chosen 'unemployment cover'.

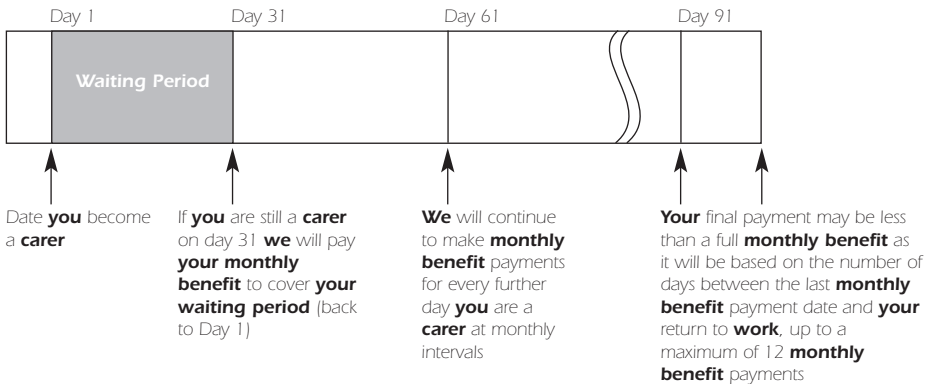
What Is Covered

Option 1

If **you** voluntarily leave **your work** to become a **carer** for more than 30 days in a row, **we** will pay:

- 1/30th of **your monthly benefit** for each day **you** are a **carer** from the 1st full day, then
- the full **monthly benefit**, at monthly intervals, for each further day **you** are a **carer** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated

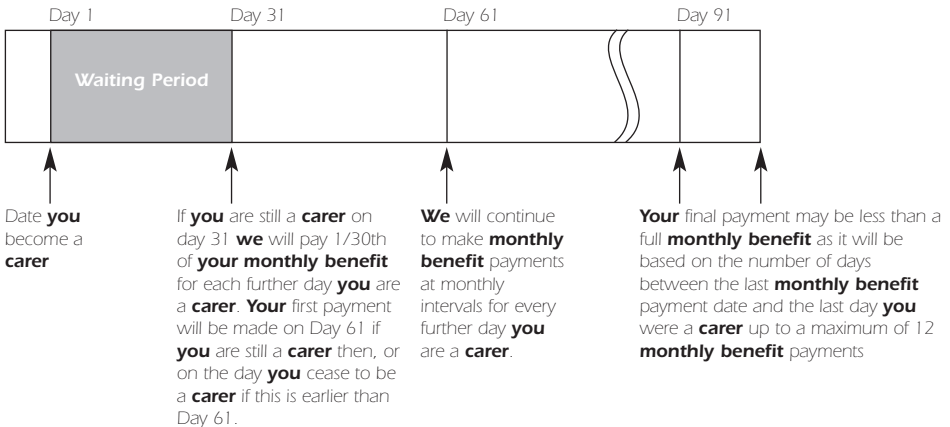


Option 2

If **you** voluntarily leave **your work** to become a **carer** for more than 30 days in a row, **we** will pay:

- 1/30th of **your monthly benefit** for each further day **you** are a **carer** from the 31st day up to **your next mortgage agreement** repayment date, then
- the full **monthly benefit**, at monthly intervals, for each further day **you** are a **carer** up to a maximum of 12 full **monthly benefit** payments in total.

Example of how a claim is calculated



- If **you** claim for a second period of being a **carer** within 3 months of returning to **work**, **you** will not have to wait before benefits can be paid. **We** will combine these 2 periods into 1 claim when calculating **your** benefit period subject to a maximum of 12 **monthly benefit** payments per claim.
- Once **you** have received the maximum number of 12 **monthly benefit** payments, **you** need to return to **work** for at least 6 consecutive months before **you** can make another **carer** claim.

What Is Not Covered (in addition to General Exclusions)

Any claim for **carer** cover:

- If at the **start date** **we** reasonably believe **you** were aware of the need, or likely need at any time in the future, for a member of **your immediate family** to require a **carer**.
- If within the first 60 days (or 120 days if cover was arranged after **your mortgage agreement** started) of **your start date** **you** apply for a **Carer's Allowance**, or are notified of receipt of a **Carer's Allowance**, **we** will not consider a **carer** claim unless the condition of the member of **your immediate family** requiring a **carer** was due to or caused by an unforeseen event happening after the **start date**.
- Where the person **you** are caring for is not a member of **your immediate family**.

