



**safety NET**

**Income  
Protection  
Insurance**

**Including  
an extensive  
'Back-to-work'  
Assistance  
Package**

Valid from 01.01.09



**Berkeley  
Alexander**

Please read the following information carefully before the end of your 30 day cancellation period and use it to check that this policy is suitable for you. In particular, we draw your attention to the exclusions and limitations in the Key Facts document on the back cover. If you are unsure about any section, or need help understanding, then in the first instance speak to the intermediary who is arranging this insurance for you.

## 1. Who needs income protection?

Simply consider the following information:

### Key Considerations

- Today in Britain there are over 1,790,000 unemployed people. (Office for National Statistics October 2008)
- Over 980,000 people are receiving Jobseekers Allowance. (Office for National Statistics Oct. 2008)
- Over 2,640,000 are claiming incapacity benefits costing £12.65bn per year - most claiming for more than a year. Of these 1,300,000 have been claiming for more than 5 years - with 60% of them suffering from stress, depression or other mental health problems. (BBC 6 January 2008 & Daily Mail January 2007)
- There were 589,000 job vacancies as at October 2008, down 83,000 over the year. The largest falls occurred in distribution, hotels and restaurants (down 16,000) and finance and business services (down 10,000) (Office for National Statistics Oct 2008).

## 2. How will safetyNET help you?

Consider the following benefits:

- You must be employed to be insured under **safetyNET**. It is designed to cover your net monthly income in the event that you can't work through an accident or sickness or you lose your job through redundancy, unemployment or your business ceases to trade.
- Extensive 'back-to-work' assistance including 24-hour stress and medical help-line.
- Competitive premiums payable monthly by Direct Debit at no extra cost.
- Various deferred options of 30, 60 or 90 days.
- Depending on your selected option benefits can be payable for either 12 or 24 months (See Sections 4 and 6).
- Choose either unemployment only cover, or disability only cover (accident and sickness), or both combined.
- The self-employed, directors and proprietors of businesses are covered if their business ceases to trade due to business failure.
- No premium loading on the basis of age, gender or smoking habits.

## 3. 'Back-to-work' assistance and free 24-hour stress/medical helpline

We provide an extensive outplacement facility from Sapient HR Consulting, following unemployment, which provides:

- Support from a personal consultant with local employment market knowledge.
- Rapid face-to-face meeting held in a mutually convenient location within seven working days.
- Emphasis always on your personal needs.
- Access to multiple databases of potential employers.
- CV preparation and interview technique training.
- Consultant support and guidance is maintained for three months between 8.30am to 6pm six days a week.
- Free 24 hour stress/medical helpline.

## 4. How much cover can you have?

You can apply for income protection if you are employed or self-employed. However please note that if you include unemployment cover then the insurer will underwrite and assess your case depending on your individual circumstances and in some cases may amend the premium or the terms or, in some cases, may not be able to offer you cover.

The maximum monthly benefit available under **safetyNET** is £1,850 per month and must be less than 65% of your gross monthly income\*, whichever is lower.

(\* Gross monthly income means your monthly salary before tax and national insurance have been taken off plus the average of any overtime, commission or bonus payments you have received in the 12 months prior to the insurance start date or the date of your claim, whichever is applicable.)

You may choose to amend your cover from time to time. However your monthly benefit and the insurance cover shown on your policy schedule will remain unchanged unless you contact us and we agree to a variation. You cannot increase the amount of monthly benefit or change the insurance cover while you are making a claim.

Unemployment cover is not available for those working in banking, investment, fund management, telecommunications, motor manufacturing or the building trade. There are some exceptions to this though certain other industry types may also not be eligible for cover depending on circumstances at the time you apply for cover. Please discuss this with your financial intermediary who can check with the insurer.

**You cannot make a claim for unemployment if you become aware of the possibility of or are notified of your unemployment within the first 90-days (known as the Initial Exclusion Period) of taking out this insurance policy.**

## 5. Your commitment to safetyNET

By taking out **safetyNET** you provide the following commitments:

- To decide the amount of benefit you require and when you need the benefit to start and for how long.
- To give us all the employment, medical and other information we ask for when applying for your plan and when claiming any benefit. If you don't do this we may not be able to insure you or pay any claim.
- To make all the regular premium payments each month by direct debit.
- To tell us if you change your occupation (not including a change in your job title or a change in your work location if this does not entail a change in your actual duties), if your job or duties change with your existing employer or if you change employer or become unemployed. Any of these changes must be notified to our administrator within 14-days from the end of each monthly period. (Failure to inform us or our administrator could invalidate any claim you might wish to make.)
- To tell us, via the administrator, of unemployment, illness or injury within the time limits we set which has stopped you from working.
- To select an appropriate level of cover and review it regularly to make sure you have enough for your needs but no more than we will pay.
- To tell us, via the administrator, if you change address or bank details so that we can keep you properly informed as well as keeping our records up-to-date.

