Income Protection Cover

Policy wording

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Policy Wording Income Protection Cover

Thank you for choosing the Income Protection Cover administered by Union Income Benefit Holdings Ltd and underwritten by Advent Insurance PCC Ltd - UIB Cell.

This is an income protection policy which is designed to cover You if You are unable to work due to accident or sickness.

This policy wording explains the benefits, terms and exclusions of Income Protection Cover insurance and shows that provided You are eligible and have paid the monthly insurance premium You are covered.

Please read this policy wording and Your schedule carefully and make sure You are eligible (please see Section 4 Eligibility), that the policy meets Your needs, and that You know what the policy does and does not cover. The cover You have selected is shown in Your schedule.

Income Protection Cover is designed to meet the needs of someone who would benefit from monthly cash pay out to replace lost wages if You can't work through accident or sickness.

Your proposal and any endorsements, statement of fact, certificate of insurance and any written or verbal statements of medical or other information You have made, are part of this insurance contract.

Section 1: Definitions

In this policy, the following words and phrases have the meaning given next to them. These words and phrases will start with capital letters wherever they appear.

Active Employment

Carrying out the usual activities of working in Your Employment.

Administrator

Union Income Benefit Holdings Ltd (Union Income Benefit or UIB) who sell and administer the insurance on behalf of the insurer.

CBRN terrorism

An unlawful act committed for political, religious or ideological purposes with the aim of influencing a government and/or causing fear among the public that results directly or indirectly in the release of chemical, radiological, biological or nuclear agents.

Chronic Condition

A sickness, disease or injury which has at least one of the following characteristics:

- · it continues indefinitely;
- it is constant and is controlled rather than cured;
- it has symptoms which recur and have required consultation, treatment or care in the past; or
- it requires long-term monitoring or treatment, consultations, check-ups, examinations or tests.

Contract Worker

Employed on a contract for a specific term or undertaking for at least 12 months duration.

Disability

- Any accident or sickness which happens after the Start Date which stops You from working in your Employment and is certified by a Doctor.
- Any complication of pregnancy which is diagnosed by a Doctor or consultant who specialises in obstetrics which happens after the Start Date which stops You from working in your Employment and is certified by a Doctor.

We will not classify as Disability, Normal Pregnancy (including multiple pregnancy) or childbirth, including delivery by Caesarean section or any other medically or surgically assisted delivery which does not cause medical complications.

Doctor

A medical practitioner who is registered with the General Medical Council in the UK, and is not You, Your spouse, Your partner or a relative.

Employed/Employment/Work

Permanent paid employment, including Self-Employment, of at least 16 hours per week.

Gross Monthly Income

- If You are an employee, Your average monthly gross taxable earnings for the 12 months immediately preceding the Start Date, the date of any subsequent increase in Monthly Benefit, or the start date of a claim.
- If You are Self-Employed, the monthly average of the annual income You declared to HM Revenue & Customs on Your self-assessment return for the tax year preceding the Start Date, the date of any subsequent increase in Monthly Benefit, or the start date of a claim.

If You have been working for less than 12 months on the Start Date the average will be based on the number of months You have worked.

Immediate Family

Your spouse, civil partner, live in partner, children and parents.

Insurer, Our, Us, We

Advent Insurance PCC Ltd - UIB Cell.

Maximum Monthly Benefits

The total number of 12 Monthly Benefits paid in respect of one claim.

Month

Any 30 day period.

Monthly Benefit/Benefit

The amount shown on Your schedule, up to 50% of Your Gross Monthly Income or £1500, whichever is the lesser.

Normal Pregnancy

Symptoms, or a combination of minor symptoms, which usually accompany pregnancy and which are generally of a minor and/or temporary nature which do not represent a medical hazard to mother or baby.

Pandemic

An outbreak of a pandemic disease, declared by the World Health Organization and characterized as phase 4 or higher of the World Health Organization Pandemic Influenza Phases (2009).

Policy schedule

the document that forms part of your policy; it includes important information that is specific to your insurance.