General Exclusions Applying To All Covers

We will not pay any claim due to or arising from:

- any dishonest or exaggerated behaviour by **you** or anyone acting for **you**. If this happens, **you** will have to return any benefits already paid and **you** will forfeit all future rights under this **policy**.
- war, invasion, act of foreign enemy, hostilities or a warlike operation or operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power and/or any action taken in controlling, preventing, suppressing or in any way relating to any of these causes or events.

Making Changes

If **you** need to make a change to **your** cover, please call Plus One Insurance Solutions on 0845 345 1962.

Changing Your Cover

You can apply to:

- increase or decrease **your monthly benefit**; or
- change to another basis of cover.

The **start date** of the change will be from the date that **we** accept **your** application.

If **you** increase **your monthly benefit** or change the basis of cover, **we** will reapply the eligibility criteria and the following exclusions to that portion of cover changed:

- **Accident or sickness** due to or arising from any **pre-existing medical condition**. This exclusion will not apply once the change in cover has been continuously insured for 12 months.
- **Unemployment** which **we** reasonably believe **you** knew was likely to happen, whether **you** had official notice or not, on the date **you** applied for the change, or which **you** are notified of or which happens within 60 days (if **you** are increasing **your monthly benefit**), or 120 days (if **you** are changing the cover under **your policy**) of the date of **your** application.
- **Carer** cover
 - Claims where, at the date of **your** application, **we** reasonably believe **you** were aware of the need, or likely need at any time in the future, for the member of **your immediate family** to require a **carer**.
 - Claims where **you** applied for or are notified of receipt of **Carer's Allowance** within 60 days (if **you** are increasing **your monthly benefit**), or 120 days (if **you** are changing the cover under **your policy**) of the date of **your** application, unless the condition of the member of **your immediate family** requiring a **carer** was due to or caused by an unforeseen event happening after the date **you** applied for the change.

Changes For Joint Borrowers

Please also refer to 'Joint Borrowers' in the 'Eligibility, Joint Borrowers, Important Notes and Material Facts' section near the front of this **policy**.

If **you** have a joint **mortgage agreement** and only 1 of **you** is insured, the other person can apply to be added to the insurance. Cover starts from the date that **we** accept the application and is subject to the terms and conditions of the **policy**.

If **you** are both insured and the percentages of **your** incomes change, one of **you** reaches 65 or retires and does not intend to seek further **work** please write to Plus One Insurance Solutions who will amend cover accordingly provided there is no claim in progress.

Reviewing your Monthly Benefit

You should review **your monthly benefit** on an annual basis to ensure that **your** monthly repayments and any mortgage related insurance premiums that **you** wish to include are adequately covered.

Any change in **monthly benefit** will start from the date that **we** accept **your** application and the exclusions listed in the 'Changing **Your Cover**' section above will be reapplied to any change in **monthly benefit**.

Your Claim

Making A Claim

It is important that **you** register **your** claim as soon as possible.

Step 1 – Please have the following information ready when you call:

- **your** mortgage brokers company name
- **your** mortgage account number
- **your** Plus One Insurance Solutions Payment Protection Insurance **policy** number (called Agreement Number on the schedule of insurance)
- **your** postcode
- **your** bank account details
- **your** national insurance number

Step 2 - Call 0800 092 9518 between 9am-5pm Monday to Friday

We will be there to give **you** advice, answer questions, help **you** through the claim and register it for **you**.

Step 3 – We will then send you a claim pack

When **we** first respond to **your** claim **we** will send **you** **our** claims pack. This will include:

- claim forms
- a guide to help **you** make **your** claim and explain when payments will be made

Step 4 – The forms should be completed as soon as possible and returned to us with the relevant information

- For **accident or sickness** claims **you** will need to get a **doctor** and **your** employer to fill in the relevant section of the form.
- For **unemployment** claims **you** will need to arrange for a Department for Work and Pensions official and **your** previous employer to fill in the relevant sections of the form.
- For **carer** claims **you** will need to arrange for **your** previous employer to fill in the relevant section of the form and provide evidence that **you** are either in receipt of or awaiting **Carer's Allowance**.

Our claims office address is: Creditor Unit, Aviva UK Insurance, PO Box 3486, Norwich NR1 3FY.

