



Prepaid Plus

Travel Accident Permanent Total Disability Plan

In partnership with

Union Income Benefit®

PROTECTING THE FUTURE FOR YOU
AND YOUR FAMILY



Policy Summary

This is an **important document**. Please read it carefully to make sure that the policy meets your requirements. You should keep it with your Certificate of Insurance. This Policy Summary does not contain the full terms and conditions of your policy. These can be found in your Certificate of Insurance and Schedule of Benefits. Please review your cover periodically to ensure that it continues to meet your needs and your financial circumstances.

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1. WHO PROVIDES YOUR POLICY?

The Travel Accident Permanent Total Disability Plan is provided by Stonebridge International Insurance Ltd.

2. WHAT KIND OF COVER DOES IT PROVIDE?

The Travel Accident Permanent Total Disability Plan pays a cash lump sum if you suffer a Permanent Total Disability as a result of an accident. A Permanent Total Disability means the inability to carry out any paid work at all for the rest of your life. The policy has no cash-in value.

3. WHAT ARE THE MAIN BENEFITS OF THE POLICY?

The policy pays out a lump sum cash benefit if you suffer a Permanent Total Disability from:

- a collision, crash or sinking of a plane, ship, train or bus – most forms of public transport – while travelling as a fare-paying passenger;
- most road traffic accidents, whether you are a pedestrian or you are the driver or passenger in a private car, lorry or most other four wheeled vehicles

4. WHAT IS NOT COVERED?

There are some situations that you are not covered for and some limitations on what will be paid out. This is a summary of the main exclusions and limitations of your policy. Full details are shown in sections A, D and F of the Certificate of Insurance.

You must be aged between 18 and 64 to take out this policy and live for at least 7 months of the year in the UK.

Claims will not be paid if the Permanent Total Disability:

- is as a direct result of consumption of excessive alcohol or use of illegal drugs
- is caused by a reckless or illegal act on your part
- occurs while members of the Armed Forces are on duty
- occurs where you are the driver, rider or passenger of any two wheeled vehicle such as a motorcycle, or on an agricultural vehicle, construction vehicle, sports utility vehicle or fork lift truck

Limitations to what might be paid out:

- private buses (including school buses), coaches and taxis are not considered public transport under the policy. Accidents in these vehicles are covered under the road traffic accident benefit
- pilots and cabin crew are not covered while flying for their job

Payment will not be made:

- if death occurs within 90 days of the accident irrespective of whether you suffered a Permanent Total Disability
- if the accident occurs in any month for which the Prepaid Card Monthly Management Fee has not been paid

5. WHEN DOES THE POLICY START AND FINISH?

The policy starts on the date shown at the top of your Schedule of Benefits.

Cover ends either:

- on the Termination Date shown on the Schedule of Benefits
- on payment of the Permanent Total Disability Benefit shown on the Schedule of Benefits
- at the end of the term of insurance after your 65th birthday; or
- on the date the cover is cancelled whichever is the earlier.

6. CAN THE POLICY BE CANCELLED?

You can cancel the policy at any time without penalty.

You can cancel:

- *in writing*
Customer Services Department, Union Income Benefit Holdings Ltd, Linton House, 39/51 Highgate Road, London NW5 1RT
- *by phone*
0800 028 2801

7. HOW TO MAKE A CLAIM

You can claim:

- *in writing*
Customer Service Department, Stonebridge International Insurance Ltd, PO BOX 2801, East Court, Stoke on Trent, ST4 9DN
- *by phone*
0870 420 1244

8. HOW TO MAKE A COMPLAINT

If you wish to register a complaint please contact us:

- *in writing*
Customer Services Department, Union Income Benefit Holdings Ltd, Linton House, 39/51 Highgate Road, London NW5 1RT
- *by phone*
0800 028 2801

If you cannot settle your complaint with us, you may be entitled to refer to the Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR

9. THE FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

We are covered by the FSCS. You may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim.

CERTIFICATE of INSURANCE FOR TRAVEL ACCIDENT - PERMANENT TOTAL DISABILITY PLAN

This is your Union Income Benefit Holdings Ltd. Travel Accident - Permanent Total Disability Plan.

This Certificate details the terms and conditions of your Travel Accident - Permanent Total Disability Plan and should be read together with your Schedule of Benefits as one document. Your Travel Accident - Permanent Total Disability Plan is underwritten by Stonebridge International Insurance Ltd. ("we", "us", "our"). We agree to pay the Benefits provided under this Certificate subject to all the terms and conditions of this Certificate.

RIGHT TO CANCEL THE CERTIFICATE

You may cancel the Certificate at any time by, either writing to, or telephoning the Customer Services Department, giving details of your name, address and Certificate number. The details of the Customer Services Department are provided on the Schedule of Benefits. We may cancel this Certificate provided that we give you at least 30 days prior written notice, which we will send to you at your last known address.

A. DEFINITIONS

(The words below have the meaning shown under them wherever they appear in this Certificate).

Benefit(s) means the level of financial cover detailed on the Schedule of Benefits.

