

Allianz Insurance plc

Pupils Personal Accident Policy

Personal accident

Allianz 

HETTLER ANDREWS

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Insurers and service providers

Policyholder Helplines are administered by AWP Assistance (UK) Limited trading as Allianz Global Assistance on behalf of the Insurer.

All Sections of this policy are underwritten by Allianz Insurance plc.

Introduction

Thank you for choosing Allianz Insurance plc.

We are one of the largest general insurers in the UK and part of the Allianz Group, one of the world's foremost financial services providers.

With Allianz Insurance plc, you can be confident that you're insured by a company which is relentless in its commitment to protecting and serving you. You can trust us to insure your business, as we've been providing leading insurance solutions in the UK for over 100 years.

We work in partnership with your insurance adviser to ensure you receive the highest levels of product and service excellence. Our technical experts understand how best to protect you against the risks your business faces.

If you need to make a claim you will be in safe hands. Our professionally trained staff aim to treat you, as you would expect, both promptly and fairly. By listening to you, and understanding your needs we will provide you with the most appropriate solutions to get your business trading again as quickly as possible.

Your **Policy** of insurance is made up of several parts which must be read together as they form your contract. Please take time to read all parts of this **Policy** to make sure that they meet your needs and that you understand the terms, exclusions and conditions. If you wish to change anything or if there is anything you do not understand, please let your insurance adviser know.

The parts of the **Policy** which form your contract of insurance with Allianz Insurance plc are:

- this Introduction
- the proposal, presentation of the risk, or any other information supplied by you or on your behalf
- the **Policy Definitions**; the **Policy Conditions** and the **Policy Exclusions**, all of which apply to all **Sections** of the **Policy**
- the **Sections** of cover selected by you as shown on the **Schedule**
- the **Exclusions** and **Conditions** which apply to the **Sections** selected by you
- the **Schedule**, which includes all **Clauses** applied to the **Policy** while the **Policy** is in force.

Any word or expression in the **Policy** which has a specific meaning has the same meaning wherever it appears in **bold** in the **Policy**, unless stated otherwise.

In consideration of payment of the premium the **Insurer** will indemnify or otherwise compensate the **Insured** in accordance with the provisions of this **Policy** and subject to the terms, conditions, limits and exclusions of this **Policy** or any **Section** of this **Policy** in respect of any claim occurring in connection with the **Business** during the **Period of Insurance** or any subsequent period for which the **Insurer** agrees to accept a renewal premium.

Signed on behalf of Allianz Insurance plc.



Jonathan Dye
Chief Executive

Making a Claim

Claims under this [Policy](#) should be referred to:

Claims Division
Allianz Insurance plc
PO Box 10509
51 Saffron Road
Wigston
LE18 9PF

Tel: 0344 893 9500
Fax: 01483 790726

Lines are open from Monday to Friday.

Policyholder Helplines

These added value services are provided as automatic benefits under your [Policy](#) and are administered by AWP Assistance (UK) Limited trading as Allianz Global Assistance on behalf of the [Insurer](#).

All services are accessed by the [Insured](#) or [Insured Person](#) contacting AWP Assistance (UK) Limited trading as Allianz Global Assistance on the telephone numbers provided alongside each service.

Medical Advice Line

Tel +44(0) 208 603 9517

The medical advice helpline can provide advice and information on a wide range of issues from:

- All medical and surgical conditions
- Medications
- Pre and post treatment advice
- The rights of patients and their families
- Hospital procedures
- Location of specialist practitioners, hospitals and consultants
- Do's and don'ts before and after treatment
- The right questions to ask the doctor/consultant/hospital in plain English
- Details of local and national help and support groups

If they don't have the answer, the medical team will source the required details and call back, e-mail or post these to the employee.

The Medical Advice Line provides comprehensive advice and information, however, it is not an emergency service and will not provide a diagnosis or prescribe treatments.

Definitions

Accidental Bodily Injury

Bodily injury caused by:

- a. accidental violent external and visible means
- b. unavoidable **Exposure to the Elements**.

Adjustment Information

Such additional information as the **Insurer** may require the **Insured** to provide in order to calculate the full premium due for the **Period of Insurance** as shown on the **Schedule**.