## 6. What are the costs of cover?

The costs of cover are expressed as a rate per £100 of monthly benefit and include Insurance Premium Tax.

### MONTHLY PREMIUM RATES

TYPE OF COVER	DEFERRED PERIOD	BENEFIT PERIOD	RATE PER £100 of monthly benefit
Unemployment	30 days	12 months	£3.16
	60 days	12 months	£2.95
Disability	30 days	12 months	£1.74
	60 days	12 months	£1.62
		24 months	£2.02
Unemployment and Disability	30 days	12 months	£3.16
	60 days	12 months	£2.95
		24 months	£3.68
	90 days	24 months	£3.42

#### EXAMPLE:

Example: If you choose Unemployment & Disability for £1,000 of monthly benefit with a 30-day deferred period for 12 months, the premium is calculated as follows:

**£1,000 x £3.16 - (divided by) £100 = £31.60 per month which is equivalent to £379.20 incl tax per year**

If the collection date is missed the administrator will collect two months premium during the following month.

## 7. How are premiums paid?

This is a monthly plan which automatically renews each time you pay your premium through your direct debit mandate and meet the conditions set out in this document and your policy wording. Any premium due under **safetyNET** is payable monthly in advance by Direct Debit. If you are claiming monthly benefit, you must continue to pay your premium as it falls due in order to ensure continuous cover under **safetyNET**. If the collection date is missed the administrator will collect two months premium during the following month. Any alterations or amendments to your cover or your premium during the lifetime of your plan will take effect from the following month.

We can amend your premium by giving you 30 days notice in writing.

If there are any changes to the current level of Insurance Premium Tax or any new taxation levies are imposed, your premium will be amended from the date any such taxation changes are implemented.

## 8. When does cover and benefits cease under safetyNET?

- The date you reach 65;
- When you reach your normal retirement date or you retire;
- The date on which your circumstances change if the change would make the insurance invalid;
- The date the premium is due in the event of the premium not being paid by you and you failing to put this right within 14 days;
- Your death;
- You tell us in writing, via the administrator, that you want to cancel this policy and return your policy schedule. We will cancel the insurance on the day the administrator receives your request. If you cancel this insurance within 30 days of the start date we will refund any premium you may have paid unless you have made a claim.
- We give you 90 days' notice in writing, if we are not going to offer you a substitute scheme, of the policy being cancelled (or 30 days' notice in writing if we are offering you cover under an alternative policy).

- To apply for **safetyNET** protection, complete this Application Form in **BLOCK CAPITALS** using a ball point pen (blue or black ink).
- Insurance begins when Red Sands Insurance has accepted your application and confirmed this to you in writing via the administrator, Compass Underwriting.
- You must give full and true answers to all questions. If you do not do so, your insurance cover may not protect you in the event of a claim.
- You should keep a record of all information supplied to Compass Underwriting (including copies of correspondence).
- A copy of the Application Form can be supplied on request within a period of 3 months after its completion.
- A copy of the policy wording is available on request.

Title **Your full name First Applicant (1)**

Date of birth (1)

Home address

Home telephone number

Email address

Postcode

Employment status (1) - Please tick the appropriate box

Employed	<input type="checkbox"/>	Self Employed	<input type="checkbox"/>	Shareholding Director	<input type="checkbox"/>	Contract Worker	<input type="checkbox"/>
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What is your gross monthly income? (1) See Section 4  /month

Length of service with current employer (1)  yrs  mths

Name of employer (1)

Company Registration No. (1)

The industry you work in (1)

Occupation (1)

The type of business you and your employer undertake (1)

Title **Your full name Second Applicant (2)**

Date of birth (2)

Employment status (2) - Please tick the appropriate box

Employed	<input type="checkbox"/>	Self Employed	<input type="checkbox"/>	Shareholding Director	<input type="checkbox"/>	Contract Worker	<input type="checkbox"/>
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What is your gross monthly income? (2) See Section 6  /month