Things To Keep In Mind When Claiming

- **You** must supply and pay for all reasonable information or evidence **we** ask for to support **your** initial claim and from time to time throughout **your** claim. If **we** ask for proof, **you** need to be able and willing to supply it.
- If **we** do not receive all the information **we** need (for example declarations and medical questionnaires) or if these documents are not acceptable to **us we** may delay or suspend **your** claim payments.
- **We** may contact **your** past employers or other insurers for information about **you**.
- For **unemployment** claims **you** need to have a Jobseeker's Agreement for the whole time **you** are claiming. If **you** are ineligible for a Jobseeker's Agreement, **you** must be able to provide ongoing alternative evidence acceptable to **us** that **you** are **unemployed** and actively seeking **work**. This could include copies of job applications, responses and registration with job agencies.
- When making an **accident or sickness** claim **you** must agree to any medical examination which **we** arrange and pay for.
- If **you** are a **carer** making a claim, **we** need satisfactory proof that **you** are required to look after a member of **your immediate family**, that **you** have completed a **Carer's Allowance** Claim pack and are either in receipt of or awaiting **Carer's Allowance**.
- **We** are concerned that **you** should not pay for the dishonesty of others. **We** make random checks, so do not be alarmed if one of **our** claims advisers calls. **We** also exchange information with other insurers to prevent fraud.

State Benefits

If **you** make a claim under this **policy** and also apply for any means tested state benefit, the Department for Work and Pensions/Benefits Agency may treat some of the claim payment as income when calculating **your** benefit entitlement.

Back To Work

If **you** are unable to **work** due to an **accident or sickness** or **unemployment**, **you** will be contacted by **our** specialist Back To Work service. This service is free, confidential and designed to provide advice and assistance to help **you** make a speedy return to **work**.

Accident or sickness (only available if you have selected accident or sickness cover)

If **you** have a soft tissue injury (e.g. sprained muscle or whiplash), **our** rehabilitation specialists will contact **you** to help **you** with a speedy recovery and return to **work**. This service provides:

- access to a specialist website
- clinically run helpline and self-help booklet with tips for a speedy recovery
- a personal care adviser who can, where appropriate, arrange for suitable treatment to speed **your** return to **work**

This service is designed to operate alongside the NHS and other recognised medical professionals.

Unemployment (only available if you have selected unemployment cover)

Our Back to Work service provides:

- Self-help guide
- Access to a specialist web site
- Telephone advice providing access to specialist employment counsellors
- Confidential advice and ongoing support throughout **your** search:
 - seeking **work**, career changes, state benefits
 - managing **your** time effectively while searching for employment
 - tips on preparing **your** CV
 - help with preparing for interviews

Paying Claims

We will make claim payments directly to **you**. When **we** have made these payments, **we** will not make any further payments for the same claim.

Switching Between Claims

If **you** need to **you** can switch from an **unemployment** to an **accident or sickness** or a **carer** claim or a combination of all 3 (provided **you** have chosen these covers) – there is no additional **waiting period**. However, **we** will not pay more than 12 **monthly benefit** payments for any claim period. This applies to any 1 continuous period of **accident or sickness**, **unemployment** or a period for which **you** are a **carer** or a combination of all 3 (provided **you** have chosen these covers).

You cannot claim for **accident or sickness**, **unemployment**, or a **carer** claim at the same time.

When Will Monthly Claim Payments End?

We will continue paying **your** claim until the first of the following happens:

- **Your unemployment** ends, **you** recover from **your accident or sickness** or **you** are no longer a **carer**.
- **We** have paid 12 full **monthly benefit** payments for any 1 continuous period of **unemployment**, **accident or sickness** or a period for which **you** are a **carer** or a combination of all 3.
- **Your** mortgage is repaid.
- **You** reach age 65.

Paying Premiums During A Claim

When **you** are making a claim under this **policy you** should continue to pay the monthly premium to ensure that cover can continue once **your** claim has ended.

Should **you** cancel **your policy** during a claim then **we** will continue to pay **monthly benefit** provided the claim happened prior to the cancellation date, and **your** premiums were up to date. However, **you** will not be covered for any claim that happens on or after the cancellation date.

Changes We Can Make To Premium, Policy Cover And/Or Terms And Conditions

1. **We** can, at any time and after taking a fair and reasonable view, make changes to **your** premium, **policy** cover and/or terms and conditions of insurance, to reflect changes in **our** expectation of the future likely cost of providing cover. Premiums and/or **policy** cover may go up or down but will not recoup past losses.

When doing so **we** will only consider one or more of the following:

- **Our** experience and expectation of the cost of providing this product and/or **our** other products of a similar nature.
- Information reasonably available to **us** on the actual and expected claims experience of insurers of similar products.
- Widely available economic information such as inflation rates, interest rates and **unemployment** rates.
- **Our** experience and expectation of the costs of administering **your policy**.