Associated Illness

Sickness or disease (except any psychological condition or disorder) that results directly from the **Insured Person** sustaining **Accidental Bodily Injury** that would not otherwise have arisen and had not previously arisen.

Benefit

The sum or sums of money that the **Insurer** has agreed to pay the **Insured** or, as applicable, the **Insured Person** as shown in the **Schedule**.

Business of the Insured

The Business of the **Insured** as shown in the **Schedule**.

Clause

Any addition, variation or alteration to the terms of this Policy.

Contamination

Contamination or poisoning of people by nuclear and/or chemical and/or biological substances that cause illness and/or disablement and/or **Death**.

Death

Death caused by **Accidental Bodily Injury**.

Education

A programme of learning or caring provided by the **Insured** which may lead to qualification by examination or assessment which is either full time study or a mixture of study and work experience. Any Nursery or Pre-Preparatory School is included within this definition.

Employee

Any employee of the **Insured** or any other person acting in the capacity of an employee whilst working for the **Insured** in connection with the **Business of the Insured**.

Europe

The **United Kingdom** and Eire, the continent of Europe, islands in the Mediterranean, former member states of the Soviet Union west of the Ural Mountains and Turkey west of 30° East.

Event Accumulation Limit

The **Insurer's** maximum liability in the aggregate under this and any other group personal accident and/or business travel and/or sickness policies issued or to be issued by the **Insurer** to the **Insured** for all **Losses** not involving air travel.

Exposure to the Elements

Death or **Accidental Bodily Injury** as a direct result of unavoidable exposure to extreme heat or cold.

Facial Disfigurement

Permanent scarring of the face effecting an area:

- a. one square centimetre or two centimetres in length
- b. greater than **a.** above for which the benefit payable will be assessed according to the area effected in relation to the benefit payable for **a.** above and the maximum benefit specified in the Table of Sums Insured for scarring covering the whole area.

Insured

The **Insured** school named and shown in the **Schedule**.

Insured Person

Those persons specified in the **Schedule** as being **Insured Persons**.

Insurer

Allianz Insurance plc

Journey

A journey up to 6 months duration undertaken by an **Insured Person** which is organised and authorised by the **Insured's** School.

Loss/Losses

A loss or series of losses arising out of or consequent upon or contributed to directly or indirectly by one originating event.

Maximum Benefit

The maximum amount of **Benefit** payable, as shown in the Table of Sums Insured in the **Schedule**.

Operative Times of Cover

The time and circumstances when cover under this **Policy** is effective within the **Period of Insurance** shown in the **Schedule** by reference to the terms on page 5 of this **Policy**.

Parent or Legal Guardian

A person with parental responsibility, or a legal guardian both being in accordance with the Children Act 1989 and any statutory amendment modification or re-enactment of it.

Period of Insurance

The period of insurance shown in the **Schedule** being the period during which this **Policy** remains valid subject to the **Operative Times of Cover**. The **Period of Insurance** runs up to 11.59pm on the day immediately prior to the renewal date shown in the **Schedule**.

Permanent Disability

Disability which has lasted for at least 12 months and from which an **Insured Person** will not recover for the remainder of his or her life.

Policy

The contract of insurance formed of the documents described in the Introduction.

Schedule

The part of this **Policy** that details information forming part of this contract of insurance and that shows the **Sections** of this **Policy** that are operative.

Spouse

The spouse, partner or civil partner of the **Insured Person** with whom the **Insured Person** has been cohabiting for at least 3 months as though they were their spouse, partner or civil partner.

Terrorism

An act including but not limited to the use of force or violence and/or the threat thereof of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or Government(s) committed for political, religious, ideological, ethnic or similar purposes or reasons including the intention to influence any Government and/or to put the public or any section of the public in fear.

Total Loss of both eyes

Total and permanent loss of both eyes which will be considered as having occurred in both eyes if the **Insured Person's** name has been added to the Register of blind persons on the authority of a fully qualified ophthalmic specialist.

Total Loss of Hearing in both ears

Total and permanent loss of hearing in both ears which has lasted for three consecutive months of the **Insured Person's** lifetime and at the end of that period in the opinion of an independent qualified medical referee is beyond hope of improvement.

Total Loss of Hearing in one ear

Total and permanent loss of hearing in one ear which has lasted for three consecutive months of the **Insured Person's** lifetime and at the end of that period in the opinion of an independent qualified medical referee is beyond hope of improvement.

