

Union Income Benefit Holdings Plc
MASTER POLICY DOCUMENT
personal accident “free cover” insurance

In return for the premium paid to Compass by Union Income Benefit Holdings Plc on behalf of registered union members, Compass Underwriting Limited acting on behalf of the insurer will provide the cover set out in the table of benefits.

If you make any claim, which you know is false or fraudulent in any way, this insurance will end and we will not pay that claim.

1 Cover provided

- a The insurer will pay the benefit shown in the table of benefits if, at any time during the period of insurance you suffer an accidental injury or death (see the definitions below).
- b This cover also applies if you drown, or are killed or injured as a result of being exposed to the elements after an incident or involving the transport you are travelling in.
- c If you go missing following an incident, after considering all available evidence, we may presume you are dead and pay benefit under this insurance. If, at any time after we pay a claim in these circumstances, you are found alive, you must refund the payment we made.

2 Definitions

- a Accident – a sudden, unexpected and unusual event which happens at a certain time and place during the period of insurance. This must be the only cause (except for illness directly resulting from, or medical or surgical treatment which is needed by, the injury) which causes your death or disability within 12 calendar months of the date of the accident.
- b Death – death of the insured person after an accident.
- c Loss of a limb, eyes, speech, hearing – total and permanent loss of use or physical separation of a hand at or above the wrist or leg or foot at or above the ankle or the total and permanent loss of your sight in either one or more eye(s) or your permanent total loss of your ability to speak or to hear.
- d Injury - an injury you suffer during the period of insurance and which directly results in accidental death or loss of a limb, speech, hearing or sight as covered by this insurance, as defined within the table of benefits, within 12 calendar months of the accident which caused the injury.
- e Insured Person, You, Your – The person named in the certificate of insurance.
- f Permanent – lasting more than 12 consecutive months with no hope of improvement for the rest of your life.
- g Terrorism - an act which can include using or threatening force or violence of any person or group of people, whether acting alone or on behalf of or in connection with any organisation or government, committed for political, religious, ideological or similar purposes. This includes the intention to influence any government or to put the public, or any section of the public, in fear.
- h The Insurer – AXA Insurance UK Plc, registered in England number: 78950, registered office: 107 Cheapside, London EC2V 6DU.
- i We, Us, Our – Compass Underwriting Limited on behalf of the insurer.

3 Table of Benefits

The level of benefit you will be entitled to receive will be specifically shown in your certificate of insurance:

	<u>Option 1</u>	<u>Option 2</u>
1. Accidental Death	£1,000	£ 2,500
2. Total and irrecoverable loss of sight in both eyes	£1,000	£ 2,500
3. Loss of two or more limbs	£1,000	£ 2,500
4. Total and irrecoverable loss of speech	£1,000	£ 2,500
5. Total and irrecoverable loss of sight in one eye	£ 500	£ 1,250
6. Loss of one limb	£ 500	£ 1,250
7. Total and irrecoverable loss of hearing	£ 500	£ 1,250
8. Loss of thumb and index finger on the same hand	£ 250	£ 625

4 Conditions relating to accident benefit

- a If you die accidentally, from the date of your death we will pay your estate the benefit stated in event 1.
- b We will only pay benefit for events 2 to 8 in the table of benefits if the event occurs within 12 calendar months of the date of the accident.
- c If an accident covered by this insurance results you dying within 12 calendar months of the date of the accident and before we have settled a claim for events 2 to 8 in the table of benefits, we will pay the benefit for event 1, otherwise we will only pay the balance of event 1 less any previous payments.

5 General conditions

- a If you are in any accident which may give rise to a claim under this insurance must return a fully completed claim form (or your legal representative in the event of your death) including medical evidence within 30 days, or as soon as reasonably possible, of the incident date to either UIB as set out in Section 8 or to Compass Underwriting Limited, Claims Department, 40 Lime Street, London. EC3M 7AW. Tel. 020 7398 0100, fax 020 7398 0109 or email london@compassuw.co.uk
- b If you become or may become injured, you must see a qualified medical practitioner as soon as possible.
- c You must be permanently resident in the United Kingdom.
- d If you make a claim under this insurance you must allow our medical advisor(s) to examine you as often as necessary. You will need to provide any evidence we need to support your claim, including any past medical history, current medical evidence and other similar documents. If you fail to provide or delay in providing, this information when requested it could lead to delays in paying your claim or not having the claim paid at all.
- e You may choose which law will apply to this insurance. Unless you and we agree otherwise, this insurance will be governed by English law and any disputes will be dealt with by the English courts.

f To set up and administer your policy the insurer and we will hold and use information about you, which you and medical providers have provided. We may send it to other companies in the insurer's group (or companies acting on our instructions, including those outside the European Economic Area. By accepting this insurance, you are agreeing to us using your personal data in this way.