Changes (together with the reasons for such changes) will be notified to **you** in writing at least 30 days in advance and once **we** make any changes **we** will not make any further changes under this paragraph 1 for at least six months.

2. Additionally, **we** can, at any time and after taking a fair and reasonable view, make changes to:

- **your** premium, **policy** cover and/or terms and conditions of insurance to reflect changes (affecting **us** or **your policy**) in the law or regulation or the interpretation of law or regulation, or changes in taxation.
- **your policy** cover and/or terms and conditions of insurance to reflect decisions or recommendations of an Ombudsman, regulator or similar person, or any code of practice, with which **we** intend to comply.
- **your policy** cover and/or terms and conditions of insurance in order to make **your policy** clearer and fairer to **you** or to rectify any mistakes that may be discovered in due course.

Changes (together with the reasons for such changes) will be notified to **you** in writing at least 30 days in advance and there is no minimum period between changes.

Transferring Insurance From Another Policy

If **you** are transferring cover from another Mortgage Payment Protection Policy, cover will be continuous and the following will apply:

- **We** will apply eligibility criteria (see page 4) and the following exclusions for the Cover and Benefits (including the proportion of benefits payable in the event of joint beneficiaries) **you** are transferring to the **start date** of **your** previous policy
 - **Accident or sickness** due to or arising from any **pre-existing medical condition** (as defined on page 27.) This exclusion will not apply if the insurance had been in place for 12 months or over
 - **Unemployment** which **we** reasonably believe **you** knew was likely to happen, whether **you** had had official notice or not.
 - If **you** change to another basis of cover, or increase **your monthly benefit**, or in the case of joint beneficiaries **you** change the proportion of **monthly benefit** selected the following exclusions will be applied to the portion of cover changed
 - **Accident or sickness** due to or arising from any **pre-existing medical condition** (as defined on page 20.) This condition will not apply once the change in cover has been insured for 12 months
 - **Unemployment** which **we** reasonably believe **you** knew was likely to happen, whether **you** had official notice or not, at the date **you** applied for the change, or which within either 60 days (if **you** arranged the insurance at the same time as **your** mortgage), or 120 days (if **you** arranged the insurance after the **start date** of **your** mortgage.)
- In the event of a claim **we** may ask **you** to provide evidence of the benefits applicable under **your** previous policy.

When Does Your Policy End

1. The cover provided by this **policy** and all **monthly benefit** payments will end immediately, if any of the following happen:
 - The date agreed by **your lender** for **your** mortgage agreement to be repaid is reached.
 - **You** reach 65 years of age.
 - **Your** mortgage agreement is repaid early or ceases and is not replaced.
 - The only obligation which **you** have under the mortgage agreement is to pay **your lender** a fee for holding **your** title deeds in safe custody.
 - There is any dishonest, intentionally exaggerated or fraudulent behaviour by **you** or anyone acting for **you** in relation to a claim under this **policy**. In such cases, **you** may have to return any benefits already paid, and **you** may forfeit all future rights under this **policy**, with no refund of premium.
 - **You** breach the **policy** terms and conditions.
 - **You** retire from **work** and do not intend to actively seek further **work**, unless **you** retire due to **accident or sickness** on the advice of a **doctor**.
 - When **you** and **your immediate family** no longer reside at the property for which **your mortgage agreement** is held.
 - **You** die.
2. **You** may cancel the **policy** at any time by writing to **us** at Plus One Insurance Solutions Limited, 1 Maitland House, Warrior Square, Southend-on-Sea, Essex SS1 2ZP. If **you** do so **your policy** will be cancelled at the end of the month in which **we receive** notification of **your** wish to cancel **your policy**.
3. **We** may cancel **your policy**, by sending **you** notice in writing to **your** last known address, if:
 - **You** have not paid **your** premium when it was due - in which case **your policy** will end with effect from the beginning of the period in respect of which premium has not been paid.
 - **We** offer **you** an equivalent alternative product (which does not materially disadvantage **you**). In this event **we** will give **you** at least 30 days notice.
 - **We** give **you** at least 90 days notice where **we** do not offer **you** an equivalent alternative product.
4. If **you** or **we** cancel **your policy** under 2 or 3 above then all cover will end from the date of cancellation outlined above. However, **we** will continue to pay **monthly benefit** that is due to be paid for any claim that happened prior to the date on which **your policy** ends.