Total Loss of intellectual capacity

Total and permanent loss of ability to remember, reason, perceive, understand, express, and give effect to ideas.

Total Loss of one eye

Total and permanent loss of an eye which will be considered as having occurred in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.

Total Organic Paralysis

Total organic permanent loss of muscle function and sensation across the entire and complete body.

Loss of Speech

Total and permanent loss of the ability to speak or communicate verbally

Total Loss of Tooth

Total loss of a natural tooth excluding deciduous milk teeth

United Kingdom

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

War

Invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.

Operative Times Of Cover

- **24 Hours**
At any time.
- **School Term Time**
24 hours a day anywhere in the world and will cease when the **Insured Person** permanently leaves the **Insured's** school or nursery.

School Term Time extensions

Arrival at School

If the **Insured Person** is traveling directly to the **Insured's** School to commence forthwith their **Education** before the start of a School term, cover will commence upon the **Insured Person's** leaving home, even if such travelling commences before the start of the **Period of Insurance**, provided that the School term falls wholly within the **Period of Insurance**.

School Transfer

If the **Insured Person** transfers to another school within the **United Kingdom** cover continues until the **Insured Person** starts their uninterrupted travel to the new school.

Return Home

If an **Insured Person** is not returning to the **Insured's** School following the completion of their **Education** after the end of a term cover will cease immediately upon the **Insured Person's** uninterrupted return home direct from the **Insured's** School or to another destination.

School Journeys

Cover will be effective for **Journeys** which take place after the end of the **Insured Person's** final term at School, provided that:

- a. The trips are organised by the **Insured**;
- b. The **Insured Person** booked their place of the trip before the end of their final term at the **Insured's** School.

Section 1 – Personal Accident

Cover

The **Insurer** will pay the **Insured** the sum or sums shown in the **Schedule** if any **Insured Person** suffers **Accidental Bodily Injury** during the **Period of Insurance** and **Operative Times of Cover** which, within 12 months thereof solely, directly and independently of any other cause results in payment of a **Benefit** specified in the Table of Sums Insured on the **Schedule**.

Extensions

Disappearance

If an **Insured Person** disappears and it is reasonable to believe that such **Insured Person** has died as a result of **Accidental Bodily Injury** occurring during the **Operative Times of Cover**, the Insurer shall pay the **Death Benefit** shown in the **Schedule**. If the **Insured Person** is aged 17 years or less the **Insurer** will pay the **Benefit** to the **Parent or Legal Guardian** of the **Insured Person**. If the **Insured Person** is aged 18 years or over the Insurer will pay the **Benefit** amount to the estate of the **Insured Person**. The **Parent or Legal Guardian** or the **Insured Person's** legal representatives shall provide a signed undertaking that if the death is subsequently found to be incorrect the **Death Benefit** paid shall be refunded to the **Insurer**.

Exposure

Death and/or **Accidental Bodily Injury** to an **Insured Person** as a direct result of unavoidable **Exposure to the Elements** shall be deemed to have been caused by **Accidental Bodily Injury**.

Independent Financial Advice

If within the **Operative Times of Cover** an **Insured Person** sustains **Accidental Bodily Injury** resulting in **Death** or payment of any **Benefit** over £100,000 the **Insurer** shall indemnify the **Insured** up to £2,500 for the benefit of the **Insured Person** for fees charged by an Independent Financial Adviser authorised and regulated by the Financial Conduct Authority or equivalent regulatory authority in the **Insured Person's** Country of Permanent Residence and who is not the **Insured Person** the **Spouse** of the **Insured Person** a member of the immediate family of the **Insured Person** or an **Employee** of the **Insured** to provide the **Insured Person** with one session of professional financial adviser.

Policy Conditions

This Part of the Policy provides details of all Conditions that apply to all sections.

1. Fair Presentation of the Risk

- a. The **Insured** must make a fair presentation of the risk to the **Insurer** at inception, renewal and variation of the **Policy**.
- b. The **Insurer** may avoid the **Policy** and refuse to pay any claims where any failure to make a fair presentation is:
 - i. deliberate or reckless; or
 - ii. of such other nature that, if the **Insured** had made a fair presentation, the **Insurer** would not have issued the **Policy**.