Length of service with current employer (2)  yrs  mths

Name of employer (2)

Company Registration No. (2)

The industry you work in (2)

Occupation (2)

The type of business you and your employer undertake (2)

**Please answer the following questions by ticking the appropriate box.**

1. Are you permanently resident and working within the UK, Channel Islands or Isle of Man?
2. Are you now and have you been for the past six months in continuous permanent employment, contract employment or self-employment for more than 16 hours per week?
3. Is your work temporary, casual or seasonal (including any work for a temporary employment agency)?
4. Have you at any time during the past 12 months been registered as unemployed?
5. Have you been during the past 12 months, or are you in dispute or in the course of any disciplinary action with your employer?
6. Do you know of any redundancies, restructure, reorganisation, financial or contractual threats within the business you work in, even if you do not believe these actions will result in you becoming unemployed?
7. Have there been any redundancies in the business you work in over the past 12 months?
8. Are you currently receiving medical treatment or medical care of any kind, or awaiting referral for consultation treatment?
9. Have you had any illness or other treatment in the last three years including ever attending any hospital or clinic or had any specialist tests or investigations including those of a routine or minor nature?
10. Do you have any other similar insurances, ever been declined for this type of insurance, or had special terms imposed?

Applicant (1)		Applicant (2)	
YES	NO	YES	NO
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Important Note:** If you have ticked **NO** to Questions 1 or 2 or ticked **YES** to questions 3 to 10 then please provide further information on a separate sheet.

What date would you like cover to start?     (Under no circumstances can cover be backdated)

Deferred period

30 days 
 60 days 
 90 days

What type of cover do you require? - Please tick the appropriate box

Unemployment only cover
  Disability only cover
  Unemployment and disability cover

How long are benefits to be paid?

12 months 
 24 months

This option is only available if you have opted for unemployment and disability cover (or disability only).

**A** Enter your required monthly benefit here  
(Maximum cannot be more than £1,850 per month or 65% of your gross income, whichever is lower)

£

Please enter the benefit split you require for each applicant:

Applicant (1)  %  Applicant (2)  %

**B** Enter the premium rate as shown in Section 6

£

**C** Calculate your monthly premium using the formula  $(A \times B \div 100)$   
Insurance Premium Tax at the applicable rate has been added onto the premium and will be amended in line with any Government changes

£

## Declaration of Insurance

Please sign this declaration once you have read it. If you are unsure as to whether any information should be given, you should provide it.

### I declare that:

I will inform the insurer, via their administrator, of any changes that occur before this insurance commences. I understand that failure to do so may result in this insurance being declared void and that a claim for the benefits may not be paid.

To the best of my knowledge and belief all the statements made, which includes anything I have said, have been recorded accurately in this application or are as attached and are true and complete. This disclosure will form the basis of the contract.

I understand that this contract will renew automatically at the end of each month subject to the terms and conditions of this insurance and as specifically stated in Sections 4, 7, 8 and 10 of the key features and as set out in the Key Facts section which I confirm that I have read and understood. I also understand that I will not be required to complete a new direct debit mandate when the contract renews nor at the end of each 12-month period, though I may be required to complete a declaration of health and employment form.

I agree to the insurer and/or the administrator, Compass Underwriting, obtaining medical information from any doctor I have consulted about my physical or mental health, in order to assess my proposal. The Insurer and/or Compass may obtain relevant information from other Insurers about previous or concurrent applications for incapacity insurance that I have applied for.

I authorise those asked for such information to provide it on the production of a copy of this consent. This consent allows the insurer and/or Compass to obtain reports at any time during the life of the plan to support any claim made on the plan proceeds.

In the event of an insurance claim, I consent to any information which I provide to you, whether on this form, the claim form or otherwise, being put onto a Register of Claims through which insurers share such information to prevent fraudulent claims. I understand that a list of participants and the name and address of the operator are available from you.

I agree that a copy of the agreement given in this declaration will have the validity of the original.

### Data Protection Act 1998

To set up and administer your policy Red Sands Insurance and Compass Underwriting Limited will hold and use information about you supplied by you and by medical providers. We may send it in confidence for processing to other companies in the Red Sands Insurance Group (or companies acting on our instructions) including those located outside the European Economic Area.

By signing this declaration you consent to such use of your personal data.