Promise of Service - Complaints Procedure

Our goal is to give excellent service to all **our** customers but **we** recognise that things do go wrong occasionally. **We** take all complaints **we** receive seriously and aim to resolve all **our** customers' problems promptly. To ensure that **we** provide the kind of service **you** expect **we** welcome **your** feedback. **We** will record and analyse **your** comments to make sure **we** continually improve the service **we** offer.

What will happen if you complain

- **We** will acknowledge **your** complaint within 2 working days of receipt.
- **We** aim to resolve complaints, following assessment and investigation, within 5 working days of receipt.

Most of **our** customers' concerns can be resolved quickly but occasionally more detailed enquiries are needed. If this is likely, **we** will contact **you** with an update and give **you** an expected date of response.

What to do should you be dissatisfied

If **you** have a complaint about the handling of **your** insurance please contact Plus One Insurance Solutions Limited at 1 Maitland House, Warrior Square, Southend-on-Sea, Essex SS1 2ZP or call 0845 345 1962.

If **you** have a complaint about a claim **you** have made, please write to London & Edinburgh, Creditor Unit, Aviva UK Insurance, PO Box 3486, Norwich NR1 3FY. Telephone 0800 092 9518.

If **you** remain unhappy with the decision **you** receive, **you** may write to the Chief Executive London & Edinburgh at Aviva, PO Box 6, Surrey Street, Norwich NR1 3NS.

If **you** are dissatisfied with **our** final decision from the Chief Executive Officer, **you** can refer the matter to the Financial Ombudsman Service (FOS).

Full contact details of both **our** Chief Executive and the FOS will be provided when **we** write in response to **your** complaint.

Notes

1. The FOS will only consider **your** complaint if **you** have given **us** the opportunity to resolve it and **you** are a private policyholder. If, however, **we** do not resolve **your** complaint within 40 working days, the FOS will accept a direct referral.
2. Whilst **we** are bound by the decision of the FOS, **you** are not.
3. Following the complaints procedure does not affect **your** right to take legal action.

General Information

This insurance is underwritten by Aviva Insurance Limited. Aviva Insurance Limited is authorised and regulated by the Financial Services Authority.

The Law

There is a choice of law for this insurance, but unless **we** agree otherwise, the law for that part of the **UK** where **you** live at the **start date** will apply.

Financial Services Compensation Scheme

We are members of the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from this scheme if **we** cannot meet **our** obligations, depending on the type of insurance and the circumstances of **your** claim.

Further information about the scheme is available from the FSCS website:

www.fscs.org.uk

or write to:

Financial Services Compensation Scheme
7th Floor Lloyds Chambers
Portoken Street
London
E1 8BN

Data Protection Act – Information Users

For the purposes of the Data Protection Act 1998, the joint Data Controllers in relation to any personal data **you** supply are Aviva Insurance Limited and Plus One Insurance Solutions Limited.

Insurance Administration

Information **you** supply may be used for the purposes of insurance administration by **us**, **our** associated companies and agents, by reinsurers and Plus One Insurance Solutions Limited. It may also be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing **our** compliance with any regulatory rules/codes. **Your** information may also be used for research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. Where this happens, **we** will ensure that anyone to whom **we** pass

your information agrees to treat **your** information with the same level of protection as if **we** were dealing with it.

If **you** give **us** information about another person, in doing so **you** confirm that they have given **you** permission to provide it to **us** and for **us** to be able to process their personal data (including any sensitive data) and also that **you** have told them who **we** are and what **we** will use their data for, as set out in this notice.

In the case of personal data, with limited exceptions, and on payment of the appropriate fee, **you** have the right to access and if necessary rectify information held about **you**.

Sensitive Data

In order to assess the terms of the insurance contract or administer claims which arise, **we** may need to collect data which the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this insurance, **you** signify **your** consent to such information being processed by **us** or **our** agents.

Fraud Prevention And Detection

In order to prevent and detect fraud **we** may at any time:

- share information about **you** with other organisations and public bodies including the police
- undertake credit searches and additional fraud searches
- check and/or file **your** details with fraud prevention agencies and databases, and if **you** give **us** false or inaccurate information and **we** suspect fraud, **we** will record this

We can on request supply further details of the databases **we** access or contribute to.

Definitions

Wherever the following words or phrases appear in this **policy**, they will be shown in bold and have the following meanings:

Accident Or Sickness

Any accident, sickness or disease which occurs after the **start date** which results in **you** being totally unable to carry out the duties of **your** normal **work** and not doing any other **work**, as confirmed by a **doctor** or **specialist**. Normal **work** means **your work** immediately before **your** accident or sickness, or any other **work** which **we** think **you** are, or may reasonably become qualified for, in view of **your** training, education and ability.