The **Insurer** will return the premium paid by the **Insured** unless the failure to make a fair presentation is deliberate or reckless.

- c. If the **Insurer** would have issued the **Policy** on different terms had the **Insured** made a fair presentation, the **Insurer** will not avoid the **Policy** (except where the failure is deliberate or reckless) but the **Insurer** may instead:
 - i. reduce proportionately the amount paid or payable on any claim, the proportion for which the **Insurer** is liable being calculated by comparing the premium actually charged as a percentage of the premium which the **Insurer** would have charged had the **Insured** made a fair presentation; and/or
 - ii. treat the **Policy** as if it had included such additional terms (other than those requiring payment of premium) as the **Insurer** would have imposed had the **Insured** made a fair presentation.

For the purposes of this condition references to:

- a. avoiding a **Policy** means treating the **Policy** as if it had not existed from the inception date (where the failure to make a fair presentation of the risk occurs before or at the inception of the **Policy**), the renewal date (where the failure occurs at renewal of the **Policy**), or the variation date (where the failure occurs when the **Policy** is varied);
- b. refunds of premium should be treated as refunds of premium back to the inception date, renewal date or variation date as the context requires;

- c. issuing a **Policy** should be treated as references to issuing the **Policy** at inception, renewing or varying the **Policy** as the context requires;
- d. premium should be treated as the premium payable for the particular contract of insurance which is subject to this condition (where there is more than one contract of insurance).

2. Misrepresentation of facts relevant to an Insured Person

If any claim is made under the policy, the **Insurer** will not invoke the remedies which might otherwise have been available to it under Policy Condition 1. Fair Presentation of the Risk as against the **Insured**, if the failure to make a fair presentation of the risk concerns only facts or information which relate to a particular **Insured Person**. If the **Insured Person** concerned or the **Insured** on their behalf makes a careless misrepresentation of facts, the **Insurer** may invoke the remedies available to it under Policy Condition 1 as against that **Insured Person** only, as if a separate insurance contract had been issued to such person, leaving the remainder of the **Policy** unaffected.

3. Fraudulent Claims

If any fraud to which Policy Condition 6 relates is perpetrated by or on behalf of an **Insured Person** (and not on behalf of the **Insured**), Policy Condition 6 should be read as if it applies only to that **Insured Person's** claim and references to the **Policy** should be read as if they were references to the cover effected for that person alone and not to the **Policy** as a whole.

4. Payment of Premium

The **Insured** must pay to the **Insurer** all premiums due to the **Insurer** together with all taxes due on the premiums.

If the **Insurer** agrees to accept payment of premiums by instalments and payment of any instalment is not made on a due date for whatever reason the full outstanding balance shall become payable immediately.

5. Assignment

The **Insured** and the **Insured Person** must not assign any of the benefits under this **Policy**. The **Insurer** will not be bound to accept or be affected by any notice of trust, charge, lien or purported assignment or other dealing with or relating to this **Policy**.

6. Change in Risk

It is a condition precedent to the liability of the **Insurer** that the **Insured** must give immediate notice to the **Insurer** of any change to the occupation of any **Insured Person** from that which the **Insured** originally advised to the **Insurer**.

7. The Insurer's right to cancel this policy

Other than where Policy Condition 16 Fraud applies the **Insurer** may cancel this **Policy** by giving the **Insured** thirty (30) days' notice at their last known address. Provided the premium has been paid in full and no claim has been made during the **Period of Insurance**, the **Insured** shall be entitled to a proportionate rebate of premium in respect of the unexpired period of the insurance.

If the premium for this **Policy** is paid by instalments, in the event that the **Insured** fails to pay one or more instalments whether in full or in part the **Insurer** may cancel the **Policy** by giving fourteen (14) days' notice in writing to the **Insured** sent to their last known address.

The **Insured Persons** and the **Insured** may not cancel this **Policy**.

8. Cancellation – War Risks

The **Insurer** may cancel cover under this **Policy** in respect of **War** risks at any time and at its discretion by sending fourteen (14) days notice by recorded delivery post to the **Insured** at the **Insured's** last known address but such cancellation of cover will not apply for any **School Journey** outside of the **United Kingdom** or the **Insured Person's** country of residence (if different) which commenced prior to the effective date of the notice of cancellation. The **Insured** will notify all **Insured Persons** of such cancellation.