Self-Employed/Self-Employment

Carrying on a business in the United Kingdom alone or as a partner in a partnership, controlling a company either alone or with others, or working for a company in which a person who is a member of Your Immediate Family has control (either alone or with others) over the company.

Start Date

00.01a.m. on the date this policy commences as shown on Your schedule.

Temporary Work

Employment for an indefinite period which is not intended to be permanent. Employment of this nature via an employment agency is considered to be Temporary Work.

UIB

Union Income Benefit Holdings Ltd.

Waiting Period

The minimum number of consecutive days of Disability, Unemployment or being a Carer, which You have to wait before Your entitlement to Benefit commences as shown in Your schedule.

You, Your, Insured Person

The insured person named on Your schedule.

Section 2: Levels of cover

There is one level of cover:

• Disability cover. (See Section 5)

There are five Waiting Period options

Waiting Period	First Monthly Benefit payable	Maximum payable for one claim
30 days	61st day	12 Monthly Benefits
60 days	91st day	12 Monthly Benefits
90 days	121st day	12 Monthly Benefits
120 days	151st day	12 Monthly Benefits
180 days	211th day	12 Monthly Benefits

Section 3: The insurance contract

This policy is a legal contract between You and Us. The policy, Your schedule and any endorsements make one document and You should read them together.

We will provide the cover set out in this policy, provided You pay the premium and meet all the conditions.

You and we are free to choose the law applicable to the policy. We have chosen to apply the laws of England and Wales. The language used in this policy and any communications relating to it will be in English.

The insurer is Advent Insurance PCC Ltd - UIB Cell. The policy is issued and administered on behalf of Advent Insurance PCC Ltd - UIB Cell by Union Income Benefit Holdings Ltd. Registered in England and Wales No. 03877610 Registered Office 4th Floor, 7/10 Chandos Street, London W1G 9DQ. Union Income Benefit Holdings Ltd. is authorised and regulated by the Financial Conduct Authority (FCA). FCA Register No. 307575. You can check this information on the Financial Services Register by visiting the website www.fca.org.uk/register

This policy is issued for an initial period of one month from the Start Date and will automatically continue on payment of each month's premium as it falls due until cover under Your policy terminates or is cancelled, as described in Section 6.

Section 4: Eligibility

You are eligible for this policy provided that on the Start Date of the policy You:

- are aged 18 or over and under 61;
- are living and working permanently in the United Kingdom;
- · are in Employment;

Section 5: Disability cover

What's covered

If Your schedule shows You have selected a 30 days Waiting Period

If You cannot Work for at least 30 days in a row because of Disability, an amount equal to 1/30th of the Monthly Benefit will become payable for each further day of Your Disability starting from the 31st day.

If Your schedule shows You have selected a 60 days Waiting Period

If You cannot Work for at least 60 days in a row because of Disability, an amount equal to 1/30th of the Monthly Benefit will become payable for each further day of Your Disability starting from the 61st day.

If Your schedule shows You have selected a 90 days Waiting Period

If You cannot Work for at least 90 days in a row because of Disability, an amount equal to 1/30th of the Monthly Benefit will become payable for each further day of Your Disability starting from the 91st day.

If Your schedule shows You have selected a 120 days Waiting Period

If You cannot Work for at least 120 days in a row because of Disability, an amount equal to 1/30th of the Monthly Benefit will become payable for each further day of Your Disability starting from the 121st day.

If Your schedule shows You have selected a 180 days Waiting Period

If You cannot Work for at least 180 days in a row because of Disability, an amount equal to 1/30th of the Monthly Benefit will become payable for each further day of Your Disability starting from the 181st day.

Benefit will be paid until:

- · You return to Active Employment;
- · We have paid the Maximum Monthly Benefits; or
- cover ends as described in Section 6; whichever happens first.

Benefit will be paid on a monthly basis if You have been off Work for a full Month. If You return to Work before a full Month has passed, We will pay You an amount equal to 1/30th of the Monthly Benefit for each day You have been off Work up until the day You return to Work.

For example

Customer A selected a 60 days waiting period with

a monthly benefit of £500, and was unable to work for 105 days due to sickness. The first 60 days are not covered. They would receive benefits for the remaining 45 days, totalling £750.