### Important Notes:

The Insurer is free to choose the law which applies to this insurance contract. Unless you and the Insurers agree otherwise this insurance shall be subject to English Law and the English Courts will deal with any disputes.

You are reminded that you must inform us within 14 days if your occupation changes or you change employer at any time during the period of this insurance.

Full name of **Applicant (1)** in block capitals

Signature of **Applicant (1)**

Date

   

**Applicant (1)** - I wish to see a copy of any medical report before it is sent to Compass Underwriting  
Please tick the appropriate box

Yes  No

Full name of **Applicant (2)** in block capitals

Signature of **Applicant (2)**

Date

   

**Applicant (2)** - I wish to see a copy of any medical report before it is sent to Compass Underwriting  
Please tick the appropriate box

Yes  No



### Instructions to your bank or building society to pay direct debits



Originators identification number

7 2 8 0 1 0

Name(s) of account holder(s)

Compass Underwriting Ltd reference number (office use only)

Bank or building society account number

Branch sort code

#### Instruction to your bank or building society

Please pay Compass Underwriting Ltd direct debits from the account detailed in this instruction subject to the safeguards assured by the direct debit guarantee. I understand that this instruction may remain with Compass Underwriting Ltd and if so details will be passed electronically to my bank or building society.

Name and full postal address of your bank or building society branch

Signature (1)

Signature (2)

Date

Banks or building societies may not accept direct debit instructions on some types of accounts



This guarantee should be detached and retained by the payer

### Direct debit guarantee

This guarantee is offered by all banks and building societies that take part in the direct debit scheme. The efficiency and security of the scheme is monitored and protected by your own bank or building society.

If the amounts to be paid or the payment dates change, Compass Underwriting Ltd will notify you five working days in advance of your account being debited or as otherwise agreed.

If an error is made by Compass Underwriting Ltd or your bank or building society, you are guaranteed a full and immediate refund from your branch of the amount paid.

You can cancel a direct debit at any time by writing to your bank or building society. Please also send a copy of your letter to us.



### What to do now

- ✓ Please detach the application form from the 'About SafetyNET' document
- ✓ Please make sure you have read these documents, especially information about exclusions and limitations.
- ✓ Please ensure that you have completed and signed the relevant sections of the application form.
- ✓ Please ensure that you have completed and signed the Direct Debit Mandate
- ✓ Please forward the completed documents to Berkeley Alexander at the address shown below:

**Berkeley Alexander,**  
**Temple House, 25-26 High Street, Lewes, East Sussex BN7 2SD**  
**Tel: 0845 355 1166 Fax: 0845 355 1167**

<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> <p style="text-align: center; margin: 0;">Agent Number</p> <table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> </div>								<div style="border: 1px solid black; padding: 20px; min-height: 100px;"> <p style="text-align: center; margin: 0;">Agent Stamp</p> </div>

## Important Notes

This insurance will not commence until we have assessed and accepted your application and confirmed this to you in writing, via our administrator.

In most instances your payments will be as originally quoted. Revised terms may be offered to you, but occasionally we may be unable to offer any terms.

We may ask you to contact your doctor to speed up the completion of reports which we have requested.

If we ask you to attend a medical examination, it may be necessary for us to share the application information with another company authorised by us. They will make the arrangements for the examination to take place, usually by telephone.

We have a confidentiality policy in place which means that your medical information is held securely and access is limited to authorised individuals only.

You are entitled to ask for a copy of your policy wording at any time and can request a copy of your application form within a period of 3 months after its completion.

The law and courts of England will decide any dispute.

The UK Financial Services and Markets Act 2000 covers your plan. It is designed to protect you if the insurer become insolvent.

## Access to Medical Reports Act 1988

We may need to obtain medical reports or records to support your application or your claim. Before we can ask any doctor that you have consulted to complete a report or ask for your medical records, we require your permission under the Access to Medical Reports Act 1988 &/or the Data Protection Act 1998. Your rights under the Access to Medical Act 1988 are as follows:

You do not need to give your permission but, if you do not, we will be unable to proceed with your application. This does not prevent you from applying to other companies for insurance.

You can ask to see the report before the doctor returns it to us. If this is the case we will ask the doctor to keep the report for a period of 21 days for you to arrange to see it. If you have not made arrangements to see the report within this time, your doctor will send the report to us.

If you choose not to see the report at this stage, you may ask the doctor for a copy within six months of it being sent to us. We can send a copy of the report to your doctor if you ask to see it at a later date.