Certificate means this Certificate of Insurance for Travel Accident - Permanent Total Disability Plan.

Certificate Effective Date means the day, month and year on which cover starts as shown on the Schedule of Benefits.

Certificate End Date means the day, month and year on which cover ends as detailed in Section C – Period of Cover.

Permanent Total Disability means any injury which is the direct result of an Insured Accident and independent of any other cause which results in the Insured Person being unable to perform any paid work for the remainder of their life and which is certified by a Doctor to be permanent, total and irreversible.

Doctor means a person who is duly licensed and legally qualified to diagnose and treat sickness and injuries. Such person must be providing services within the scope of his or her licence. The Doctor may not be you, your partner or the parent, child, brother or sister of you or your partner.

Insured Person ("you," "your," or "yours") means you, the Insured Person named on the Schedule of Benefits.

Insured Accident means a sudden, unforeseeable and fortuitous event that occurs after the Certificate Effective Date and before the Certificate End Date and which results directly from external and/or violent means.

Monthly Management Fee means the monthly fee charged by Union Income Ltd for administering the Prepaid Card

Prepaid Card means the prepaid card arranged by Union Income Benefit Holdings Limited in partnership with Union Income Limited.

Public Transport means any train, boat, bus, coach, plane, tram or other mode of transport used to transport the general public on a regular passenger route with regularly published schedules of departures and arrivals between established and recognised points of departure and arrival.

Schedule of Benefits means the document attached to this Certificate that details the Benefits payable in respect of an Injury.

Termination Date means the date shown on the Schedule of Benefits when cover for this Travel Accident – Permanent Total Disability Plan terminates.

United Kingdom (UK) means England, Scotland, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

B. ELIGIBILITY

To be eligible for this cover, you must:

- be between 18 and 64 (inclusive) years of age at the Certificate Effective Date; and
- live permanently in the United Kingdom for at least 7 months out of every 12 months

If you move out of the United Kingdom for more than 5 months in a 12 month period then your cover will terminate on the renewal date after this period has been reached.

C. PERIOD OF COVER

When your insurance begins

Your insurance will start on the Certificate Effective Date.

When your insurance ends

Your Travel Accident - Permanent Total Disability Plan will end on the earliest of the following dates:

- the Termination Date shown on the Schedule of Benefits
- the date you or we cancel your insurance;
- the date at the end of any 12 month period immediately after the Policyholder reaches the age of 65
- on payment of the Permanent Total Disability Benefit shown on the Schedule of Benefits

D. SCOPE OF COVER

We will pay the Permanent Total Disability Benefit shown on the Schedule of Benefits in the event of the Insured Person sustaining Permanent Total Disability in an Insured Accident either:

involving one or more vehicles on a public highway (road traffic accident) or whilst a fare paying passenger on a Public Transport vehicle

Payment of the Permanent Total Disability Benefit is subject to the Definitions and other provisions set out in this Certificate.

Important Notes and Benefit Limitations:

1. The benefits provided are available for the period of 12 months from the Certificate Effective Date shown on the Schedule of Benefits, subject to the Monthly Management Fee for the Prepaid Card being paid each month.
2. The level of Benefit will be that which was in force at the date of the Insured Accident.
3. For the Permanent Total Disability Benefit payment to be made, the Insured Person must survive 90 days after the date of the Insured Accident

E. EXCLUSIONS

No Benefits shall be paid for any Injury resulting in Total Permanent Disability sustained by the Insured Person that:

- is intentionally self-inflicted, while sane or insane or is due to deliberate or reckless behaviour unless the Insured Person is trying to save someone's life
- occurs while under the influence of, or being affected (temporarily or otherwise) by drugs that have not been taken in accordance with medical instructions;
- is due to war or act of war (whether declared or not), invasion, acts of foreign enemies, civil war or unrest, rebellion, rioting or while on naval, military or air force duty, service or operation including training exercise;
- occurs as a result of a road traffic accident where the Insured Person is the driver and has a level of alcohol in excess of the legal minimum permitted at the time and place of the accident or, in the case of all other accidents is caused directly or indirectly by inappropriate use of alcohol including but not limited to consuming too much alcohol.
- occurs while the Insured Person is committing or is attempting to commit an assault, battery, criminal offence or act of terrorism;
- occurs where the Insured Person is the driver, rider or passenger of any two wheeled vehicle, agricultural vehicle, construction vehicle, sports utility vehicle or fork lift truck

F. CLAIMS PROCEDURES AND REQUIREMENTS

If you wish to make a claim, please ask for a claim form from Stonebridge Claims Department: PO Box 2801, East Court, Stoke-on-Trent, ST4 9DN, or telephone our Claims Centre on the free phone number stated on your Schedule of Benefits within 30 days of the Insured Accident, or as soon as possible thereafter. You must complete the claim form and send it together with the information set out below, to the above address within 90 days of the Insured Accident (or within such period as agreed by us), as failure to do so may affect the claim.