If there are less than three consecutive months of Active Employment between two periods of Disability, We will classify those two periods as one continuous period of Disability and pay up to an aggregate of the Maximum Monthly Benefits in total. We will not pay Benefit for the time You were working between the two periods. Only one Waiting Period will be applied.

For example

Customer B has received three monthly benefits and returned to work, but within three months they are unable to work again due to disability, either the same cause or a new one. This is treated as a continuation of the previous claim. They will not have to go through the waiting period before benefits become payable again. As they have already received three monthly benefits for the earlier period, the maximum payable for the second period will be nine monthly benefits.

After the Maximum Monthly Benefits have been paid for any period of Disability, further claims for Disability will only be considered under the following circumstances:

- If the reason for claiming is as a result of the same cause, there must have first been six months Active Employment.
- If the reason for claiming is as a result of a new cause, there must have first been one months Active Employment.

If You qualify for a Disability claim but continue to receive an income from Your Employment, the Monthly Benefit will be reduced so that the total of gross income received from Your Employment and the Benefits payable, does not exceed 50% of Your Gross Monthly Income.

Exclusions

This policy does not cover any period of Disability:

- i) which occurred before the Start Date;
- ii) resulting from any Chronic Condition from which You knowingly suffered on or before the Start Date;
- iii) as a result of any medical condition for which treatment had been given or diagnosis had been made or investigations commenced during the 12 months immediately before the Start Date and which comes back within 24 months after the Start Date. (This exclusion will not be applied after 24 months have passed without treatment or advice for that medical condition.);
- iv) resulting from spinal and related conditions unless there is radiological medical evidence of abnormality confirmed by a Doctor;
- v) resulting from stress, anxiety and depression, unless diagnosed by a member of the Royal College of Psychiatrists;
- vi) which is a result of intentional self-inflicted injuries;
- vii) which is a result of the inappropriate use of alcohol or drugs, including but not limited to the following:
- · Consuming too much alcohol.
- Taking an overdose of drugs, whether lawfully prescribed or otherwise.
- Taking Controlled Drugs (as defined by the Misuse of Drugs Act 1971) otherwise than in accordance with a lawful prescription.;
- viii) as a result of You being detained in prison under the direction of a court of law. (This will not apply if You are later acquitted.); or
- ix) arising from a Pandemic, war (whether declared or not), military duty in peacekeeping operations outside the United Kingdom, invasion, riot as an active participant, revolution or any similar event.
- x) as a result of CBRN terrorism
- xi) arising from ionising radiation or contamination by biological or chemical agents or radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel or the radioactive, toxic, explosive or other dangerous properties of any nuclear assembly or nuclear component machinery thereof.

For the purposes of exclusions ii) and iii) above, if You:

- for the 6 continuous months immediately before the Start Date:
- held a policy with another insurer providing Disability cover, that was replaced by this policy; and
- under which You had not made a claim in the 24 months before the Start Date.

Start Date shall then mean the date Your previous policy commenced. This will only apply in respect of the corresponding amount of Monthly Benefit provided by Your previous policy. In the event of a claim You will need to provide Us with a copy of Your previous policy and proof of premium payment that show Your policy was up to date at the Start Date of this insurance.

Section 6: Premium and termination of insurance

Premiums

a. Premiums are payable monthly and collected by the administrator by direct debit.

b. We or the administrator can change the premium by giving you 14 days' notice. If there are any changes to the current level of Insurance Premium Tax (IPT) or any new charges are placed on us or the administrator, we will change your premium from the date any changes are put in place.

Cooling-off period

(i) Cancelling in the cooling-off period

We hope that You will be happy with Your insurance policy. However, if this policy does not meet Your needs You have 30 days from the Start Date of your policy or the date You received Your policy documents (for a new policy) to cancel the policy and get a refund of any premium paid within that 30 days period. (We will not give You a refund if You have made a claim or an incident has happened where You could make that claim.)

(ii) Cancelling outside the cooling-off period

You may cancel this policy at any time outside the cooling off period by notifying the Administrator.