9. Adjustment of premium

If premium has been calculated on a deposit or declaration basis, the **Insured** must provide the **Adjustment Information** as shown in the **Schedule** to the **Insurer** within 30 days of the expiry of the **Period of Insurance**.

Any additional premium calculated to be due must be paid by the **Insured** upon demand and any return premium will be paid by the **Insurer** to the **Insured**.

If the **Insured** does not provide the **Adjustment Information** within 30 days of the expiry of the **Period of Insurance** then the **Insurer** will be entitled to adjust the premium at its discretion, but subject to any additional premium not exceeding 50% of the annual premium for the relevant **Period of Insurance**.

10. Benefit Limits

- a. The **Insurer** will not pay more than the **Maximum Benefit** for **Benefits** 1 to 6 or any other sum insured as shown in the **Schedule** for any one **Insured Person**.
- b. The **Maximum Benefit** payable in respect of **Death** of an **Insured Person** under 16 years of age or under 18 years of age and in full time education shall not exceed £20,000 or the **Benefit** stated in the **Schedule** whichever is the lower.
- c. The **Insurer** will not pay more than one of the **Benefits** 1 to 6 shown in the Table of Sums Insured in respect of any one **Insured Person** for injuries arising from the same **Loss**.

11. Disappearance

Death of any **Insured Person** shall not be presumed by reason of their disappearance.

If after a reasonable period of time has elapsed the **Insurer** having examined all the evidence available has no reason to suppose other than that the **Insured Person** has sustained an accident during the **Operative Time of Cover** resulting in their **Death**, the disappearance of such **Insured Person** shall be deemed to constitute **Death** by accident for the purposes of this **Policy**.

In the event of the **Insured Person's** re-appearance after payment of compensation under **Benefit** 1 in the Table of Sums Insured the beneficiary thereof will repay such compensation to the **Insurer** unless probate has been granted or legal evidence of the presumption of **Death** has been supplied to the **Insurer**.

12. Claims conditions

No claim will be paid unless the **Insured** and where applicable the **Insured Person** complies strictly with these conditions:

- a. the **Insured** or **Insured Person** must give notice to the **Insurer** as soon as possible and in any event within 30 days after the happening of any loss damage or occurrence which may result in a claim under this **Policy**
- b. the **Insured** or **Insured Person** must provide the **Insurer** with all information and evidence which the **Insurer** may reasonably require at no cost to the **Insurer**
- c. the **Insured** or **Insured Person** must at the **Insurer's** request provide a medical examination report in respect of any **Accidental Bodily Injury** where the **Insured** requires the **Insurer** to consider a claim under this **Policy** for which the **Insurer** will pay the cost of the medical examination fee
- d. the **Insured** must ensure that as soon as possible after the occurrence of any **Accidental Bodily Injury** the **Insured Person** obtains and follows the advice of a registered medical practitioner

The **Insurer** will not be liable for any bodily injury or medical condition which is worsened or prolonged or any other consequences which arise as a result of the **Insured Person's** failure to obtain and follow such advice and to use such treatment remedies or appliances as may be prescribed

- e. in the event of the **Death** of an **Insured Person** the **Insurer** will be entitled to have a post-mortem examination carried out at its expense

13. Third Parties

Save as set out herein, a person or company who is not a party to this **Policy** has no right under the Contracts (Rights of Third Parties) Act 1999 or any subsequent legislation to enforce any terms of this **Policy** but this does not affect any right or remedy of a third party which exists or is available apart from such act.

14. Law Applicable to Contract

Unless the **Insurer** agrees otherwise:

- a. the language of the **Policy** and all communications relating to it will be English; and
- b. all aspects of the **Policy** including negotiation and performance are subject to English law and the decisions of English courts.

15. Policy Age Limit

Unless otherwise agreed by the **Insurer** and specifically noted in this **Policy** no person aged 80 or over at commencement of the **Period of Insurance** will be covered by this **Policy**.