6 General exclusions

We will not be liable for death or injury directly or indirectly resulting from the following.

- a You committing or attempting to commit suicide, intentionally injuring yourself or deliberately putting yourself in danger (except in an attempt to save human life).
- b You taking part in any criminal act or being under the influence of more than the legal limit of alcohol or drugs (unless prescribed by a doctor).
- c You riding or driving in any kind of race or taking part in operational duties within the armed forces.
- d You taking part in winter sports (other than skating or curling), skin-diving, potholing, hang-gliding, horse riding, parachuting, martial arts, mountaineering or rock climbing if this would normally need ropes or guides or other such hazardous sports.
- e Biological and chemical weapons, acts of war, riot, revolution, strike, or any similar event. Acts or threats of terrorism.
- f Radioactive contamination from ionising radiation or contamination from any nuclear fuel, or from any nuclear waste arising from burning nuclear fuel; or the radioactive, toxic, explosive or other dangerous effect of any explosive nuclear equipment or part of that equipment.
- g Medical operations or treatments, which are not medically necessary to maintain your quality of life, including cosmetic or beauty treatments.
- h You flying except in a fully licensed passenger plane as a passenger.
- i Any injury, condition or illness, which existed at the start of this insurance.
- j Any claim arising out of an illness or sickness.

7 Premiums and cancellation

- a This insurance is provided free of charge to the Insured as the premium and insurance tax are being paid by Union Income Benefit Holdings Plc.
- b You may cancel this insurance within 14 days after the start date. If you do not do this, we will assume you have accepted this insurance and have agreed to keep to its terms and conditions.
- c You have the right to cancel this insurance at any time by giving us written notice at our registered office. The cancellation will apply when we receive your written notice.
- d We may cancel this insurance, for any reason, by giving written notice to you at your last known address confirming that all cover will end 30-days after the date of our notice.

8 Claims

If you are in any accident which may give rise to a claim under this insurance, you must return a fully completed claim form (or your legal representative in the event of your death) including medical evidence **within 30 days**, or as soon as reasonably possible, of the incident date to: Union Income Benefit Holdings Plc, 38 Wigmore Street, London. W1H 9DF.

9 Complaints procedure

If you have any question or complaint, either about your insurance or about a claim, you should first contact Union Income Benefit Holdings Plc. If you are still unhappy, please write to the Managing Director, Compass Underwriting Limited, 40 Lime Street, London. EC3M 7AW or fax 020 7398 0109 or email complaints@compassuw.co.uk. You need to clearly and concisely give the reason for your complaint. Please also make sure that you give us all your contact details and your policy or claim number.

If we cannot sort your complaint out or you are still not satisfied, you can take the issue further. You will need to write to The Head of Customer Care, AXA Insurance UK Plc, Civic Drive, Ipswich, IP1 2AN. Phone: 01473 205926, fax: 01473 205101 or e-mail customercare@axa-insurance.co.uk who will arrange for an investigation on behalf of AXA Insurance's Chief Executive. If AXA Insurance UK Plc have given you their final response and you are still not satisfied, you may refer your case to the Financial Ombudsman Service (FOS) at, Insurance Division, South Quay Plaza, 183 Marsh Wall, London. E14 9SR. Phone: 0845 080 1800 or fax: 020 7964 1001.

The FOS is an independent organisation that arbitrates on complaints about general insurance products. It will consider complaints after the insurer has given you written confirmation that they have been through their full complaints procedure. You have six months from the date of the insurer's final response in which to refer your complaint to the FOS. This does not affect your right to take legal action.

Union Income Benefit Holdings Plc, AXA Insurance UK plc and Compass Underwriting Ltd 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.

Signed by Compass Underwriting Limited on behalf of the insurer:

Signature: 
Managing Director

Date: **24 March 2005**