(iii) Notifying Your cancellation

You should notify Your cancellation to the Administrator:

Telephone: 0343 178 1255 Email: customercare@uibuk.com Address:

Customer Services Union Income Benefit 39/51 Highgate Road London

NW5 1RT

Lines open Mon to Fri 9 a.m. to 6 p.m

- (iv) Your cover and entitlement to the Benefit will end automatically as soon as one of the following occurs:
- You retire from Employment;
- You reach the age of 65; or
- You die.
- (v) You may cancel this policy by notifying UIB:
- by telephone on 0343 178 1226 (Mon to Fri 9am 6pm)
- · by email to customercare@uibuk.com
- by writing to UIB Customer Services,
 39-51, Highgate Road, London, NW5 1RT.
- (vi) Your cover will end automatically if You do not pay Your premium on the date it is due.
- (vii) In the event of fraud, We may cancel Your policy immediately and no refund of premiums will be given.
- (viii) We may cancel this policy by UIB giving You 90 days' notice in writing to the contact details that we hold for you. If We do, any premium You have paid for the period after the cancellation date will be refunded. It may become necessary for Us to cancel Your policy due to:
- You failing to provide any material information that We ask for in Your application for this policy or in relation to any claim,
- any actual or predicted legal or regulatory requirement,
- an actual or projected unforeseen increase in claims under all policies of the same type issued by Us, or

 an unforeseen event that prevents Us from continuing to provide, or the Administrator continuing to administer, Your policy.

If the policy is cancelled due to (i) above, no claim payments will be made after the date of cancellation.

If the policy is cancelled due to (v), (vi) or (viii) above, claim payments will be made for any valid claim which occurs before the cancellation date.

Section 7: Changes

How We can change Your Policy

We will periodically review premium rates and policy terms and have the right to amend them to reflect:

- the actual or projected increases or reductions in the claims experience from all of the policies of the same type issued by Us,
- changes in the general law or to the decisions of the Financial Ombudsman Service, or
- to meet regulatory requirements or to reflect new industry guidance and codes of practice which are there to raise standards of consumer protection.

We will give You notice of any changes that We have to make by UIB giving You at least 60 days written notice to the contact details that we hold for you.

If We make any alterations and You are unhappy with those changes, You can cancel Your policy as set out in Cancellation of Your insurance (ii) above.

How You can change Your Monthly Benefit or Waiting Period

The Monthly Benefit or Waiting Period may be amended by contacting UIB on 0343 178 1226 (Mon to Fri 9am - 6pm). The change will take effect from the next premium collection date provided that You are not receiving Monthly Benefit under the policy or You are aware of any impending claim. If you are currently receiving Monthly Benefit under the policy or you are aware of any impending claim then We are unable to amend the Monthly Benefit or Waiting Period on your policy.

What We will not cover following an increase in Monthly Benefits

The following additional exclusions will apply to the increase in Monthly Benefit:

We will not pay the increase in Monthly Benefit for any claim caused by or resulting from any medical condition:

- which You knew about on or before the date You applied for the increase; or
- for which treatment had been given or diagnosis had been made or investigations commenced during the 12 months immediately before the date You applied for the increase and which comes back within 24 months after the date You applied for the increase. (This exclusion will not be applied after 24 months have passed without treatment or advice for that medical condition.);

Telling Us about changes in Your circumstances

Please tell UIB if any of Your circumstances change which may affect Your insurance.

Examples of some changes You should tell UIB about are:

- If Your Employment status changes
- · If You change address

Please note that this is not a complete list. If You are not sure whether You need to tell UIB about a change in circumstances, tell UIB anyway.

Section 8: How to make a claim

If You need to make a claim please contact the Administrator Claims Team:

Telephone: 0800 014 7024 Email: claims@uibuk.com

Address:

UIB Claims Team 39/51 Highgate Road London NW5 1RT

For your protection calls may be recorded and may be monitored. We will take the details of Your claim and advise You of the next steps. Please have Your policy number and bank details available when You call.

For a Disability claim Your Doctor will need to provide details. The start date of Your claim will be the date Your Doctor has certified You as unfit for Work.