16. Fraud Condition

If the **Insured** or anyone acting on the **Insured's** behalf:

- a. makes any false or fraudulent claim;
- b. makes any exaggerated claim;
- c. supports a claim by false or fraudulent documents, devices or statements (whether or not the claim is itself genuine);
- d. makes a claim for loss or damage which the **Insured** or anyone acting on the **Insured's** behalf deliberately caused,

the **Insurer** will:

- i. refuse to pay the whole of the claim; and
- ii. recover from the **Insured** any sums that it has already paid in respect of the claim.

The **Insurer** may also notify the **Insured** that it will be treating the **Policy** as having terminated with effect from the date of the earliest of any of the acts set out in sub-clauses

a. – d. above. In that event, the **Insured** will:

- a. have no cover under the **Policy** from the date of the termination; and
- b. not be entitled to any refund of premium.

17. Loss Reduction Conditions

If the **Insured** does not comply with any part of any condition which makes payment of a claim conditional upon compliance with it (a condition precedent), the **Insurer** will not pay for any claim, except that where the condition concerned:

- a. operates only in connection with particular premises or locations, the **Insurer** will pay for claims arising out of an event occurring at other premises or locations which are not specified in the condition;
- b. operates only at particular times, the **Insurer** will pay for any claim where the **Insured** shows on the balance of probabilities that its non compliance with the condition did not cause or contribute to the injury, loss, damage or liability which occurred;
- c. would, if complied with, tend to reduce particular types of injury, loss, damage or, as the context may require liability, the **Insurer** will pay for any claim where the **Insured** shows on the balance of probabilities that its non-compliance with the condition did not cause or contribute to the injury, loss, damage or liability which occurred.

18. Reasonable Precautions

The **Insured** shall take all reasonable precautions to prevent accidents and any injury, loss, destruction or damage and shall take all reasonable steps to observe and comply with statutory or local authority laws, obligations and requirements.

Policy Exclusions

This Part of the Policy provides details of all Exclusions. Exclusions applicable to all Sections of the Policy are listed first, followed by Exclusions applicable to each individual Section of the Policy.

This Policy does not cover:

Liability to pay any claim or provide any cover under this Policy to the extent that the provision of such cover, payment of such claim or provision of such benefit hereunder would expose the Insurer or members of the Allianz Group to:

- A. any sanction, prohibition or restriction under United Nations resolutions; or
- B. the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States or America; or
- C. any other applicable economic or trade sanctions law or regulations.

Sanctions programs are subject to change and prohibitions or restrictions could take effect post-inception of this Policy. Sanctions seek to prevent particular governments, non-state entities or individuals from purchasing arms, accessing financial support or services, or trading in specified goods or services, and are backed by criminal and civil penalties. Sanctions can include asset freezes, arms and trade embargoes, travel bans and other.

or

Any claim for any Section of this Policy arising out of or consequent upon or contributed to

1. directly or indirectly by:
 - a. any Insured Person committing a criminal act or taking part or whilst engaged in civil commotions or riots of any kind.
 - b. the Insured Person
 - i. taking illegal drugs or taking non-prescribed drugs for recreational purposes or taking drugs prescribed for the Insured Person's own drug addiction or alcoholism
 - ii. being affected by alcohol where the alcohol level is greater than 80 milligrams per 100 millilitres of blood
 - iii. serving in the Armed Forces of any Nation or International Authority
 - iv. committing suicide, attempted suicide or intentional self-injury

- v. taking part in or attempting to take part in off-piste winter sports

c. War (whether declared or not):

- i. between any of the Major Powers (specifically China, France, the United Kingdom, any of the former member states of the Soviet Union and the United States of America)

and/or

- ii. within Europe in which any of such Major Powers or their armed forces are involved or any enforcement action within Europe by or on behalf of the United Nations.

- d. ionising radiations radioactive contamination or radiation of any kind including the radioactive, toxic or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

- e. venereal disease or Acquired Immune Deficiency Syndrome (AIDS), Human Immunodeficiency Virus (HIV) and or any mutual derivative or variations however caused

- f. participation in professional sport

upon the Insured or Insured Person, as applicable.

2. Any travel to Afghanistan, Iraq, Ivory Coast, Somalia, Chechnya.
3. Any claim in excess of £25 million in the aggregate under this and any other group personal accident and/or business travel and/or sickness policies issued or to be issued by the Insurer to the Insured for all Losses not involving air travel.
4. Any claim under Section 1 (Personal Accident) of this Policy in respect of:
 - a. any Benefit during the Excess Period
 - b. sickness or disease (with the exception of Associated Illness or Benefit 4 under the Continental Scale)
 - c. engaging in air travel as aircraft crew of any kind or carrying out any trade or technical operation whilst an aircraft is in flight other than as a Minor member of the Air Cadet Organisation.