If you think that any part of the report is not correct or is misleading, you may ask the doctor to amend it. If your doctor refuses to make the amendments, you may ask him or her to attach a statement outlining your views, which will then accompany the report.

Your doctor can withhold access to the report if he or she feels that it would cause physical or mental harm to you or others.

The medical report your doctor fills in asks about the following:

- Your current health
  - Any care, medication or treatment you are currently receiving
  - The results of referrals or tests you are waiting for
- Any time off work in the last three years
- Your past health
  - Details of any relevant illness, trauma or referrals for specialist advice or treatment, hospital admissions, consultations with your GP or any other medical adviser, therapist or counsellor, in particular whether you have a history of:
    - Malignancy (cancer), cardiovascular (heart) disease, diabetes and degenerative (gradually worsening) diseases
    - Musculoskeletal disease or injury, for example, arthritis, rheumatism, back problems or any other disorder of the joints or muscles
    - Anxiety, depression, neurosis (such as phobias, obsessions and so on), psychosis (a mental disorder where you lose contact with reality), stress or fatigue
    - Suicidal thoughts or attempts at suicide or
    - Conditions related to drug or alcohol misuse or smoking or chewing tobacco
  - Details of any biopsies, blood tests, electrocardiograms (heart tests), height, weight if measured in the last two years, urinalyses (tests on urine), x-rays or other investigations
  - Any blood pressure readings in the last three years
- Any history of disease among your parents or brothers or sisters that you have told your doctor about

We have asked your doctor not to reveal information about:

- Negative tests for HIV, Hepatitis B or C
- Any sexually-transmitted diseases unless there could be long-term effects on your health or
- Predictive genetic test results unless there is a favourable test result which shows that you have not inherited a condition your family suffers from

The information you and your doctor provide about your health may result in us:

- Refusing to provide insurance
- Declining your claim (e.g. for a pre-existing medical condition)

If you have any questions about your rights under the Act or relating to the process of us obtaining, assessing or storing medical information, please write to the Chief Underwriter at Compass Underwriting Ltd, 1-2 Crutched Friars, London EC3N 2HT.

**9. What documentation do you receive?**

This key features brochure is designed to provide you with a summary of the cover available under **safetyNET**. Once your application has been accepted, you will receive the following documentation:

- A personalised Policy Schedule.
- A copy of the policy wording and policy summary.
- Details of our extensive 'back-to-work' assistance and free stress/medical helpline.

**10. How long do you wait before receiving your first benefit payment?**

Subject to the provisions of section 12, you will need to be in continuous employment and become unemployed or disabled during the period of insurance for longer than the deferred period of either 30, 60 or 90 days. We will pay you 1/30th of the monthly benefit for each day you remain continuously unemployed or disabled beyond the deferred period.

We will pay the benefit every month for the month passed for up to your chosen maximum benefit period once we have assessed and approved your claim. Provided we have all the information requested to validate your claim, the first monthly benefit payment will be made 31 days after the deferred period ends.

We will continue to pay you until:

1. the last day of your unemployment or disability;
2. the date you stop providing proof that you are still unemployed or disabled;
3. we have made the maximum number of monthly benefit payments in the benefit period;
4. you return to work, whichever happens first.

**11. How long are benefits paid for in the event of a claim?**

You can choose at the time of purchase to receive up to a maximum of either 12 or 24 monthly benefit payments for any separate disability or unemployment claim under **safetyNET** depending on your choice when you took out this insurance and the criteria set out in Section 4 and 6.

**12. When can you make a claim under safetyNET?**

You can make a claim under **safetyNET** at any time during the period of insurance providing you notify our administrator within 30 days of being made aware that you may become unemployed, redundant or disabled (as applicable) or as soon as reasonably possible. You may be required to see one of their consultants.

For unemployment claims you must be in receipt of the appropriate class of National Insurance contribution credits, actively looking for work (detailed evidence of this must be provided), without any work and registered as unemployed with the appropriate government agency and not in receipt of payments instead of working your notice, nor any other paid employment. For disability claims you must provide the administrator sick-notes (or well-notes) for periods no longer than 1-month (otherwise you must provide written details from your doctor) plus allow us &/or the administrator access to your medical records.