You must include with the completed claim form, the following information (where applicable):

- the original Certificate of Insurance
- medical certificates
- medical reports for example, from any hospitals attended, or treating Doctors or Consultants;
- a copy of any official report you have in your possession such as a police accident report or a health and safety report;
- other information about the Insured Accident such as newspaper clippings;
- evidence that you or another person who is claiming benefit is the rightful beneficiary under the Certificate of Insurance, for example probate documentation issued by a court;
- evidence that the Insured Person who suffered an Injury meets the definition of Insured Person under Part A of this Certificate such as bank statements or birth certificates

All original documents will be copied for our records and returned to you by special delivery post. Depending on what is disclosed in the documents supplied, we may require further information so that we may fully investigate the claim to determine whether any Benefit is payable. For example we may require a post mortem to be performed in the case of Death, where it is not forbidden by law or an independent medical examination.

Payment of Claim

Unless you specify otherwise, any Benefits payable under the Permanent Total Disability Plan will be paid to the Insured Person if living, otherwise to the Insured Person's Personal Representative(s), appointed in accordance with the Grant of Representation / Confirmation.

G. GENERAL PROVISIONS

Review of Certificate Conditions

We may vary or amend the terms and conditions of the Certificate at any time provided that at least 30 days' written notice is given to you prior to any alteration taking place. At any time we may both agree to vary the Benefits available under the Certificate.

Contracts (Rights of Third Parties) Act 1999

No person other than the parties and Insured Persons may enforce any term of this Certificate by virtue of the Contracts (Rights of Third Parties) Act 1999.

Currency

All Benefits are payable in pounds British sterling or such other currency which may be lawful in the United Kingdom at the time of payment.

Fraud

Any fraud, mis-statement or concealment, either in the information which you provide in relation to any matter affecting this insurance, or when you are making a claim under this Certificate, will cause this cover to be of no effect, and all rights to Benefits will be lost.

Governing Law And Language

The insurance contract will be concluded in accordance with, and governed by, the law that applies in the part of the UK where you reside at the time the contract is concluded. All information has been provided to you in English. We will continue to communicate with you in English.

Interest

No Benefit payable under this Certificate shall carry interest.

Waiver

Failure to exercise any right conferred by this Certificate shall neither be deemed to be a waiver of such right nor in any way prejudice any right under this Certificate.

Data Protection

Stonebridge International Insurance Ltd. is committed to complying with the requirements of UK & EU Data Protection legislation. This means that in the provision of our services, appropriate personal information is processed and kept securely in strict accordance with such requirements.

Stonebridge International Insurance Ltd. is part of the international AEGON Group and uses its group facilities to assist in providing these services. Stonebridge International Insurance Ltd. may share your details with other carefully selected organisations solely for the purposes of servicing and administering your insurance and conducting analysis and market research, and meeting legal/regulatory requirements.

You have the right to ask for a copy of certain information held on our records in return for payment of a small fee, by writing to the Customer Service Department shown on the Schedule of Benefits. You also have the right to require us to correct any inaccuracies in your information.

We may record telephone calls for monitoring and training purposes.

IF YOU NEED TO COMPLAIN

We aim to give a good service. However, there may be times when things go wrong, and you are not satisfied with the service that you receive. If this happens, please contact the manager of the department you are dealing with. He or she should be able to solve any problem to your satisfaction.

If you feel that they have not, please contact the Customer Service Department on the free phone number stated on the Schedule of Benefits.

The Customer Service Department will deal with any complaint promptly and professionally. If you are not satisfied with this response, you can refer the matter to the Managing Director of Stonebridge International Insurance Ltd.

If, after following the above procedure, your complaint has still not been adequately resolved, you may refer the matter to the Financial Ombudsman Service. The address is: Financial Ombudsman Service
South Quay Plaza
183 Marsh Wall
London
E14 9SR

Referral to the Financial Ombudsman Service does not affect your right to take legal action against us.

We are covered by the Financial Services Compensation Scheme (FSCS) and you may be entitled to compensation from the scheme should we be unable to meet our liabilities to you. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit. Further information about compensation arrangements are available from the FSCS at www.fscs.org.uk or by telephoning 020 7892 7300.

OTHER IMPORTANT INFORMATION

Stonebridge International Insurance Ltd. is an insurance company providing general insurance products; its registered address is Braywick Gate, Braywick Road, Maidenhead, Berkshire, SL6 1DA and it is registered in England with No. 3321734. It is authorised and regulated by the Financial Services Authority (FSA). Its FSA Register number is 203188. You can check this on the FSA's register by visiting the FSA's website www.fsa.gov.uk/register, or by contacting the FSA on 0845 606 1234. Stonebridge International Insurance Ltd. only provides information on its accident and sickness insurance products.

Union Income Benefit Ltd. (UIB) issued and administer this Certificate of Insurance on behalf of Stonebridge International Insurance Ltd. UIB is registered in England with No. 03877610, Registered Office 5th Floor, 7/10 Chandos Street, London W1G 9DQ. UIB is authorised and regulated by the Financial Services Authority (FSA) and its FSA register number is 307575. You can check this on the FSA's register by visiting the FSA's website www.fsa.gov.uk/register, or by contacting the FSA on 0845 606 1234.