Complaints

Our aim is to get it right, first time every time. If you have a complaint we will try to resolve it straight away but if we are unable to we will confirm we have received your complaint within five working days and do our best to resolve the problem within four weeks. If we cannot we will let you know when an answer may be expected.

If we have not resolved the situation within eight weeks we will issue you with information about the Financial Ombudsman Service (FOS) which offers a free, independent complaint resolution service.

If you have a complaint, please contact our Customer Satisfaction Manager at:

Customer Satisfaction Manager
Allianz Insurance plc
57 Ladymead
Guildford
Surrey
GU1 1DB

Telephone number: 01483 552438
Fax Number: 01483 790538
Email: accsm@allianz.co.uk

You have the right to refer your complaint to the Financial Ombudsman, free of charge – but you must do so within six months of the date of the final response letter.

If you do not refer your complaint in time, the Ombudsman will not have our permission to consider your complaint and so will only be able to do so in very limited circumstances. For example, if the Ombudsman believes that the delay was as a result of exceptional circumstances.

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Website: www.financial-ombudsman.org.uk
Telephone: 0800 023 4567 or 0300 123 9123
Email: complaint.info@financial-ombudsman.org.uk

Using our complaints procedure or contacting the FOS does not affect your legal rights.

The European Commission has an online dispute resolution service for consumers who have a complaint about a product or service bought online. If you choose to submit your complaint this way it will be forwarded to the Financial Ombudsman Service.

Visit <https://ec.europa.eu/odr> to access the Online Dispute Resolution Service. Please quote our e-mail address: accsm@allianz.co.uk

Alternatively, you can contact the Financial Ombudsman Service directly.

Financial Services Compensation Scheme

Allianz Insurance plc contributes to the Financial Services Compensation Scheme (FSCS).

The **Insured** may be entitled to compensation from the FSCS if the **Insurer** is unable to meet its liabilities. Further information about compensation scheme arrangements is available at www.fscs.org.uk, by emailing enquiries@fscs.org.uk or by phoning the FSCS on 0800 678 1100 or 0207 741 4100.

Data Protection

Allianz Insurance plc together with other companies within the Allianz SE group of companies (“Allianz Group”) may use the personal and business details you have provided or which are supplied by third parties including any details of directors, officers, partners and employees (whose consent you must obtain) to:

- provide you with a quotation, deal with the associated administration of your **Policy** and to handle claims;
- search credit reference, credit scoring and fraud agencies who may keep a record of the search;
- share with other insurance organisations to help offset risks, administer your **Policy**, for statistical analysis, and to handle claims and prevent fraud;
- support the development of our business by including your details in customer surveys, for market research and business reviews which may be carried out by third parties acting on our behalf.

Allianz Group may need to collect and process data relating to individuals who may benefit from the **Policy** (“**Insured Persons**”), which under the Data Protection Act is defined as sensitive (such as medical history of **Insured Persons**) for the purpose of evaluating the risk and/or administering claims which may occur. You must ensure that you have explicit verbal or written consent from the **Insured Persons** to such information being processed by Allianz Group and that this fact is made known to the **Insured Persons**.

Telephone calls may be recorded for our mutual protection, training and monitoring purposes.

Under the Data Protection Act 1998 individuals are entitled to request a copy of all the personal information Allianz Insurance plc holds about them. Please contact the Customer Satisfaction Manager, Allianz Insurance plc, 57 Ladymead, Guildford, Surrey, GU1 1DB.

Personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with all principles of English law.

By applying for and/or entering into this insurance **Policy** you will be deemed to specifically consent to the use of your data and your insurance **Policy** data in this way and for these purposes and that your directors, officers, partners, and employees have consented to our using their details in this way.

www.hettleandrews.co.uk

Hettle Andrews, Eleven Brindleyplace, 2 Brunswick Square, Brindleyplace, Birmingham B1 2LP.
Hettle Andrews & Associates are regulated and authorised by the Financial Conduct Authority 305520.

www.allianz.co.uk

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