Once you have notified the administrator, they will send you a claim form which you must return to them as soon as possible, or within 30-days, including all the relevant information requested by us. If you are unable to do this you must write to the administrator with your explanation. The information you need to provide them will include such items as details of your mortgage, termination notice, Jobseekers Allowance (ABI1's), P60, P45, at least 4-months of wage slips and if self-employed, independent proof of earnings, audited accounts, bank statements, Inland Revenue and National Insurance records. For disability you will also need to provide medical information and sick notes. Failure to provide this information could seriously delay your benefit being paid or even result in non-payment of your claim.

You must provide the administrator, within 14-days from the end of each monthly period, detailed evidence every month that you want to claim. For unemployment claims this will include completing a monthly continuation form, providing evidence of your job seekers allowance (ABI1 forms) and detailed evidence of your job searches, including copy adverts, emails, responses, letters and your job search diary. For disability claims you will need to provide a monthly continuation form and sick-notes from your GP for periods no longer than 1-month (otherwise you must provide written details from your doctor). If you are unable to provide this within 14-days please write to the administrator with a detailed explanation as to why it will be delayed.

You will not be able to claim under this insurance during any holidays that you might take whilst your claim is on-going. This is because you are unable to obtain your ABI1 forms nor could you be actively looking for work during this period. For lone parents or claimants over 60 years old you may not need to register with the jobcentre in order to obtain your ABI1 form but you will need to provide alternative supporting evidence. The administrator's customer services will provide more information if necessary.

If you restrict your insurance to unemployment only cover or disability only cover, monthly benefit will only be payable in respect of a claim arising from the specific type of cover you have selected.

**13. What happens if you are offered temporary work?**

If you are eligible to claim for unemployment under this insurance and you are offered a temporary job, you can suspend your claim as long as:

1. you tell us who you will be working for (even if you will be self-employed), how many hours you will be working for and how long the temporary work will last;
2. your temporary job lasts for at least one week and no longer than six months and you do not have more than three separate jobs during any one claim period; and
3. you continue to meet the conditions of this insurance and tell us immediately if any of the circumstances above change.

You are eligible to claim for unemployment when a temporary job ends provided you have complied with the above. We will begin paying you monthly benefit payments again (up to your chosen benefit period for any one claim period).

**14. Can you or the insurer cancel safetyNET?**

You may cancel the insurance within 30 days of the insurance start date. You must write to the administrator and we will refund any premium you may have paid unless you have made a claim.

You can then cancel this insurance at any time by returning your policy schedule and asking the administrator, in writing, to cancel it.

We will cancel the insurance on the day the administrator receives your request. We will repay you any unused premium. We will not refund your premium if we have paid a claim on the insurance. You will be responsible for cancelling the direct debit arrangement.

Circumstances in which the Insurer will cancel your policy are detailed in section 8.

**15. What should you do if you require further information?**

If you require any further information regarding **safetyNET**, or you would like a copy of the full insurance terms and conditions, you should contact:

Berkeley Alexander, Temple House, 25-26 High Street, Lewes, East Sussex, BN7 2SD.

Telephone: 0845 355 1166 during Monday to Friday 9am to 5pm.  
We may monitor or record calls to improve our service.

Facsimile: 0845 355 1167

Email: info@baonline.co.uk

Please note that your financial advisor or Berkeley Alexander will normally be your first point of contact. Neither the administrator nor the insurer will be able to give you financial advice.

However if you do have any questions, you can contact the administrator at:

Office address: Compass Underwriting, 1-2 Crutched Friars, London, EC3N 2HT

Telephone: 020 7398 0100 during Monday to Friday 9am to 5pm.  
We may monitor or record calls to improve our service.

Facsimile: 020 7398 0109

Email: info@compassuw.co.uk

**INSURED, ADMINISTERED & REGULATED BY**



Red Sands Insurance Company (Europe) Limited is licensed and regulated by the Gibraltar Financial Services Commission under the Insurance Companies Act 1987 of Gibraltar and is a member of the UK's Financial Services Compensation Scheme and the Association of British Insurers (ABI).

Red Sands Insurance Company (Europe) Limited, registered in Gibraltar under number 87598, registered office at Suite 912C, Europort, Gibraltar.



This product is administered by Compass Underwriting Limited who are authorised and regulated by the Financial Services Authority.

This can be checked on the FSA's register by visiting the FSA's website at www.fsa.gov.uk/register or by contacting them on 0845 606 1234.

