

# INCOMEPROTECTOR

## Income Protection Insurance Policy

### Monthly Premium

#### **POLICY SUMMARY**

This document provides a summary of cover only. It does not contain the full terms and conditions of the policy which can be found in the policy document. It is essential that you read the full policy document to ensure that you understand the product purchased.

#### **WHO IS THE INSURER?**

The Insurer of this policy is Hitachi Capital Insurance Europe Limited.

#### **WHAT IS INCOME PROTECTOR INSURANCE?**

The policy will pay the monthly benefit amount should you become unable to work as a result of unemployment and/or accident or sickness.

The benefit will be paid after the deferred period of 30 days.

#### **ELIGIBILITY (see page 5 of the policy wording)**

You are eligible for any section of this cover provided:

- at the start date you are working in the UK and have been so, continuously, for the previous 6 months
- you are permanently resident in the UK
- at the start date you are 18 or over and under 65
- you have paid or agreed to pay the premiums and your application has been accepted as evidenced by the issuing of the certificate.

#### **HOW LONG DOES MY INCOME PROTECTOR PROTECTION LAST?**

Your policy is arranged on a monthly basis. You must pay your monthly premium each month. Each monthly premium covers you for one month. If your monthly premium has not been paid the policy will lapse and cover will cease from the date your monthly premium was due.

Your cover and any benefit being paid will end automatically on any of the following:

- your death
- your 65<sup>th</sup> birthday
- you do not pay your monthly premium due on this insurance
- the date you permanently retire from work

#### **WHAT ARE THE BENEFITS OF INCOME PROTECTOR INSURANCE?**

The classes of cover and benefits of this policy are as follows and will be paid after the deferred period of 30 days:

##### **Unemployment**

You must be unable to work due to unemployment for 30 days (the deferred period) after which we will pay you one monthly benefit. Thereafter this policy will pay one thirtieth of the monthly benefit for each day of absence from work after the deferred period. The maximum payable is 12 months in any one claims period.

##### **Accident or Sickness**

You must be unable to work due to accident or sickness for 30 days (the deferred period) after which we will pay you one monthly benefit. Thereafter this policy will pay one thirtieth of the monthly benefit for each day of absence from work after the deferred period. The maximum payable is 12 months in any one claims period.

#### **WHAT AM I NOT COVERED FOR UNDER INCOME PROTECTOR INSURANCE?**

There are some situations that you are not covered for and full details are found in the policy document.

##### **General Exclusions (see page 9 of the policy wording)**

We will not pay any monthly benefit if you are unable to work due to:

- normal pregnancy and childbirth related conditions
- HIV (Human Immunodeficiency Virus) and/or any other HIV related illness

including AIDS (Acquired Immune Deficiency Syndrome)

- Alcohol or drug abuse
- any civil unrest, terrorism, nuclear radiation or contamination from nuclear waste or any related event, or any act related to war;

We will not pay any monthly benefit:

- if you have not paid your premium
- if you do not tell us about your claim for accident or sickness or unemployment within 6 months of the event

##### **Unemployment Exclusions (see page 11 of the policy wording)**

- any unemployment which you were aware of at your policy commencement date
- if you receive notification of unemployment within the first 60 days of your policy commencement date
- expiry of fixed term employment
- seasonal occupations
- when you have not been in continuous work for 6 months prior to your unemployment
- unemployment which is in any way voluntary
- any deferred period selected at the time of purchase of the policy

##### **Accident or Sickness Exclusions (see page 14 of the policy wording)**

- any condition, injury or sickness which is present within the 12 months preceding the start date
- normal pregnancy and childbirth
- stress, anxiety or any mental disorder (unless satisfactory medical evidence is provided)
- backache and related conditions (unless satisfactory medical evidence is provided)
- self inflicted injury
- any accident or sickness that occurs while you are working outside the United Kingdom
- any deferred period selected at the time of purchase of the policy

### **WHAT HAPPENS IF I TAKE OUT THE COVER AND THEN CHANGE MY MIND?**

You have the right to cancel this policy within 30 days of receiving the Certificate of Insurance without financial penalty provided you have made no claim. Thereafter both parties must give 30 days notice of cancellation and no refund of premium will be given.

You may cancel this insurance by cancelling your direct debit at any time during the life of this insurance. We reserve the right to withdraw cover should any monthly premium not be met within 14 days of its due date.

### **HOW DO I MAKE A CLAIM?**

You should telephone the claims line number 0845 2410943, or write to the Claims Administrators: CONNECTmi Limited 4th Floor, 75-77 Cornhill, London EC3V 3QQ. You should fill in the claim form carefully, following the instructions given

### **HOW DO I MAKE A COMPLAINT?**

If you have a complaint about the way in which this policy was sold to you please contact the agents that sold you the policy and they will be able to provide you with their complaints procedure.

Any complaint you may have about this policy should be communicated to in the first instance to the Scheme Administrator, Advent Solutions Management Limited, 4th Floor, 75-77 Cornhill, London EC3V 3QQ, Telephone 0845 241 0944. Please be ready to quote your certificate number so that your complaint may be dealt with promptly.

If you are still not satisfied with the way your complaint has been dealt with you should write to: The Managing Director C/O Hitachi Capital Insurance Europe Limited, 2 Apex View, Leeds, LS11 9BH who will arrange for an investigation to be carried out into your complaint.

In the unlikely event that the complaint is still not resolved to your satisfaction, you may refer to the Financial Ombudsman

Service whose address is South Quay Plaza, 183 Marsh Wall, London, E14 9SR, telephone number 0207 964 1000. Please note you have six months from the date of our final response in which to refer your complaint to the Financial Ombudsman. Referral to the Ombudsman will not affect your right to take legal action against us. None of the above affects any right of legal action you may have.

### **WOULD I RECEIVE COMPENSATION IF THE INSURER WERE UNABLE TO MEET ITS LIABILITIES?**

Hitachi Capital Insurance Europe Limited is covered by the Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from the scheme if Hitachi Capital Insurance Europe Limited cannot meet its obligations. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2000 and 90% of the remainder of the claim without any upper limit. Further information about the compensation scheme is available from the FSCS helpline on 0207 892 7300 or visit their website at [www.fscs.org.uk](http://www.fscs.org.uk)