Carer

You look after a member of **your immediate family** on a full-time basis and have completed a **Carer's Allowance Claim pack** and are either in receipt of or awaiting **Carer's Allowance** from the Department for Work and Pensions.

Carer's Allowance

A taxable benefit paid by the Department for Work and Pensions to informal **carers**.

Doctor

A medical practitioner, (other than **you** or a member of **your** family) who holds a full qualification entitling him or her to full registration with the General Medical Council.

Immediate Family

Your spouse, civil partner, live in partner, children and parents.

Lender

The Bank, Building Society or other mortgage lender that **you** have **your** mortgage with.

Medical Complication

A symptom of pregnancy which has developed into an identified condition diagnosed by a recognised obstetric **specialist**. It does not include delivery by caesarean section or other surgically assisted means or any normal symptom of a temporary or minor nature, which presents no significant medical hazard to mother or baby.

Monthly Benefit

The amount chosen by **you** and shown on **your** current schedule of insurance, which must amount at least to **your** **monthly repayment**.

If **your** **monthly repayment** is less than £1,650 **you** can increase the amount **you** insure up to 150% of **your** **monthly repayment** to include premiums for this **policy**, buildings and contents insurance on the property, and associated life assurance policies, provided the lower of the following amounts is not exceeded.

- 60% of **your** monthly earned income before tax or
- £1,650.

Monthly Repayment

Your minimum monthly mortgage payment due to **your** **lender**.

Mortgage Agreement

Your mortgage agreement on residential property, which has priority over any other charge on the property. Residential property means a property permanently and solely occupied by **you** and **your immediate family** as **your** main home.

Policy

This document sets out the benefits, terms, conditions and exclusions of **your** Plus One Insurance Solutions Payment Protection Insurance. It should be read in conjunction with **your** schedule of insurance.

Pre-existing Medical Condition

Any condition, injury, illness, disease, sickness or related condition and/or associated symptoms, whether diagnosed or not:

- which **you** knew about, or should reasonably have known about, at the **start date**, or
- which **you** had seen or arranged to see a **doctor** about, during the 12 months immediately before the **start date**.

Self-employed

You are self-employed if:

- **you** are carrying on a business in the **UK** either alone or as a partner in a partnership; or
- **you** can control the affairs of a company **you work** for because either **you** or a relative or a member of **your** household individually or jointly hold the majority of the voting rights in that company; or
- **you** can otherwise ensure that the company **you work** for conducts its affairs according to **your** wishes.

Specialist

A **doctor** who is or has been a consultant at an NHS hospital.

Start Date

The date shown on **your** schedule of insurance which is either of the following:

- If **yours** is a new **mortgage agreement**, insurance starts on the date of exchange of contracts (or the conclusion of missives in Scotland) for the purchase of residential property. No insurance benefit will be paid before the completion of the purchase; **you** will not have to pay any insurance premium until 30 days after that date.
- If **you** apply for insurance at any other time, including a further mortgage advance, **your** insurance starts on the date **we** accept **your** application.

Temporary Work

Work that is casual, occasional or for a specific task. Also **work** that is seasonal or irregular, or for a period of training or apprenticeship.

UK

England, Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man.

Unemployment/Unemployed

Having no paid **work** or **temporary work** and having a Jobseeker's Agreement with the Department for Work and Pensions in the **UK**. If **you** are ineligible for a Jobseeker's Agreement **you** must be able to provide alternative proof acceptable to **us** that **you** are actively seeking **work**.

Waiting Period

The period defined in this **policy** as selected by **you** and as stated in **your** schedule of insurance. **Monthly benefit** will not be paid during this period.

We/Us/Our

Aviva Insurance Limited.

Work

Any paid work of at least 16 hours a week. This includes **self-employed** work and statutory maternity and parental leave but not **temporary work**.

You/Your/Yours

The person who is eligible, has applied and been accepted by **us** for insurance and who has paid or agreed to pay the premiums.



Plus One Insurance Solutions Limited (registered in England No. 5140019) is an intermediary dealing with all policy administration including claims handling and premium collection.

Plus One Insurance Solutions is authorised and regulated by the Financial Services Authority.

Underwritten by Aviva Insurance Limited.

Registered in Scotland, No. 2116.

Registered Office: Pitheavlis, Perth PH2 0NH.

Authorised and regulated by the Financial Services Authority