**ARRANGED EXCLUSIVELY BY**



This product is arranged exclusively by Berkeley Alexander who are authorised and regulated by the Financial Services Authority.

This can be checked on the FSA's register by visiting the FSA's website at www.fsa.gov.uk/register or by contacting them on 0845 606 1234.

## Policy Summary - Income Protection Insurance – Red Sands Insurance Company (Europe) Limited

This policy summary does not contain full details and conditions of your insurance – these are located in your policy wording.

Where a heading is underlined in this policy summary, full details can be found in your policy wording under the same heading.

It is essential that you refer to the exclusions relating to medical conditions and voluntary unemployment which appear in the significant or unusual exclusions or limitations section of this policy summary.

This policy is underwritten by Red Sands Insurance Company (Europe) Ltd. Red Sands Insurance Company (Europe) Limited is licensed and regulated by the Gibraltar Financial Services Commission under the Insurance Companies Act 1987 of Gibraltar.

### Type of Insurance and Cover

This insurance provides financial benefit (monthly benefit) against your loss of net monthly income in the event of unemployment and/or disability. Your policy schedule will show which option or combination of options you have selected.

If the policy is in joint names, each person insured will be covered for the benefit amount shown against their name on the policy schedule.

### Eligibility for Cover (Section 2)

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

- permanently live in the United Kingdom, Channel Islands or Isle of Man;
- are aged between 18 and 64;
- are working in employment or self-employment and you have been so continuously for the previous six months, during which time you have not been registered as unemployed with the appropriate government agency; and

We will consider you to be self-employed if you are in a profession or business alone or with others and paying class-2 National Insurance contributions, or you are a company director.

We will consider you to be employed if you are actively working for payment under a permanent contract of employment or a regular fixed-term contract of at least 16 hours a week and paying class-1 National Insurance contributions.

We will consider you to be on a regular fixed-term contract if you are on a contract of at least 12 months with the same employer that has been renewed at least once, or a contract with the same employer for a continuous period of at least 24 months or a fixed-term contract to which you were transferred from a permanent contract of employment with the same employer with no break between contracts.

You must notify us as soon as possible if your circumstances change as this may alter your entitlement to benefit under this policy. For example if you choose to give up work or you cease to pay national insurance contributions, please contact us on 020 7398 0100 as your change in circumstances may mean that you might not be eligible to claim on your policy.

### Features and Benefits

#### Unemployment Cover and Disability Cover - What is covered (Sections 3 and 4)

If you chose a deferred period on your policy schedule then:

If you become unemployed or suffer a disability and your unemployment or disability continues for longer than the deferred period, we will pay one thirtieth of the monthly benefit for each consecutive day that you remain unemployed or disabled after the deferred period has ended.

#### Payment of Benefit

The first payment will be due 31 days after the deferred period has ended. Subsequent payments will be made monthly in arrears for each further day of unemployment or disability for the maximum benefit period, until you return to work or when the policy terminates, whichever occurs first.

The 'deferred period' is the number of days at the beginning of a period of disability or unemployment for which no benefit will be paid. Your policy schedule will show the length of the deferral period.

The 'exclusion period' is the number of days from the start date where any unemployment that you are notified of or which happens within this period is not covered. There is no exclusion period for disability claims. Your policy schedule will show the length of the exclusion period.

#### Significant or unusual Exclusions or Limitations:

The maximum amount we will pay is the monthly benefit shown on your schedule of insurance, although cover is subject to an overall maximum monthly payment of £1,850. For further information please refer to the definition of 'Monthly Benefit' under Meaning of Words (Section 1) of the policy wording.

Cover ends and no claims are payable once you retire or reach the normal retirement age at your place of work, whichever is earlier. For further information please refer to When Cover ends (Section 8) of the policy wording.

#### Unemployment Cover - What is not covered (Section 3)

We will not pay the monthly benefit for any unemployment if:

- you are notified about the risk of unemployment within the initial exclusion period, even though your unemployment may not take place until after this period.
- it follows a period of casual, temporary or occasional work
- your work is seasonal and unemployment is a normal part of it, or unemployment is a regular feature of your work.
- you are unemployed during a period in which you have received payment instead of working your notice. If it is unclear what period is covered by this payment, we will work out the period in weeks by dividing the amount of the payment by your average gross earnings each week for the 13 weeks immediately before your unemployment started.
- it arises as a result of you coming to the end of a fixed-term contract or a contract for your services, unless it is a regular fixed-term contract. A regular fixed term contract is a contract of at least 12 months with the same employer that has been renewed at least once, or a contract with the same employer for a continuous period of at least 24 months or a fixed-term contract to which you were transferred from a permanent contract of employment with the same employer with no break between contracts.