- When making a claim any proof required must be provided at Your expense.
- We reserve the right to make any enquiries relating to Your claim, contact Your employers or ask You to undergo an independent medical examination at Our expense.
- All claim payments will be made to Your bank account.
- In some circumstances, the amount of Monthly Benefit You receive under this policy may affect Your entitlement to State benefit.
- Benefits are subject to UK tax legislation that applies at the time of any claim. It is Your responsibility to declare any payments for the purposes of income tax, if legislation requires.

Should You make any claim which is false or fraudulent in any respect, You will forfeit all rights under this policy, which will be cancelled from the start date of the claim. Any monies paid to You will be recovered and no refund of premium will be made.

Over Insurance

We may ask You to provide the following:

- If you are an employee salary slips or a P60 tax document.
- If you are Self-Employed bank statements or Your accounts.

In order to confirm your Monthly Benefit does not exceed 50% of Your Gross Monthly Income. In the event Your Monthly Benefit does exceed 50% of Your Gross Monthly Income, the Benefit payable will be reduced proportionately. You will receive a proportionate refund of premium.

Other Insurances

We may ask You to provide details of other income, repayment or payment protection insurance policies under which You may also be claiming disability, unemployment or carer benefits. In these circumstances the Monthly Benefit will be reduced so that the total benefits paid, under all such insurances do not exceed 50% of Your Gross Monthly Income. You will receive a proportionate refund of premium.

Section 9: Customer service

We and the Administrator always try to provide a first-class standard of service. However, sometimes things can go wrong. If You have a complaint You should contact the Administrator who arranged this insurance for you;

- by email: customerrelations@uibuk.com
- by phone on: 0343 178 1255
- in writing to: UIB Customer Relations, 39/51 Highgate Road, London, NW5 1RT

If they cannot resolve the complaint to Your satisfaction, You can contact:

Financial Ombudsman Service, Insurance Division, Exchange Tower, London E14 9SR. Phone: 0800 0234567 or fax: 020 7964 1001. Email: complaint.info@financial-ombudsman.org.uk

FOS is an independent organisation that arbitrates on complaints about general insurance products.

It will consider complaints after the firm has given You written confirmation that they have been through their full complaints procedure. You have six months from the date of the firm's final response in which to refer your complaint to the FOS.

For Claims and Policy Terms Complaints You can, alternatively, refer the matter to the Office of the Arbiter for Financial Services (OAFS), First Floor, St Calcedonius Square, Floriana FRN 1530 Malta. Phone: (+356) 21249245 (standard overseas call charges apply). Email: complaint.info@financialarbiter.org.mt

Making a complaint to FOS or the OAFS does not effect Your right to take legal proceedings. We and the Administrator are bound by a FOS or OAFS decision but You are not.

If You bought Your policy online You can use the Online Dispute Resolution platform to submit Your complaint to FOS or OAFS http://ec.europa.eu/consumers/odr/

Section 10: Financial Services Compensation Scheme (FSCS)

Financial Services Compensation Scheme (FSCS) In the unlikely event we are unable to meet our liabilities, you may be entitled to compensation under the Financial Services Compensation Scheme. Further information can be obtained from the Financial Services Compensation Scheme by visiting their website at www.fscs.org.uk, by contacting them via email on enquiries@fscs.org.uk in writing to 10th Floor Beaufort House 15 St Botolph Street London EC3A 7QU or by telephone 0800 678 1100 or 020 7741 4100

Section 11: Data protection notice

The Personal Information You provide. Advent Insurance PCC Ltd (UIB Cell) and Union Income Benefit Holdings Ltd, the Administrator, are the joint data controllers (as defined in the Data Protection Act 2018 (DPA)) and fully accept the responsibility of protecting the privacy of customers and the confidentiality and security of personal information provided to either party. In this notice, Personal Information is personal data (as defined in the DPA) and means any information that identifies an individual and includes any sensitive personal information (e.g. information about health or medical condition(s)).