- it is caused by your resignation, voluntary unemployment or voluntary redundancy. This exclusion will not apply if:
    - a) your unemployment is solely and directly as a result of you becoming a carer, and you can provide evidence to us which proves that you were not aware at the start date that you would become a carer; or
    - b) your voluntary redundancy is claimed under section 147 or 148 of the 1996 Employment Rights Act due to short-time working. If you make a claim, you will have to produce documentation to confirm that your redundancy is within the terms of this Act.
  - you knew about the possibility of unemployment (or in our reasonable opinion you should have known about it) at the start date.
  - you are self-employed and cannot provide satisfactory evidence of having ceased to trade.
  - you do not meet the unemployment definition, this is: a period during which you must be no longer employed or self-employed and be:
    - a) receiving the appropriate class of National Insurance contribution credits;
    - b) available for and actively looking for work in the UK;
    - c) registered as unemployed with the appropriate government agency;
    - d) entirely without work; and
    - e) not receiving wages.
- If you are a company director, your company must have been wound up by a creditor who is not a director of that company.

#### Disability Cover -What is not covered (Section 4)

We will not pay monthly benefit if your disability:

- arises from stress, anxiety or depression, or any mental or nervous disorder, unless investigated and diagnosed by a consultant specialising in the relevant field;
- results from a pre-existing condition. A pre-existing condition is defined as any medical condition, injury, illness, disease, sickness or related medical condition, and associated symptoms, whether diagnosed or not, which you:
  - a) knew about or should reasonably have known about at the start date; or
  - b) have seen or arranged to see a doctor about during the 12 months immediately before the start date;
    - and which comes back within 24 months after the start date;
- results from a chronic condition that you knew about or should reasonably have known about at the start date, whether it needed medical attention at that time or not. A chronic condition is considered any medical condition, injury, illness, disease, sickness or related condition that has at least one of the following characteristics:
  - a) Continues indefinitely
  - b) Is constant and controlled rather than cured
  - c) Has symptoms that keep coming back and have needed consultation, treatment, advice or care in the past
  - d) Needs long-term monitoring, treatment, consultation, check-ups, examination or tests;
- is due to a back complaint or related condition, unless supported by specialist medical evidence.

#### Duration and reviewing your cover

This policy is for a period of one month from the start date. It shall be renewed automatically every month for which the premium is received and accepted by the insurer until cover ends as described in When Cover Ends (Section 8) of the policy wording.

You should periodically review your selected benefit levels and deferred periods to make sure they remain suitable for your needs. This is especially important if your gross salary or outgoings significantly change while your insurance is in force. If you want to review your benefit levels please contact the intermediary who arranged your cover.

#### Cancellation period

If you cancel this insurance within 30 days of the start date, we will refund any premium you may have paid unless you have made a claim. Please note that the insurance is cancelled on the day we receive your request.

#### Claim Notification

To notify us of a claim you can write to the administrator's claims department at: Compass Underwriting Limited, 1-2 Crutched Friars, London, EC3N 2HT. You can also obtain a claim form by phoning their customer service desk on: 020 7398 0100 or you can go to their web site at the following address: [www.compassuw.com](http://www.compassuw.com)

#### Making Yourself Heard

Any complaint you may have should in the first instance be addressed to the Managing Director of Compass Underwriting Ltd. If you are not satisfied with the way in which your complaint has been dealt with, you should write to us at the Customer Care Department of Red Sands Insurance Company.

If the complaint is still not resolved, you can approach The Financial Ombudsman Service. Referral to the Financial Ombudsman will not affect your right to take legal action.

Full details of addresses and contact numbers can be found within the Customer Service (Section 12) of the policy wording.

#### Financial Services Compensation Scheme (FSCS)

Red Sands Insurance Company is covered by the FSCS, which is triggered when an authorised firm goes out of business. In this unlikely event you may be entitled to compensation from the scheme. Compensation under the scheme for:

- Compulsory insurance is covered in full.
- Non-compulsory insurance is protected in full for the first £2,000 and 90% of any amount above this threshold.

Full details are available at [www.FSCS.org.uk](http://www.FSCS.org.uk)