Where this notice refers to You or Your Personal Information, this will include any information that identifies another person whose information You have provided to Us or the Administrator. We and the Administrator will assume that they have appointed You to act for them). You agree to receive on their behalf any data protection notices from Us or the Administrator.

Your Personal Information will be used for the purpose of providing insurance services. By providing Personal Information, You consent that Your Personal Information, will be used by Us, the Administrator, Our reinsurers, service providers/ business partners, and Our agents for administration, customer service, claims handling, assistance services, customer profiling, and for management and audit of Our business operations. We or the Administrator may also pass Your Personal Information to other insurers and regulatory and law enforcement bodies for the prevention of fraud, financial crime or where the law requires Us or the Administrator to do so.

We or the Administrator may transfer Your Personal Information to countries outside the EEA which may not have the same level of data protection as in the United Kingdom and Malta, but if this is necessary it will be ensured that appropriate safeguards are in place to protect

Your Personal Information. If You ask Us or the Administrator, what Personal Information is held about You it will be provided to You in accordance with applicable law. No fee will be charged for this. Any Personal Information which is found to be incorrect will be corrected promptly. You have the right to withdraw Your consent to Us or the Administrator processing any of Your Personal Information at any time, if it is not specifically required for Us or the Administrator to provide and administer the product or service that You have purchased or registered for. We and the Administrator may monitor and/or record Your communication with Us or the Administrator. either ourselves or using reputable organisations selected by Us, to ensure consistent servicing levels and account operation. We or the Administrator will keep information about You only for so long as it is appropriate.

You have the right to withdraw Your consent to Us or the Administrator processing any of Your Personal Information at any time, if it is not specifically required for Us or the Administrator to provide and administer the product or service that You have purchased or registered for.

We and the Administrator may monitor and/ or record Your communication with Us or the Administrator, either ourselves or using reputable organisations selected by Us, to ensure consistent servicing levels and account operation. We or the Administrator will keep information about You only for so long as it is appropriate. We will not use Your personal details in order to provide You with marketing unless You have given your explicit consent to allow Us to use this information for these purposes. If you wish to unsubscribe from Our marketing communications please contact Us on the details below quoting your name, address, telephone number and email address.

We have a dedicated Data Protection Officer who You can contact for any queries relating to this policy, to exercise any of Your rights under data protection regulations including: data subject access requests, correcting Your information, making a

complaint. If You believe We are holding inaccurate information about You or wish to request a copy of Your information. You should contact Us.

Contact Details:

Data Protection Officer:
By email: dataprotection@embignell.com
By post: Data Protection Team
Union Income Benefit
39/51 Highgate Road
Kentish Town
London NW5 1RT

We will provide the information that You have requested in a suitable format to meet Your requirements. If the Administrator cannot resolve the complaint to Your satisfaction, You can contact the Information Commissioner's Office who are the Supervisory Authority in the UK protecting the rights of individuals under current Data Protection regulations

Website:

www.ico.org.uk

By telephone: 0303 123 1113

12. Other important information

Advent Insurance PCC Ltd – UIB Cell is the insurer on this policy. Advent Insurance PCC Ltd (C52394) is a Protected Cell Company authorised and regulated by the Malta Financial Services Authority to provide general insurance. This can be checked on the MFSA web site www.mfsa.com.mt The cellular assets of the Advent Insurance PCC Ltd - UIB Cell are utilised to satisfy the cellular liabilities of the UIB Cell.

Union Income Benefit Holdings Ltd acts an agent of the insurer for sales, administration, claims management and complaints. Union Income Benefit Holdings Ltd are authorised and regulated by the Financial Conduct Authority. This can be checked on the FCA's register by visiting the FCA's website at www.fca.org.uk.

Contact Us

Telephone calls may be recorded for monitoring and quality purposes. Lines open Mon to Fri 9 a.m. to 6 p.m.

Customer Services

Telephone: 0343 178 1255

Email: customercare@uibuk.com

Address:

Customer Services Union Income Benefit 39/51 Highgate Road

London NW5 1RT

Claims

Telephone: 0800 014 7024

Email: claims@uibuk.com

Address:

Claims Department Union Income Benefit 39/51 Highgate Road

London NW5 1RT