

Income Protection Options



Policy Conditions

Introduction

These **policy conditions** are written confirmation of your contract with Aviva Life & Pensions UK Limited. It is important that you read them carefully together with your **policy schedule** and then keep both documents in a safe place.

If you have any questions, you can call us on 0800 285 1098 (from outside of the UK, please call +44 (0) 1603 603 479).

The words shown in **bold** type may be defined terms; we explain these in the "Definitions" section.

Your cover

In order for cover to be maintained, you need to pay your premiums. Your premiums are guaranteed, so they'll stay the same throughout the **policy term** unless you change your policy or you have taken out the increasing cover option.

Your benefits

The **benefits** available under this policy are set out below, and are only payable if we accept a claim.

Benefits	What we pay / limits
<p>Full benefit</p> <p>We will pay this if:</p> <ul style="list-style-type: none"> immediately before incapacity, the life covered was in an occupation; and after the start of incapacity, the life covered is not in any other occupation; and the deferred period has ended. 	<p>The benefit amount, subject to the maximum yearly amount payable.</p> <p>For more information, please read the 'Benefit limit' section.</p>
<p>Restricted benefit</p> <p>We'll pay this if, immediately before incapacity, the life covered was not working and, after the start of incapacity, the life covered is not following an occupation and the deferred period has ended.</p>	<p>We'll pay the benefit amount for a maximum of 12 months, and then the policy will end.</p>
<p>Back to work benefit</p> <p>We'll pay this if, immediately before incapacity, the life covered was in an occupation and following incapacity their earnings are reduced because they:</p> <ul style="list-style-type: none"> are in a different occupation because of continued incapacity; or return to their occupation but the illness or accidental injury that caused incapacity restricts the scope of their duties or the number of hours that they are able to work. 	<p>We'll pay a percentage of the benefit amount. To calculate the percentage, we'll work out the percentage reduction in the life covered's earnings. When doing this, we'll take any increase in the Retail Prices Index between the start of incapacity and the date when back to work benefit becomes payable into account.</p> <p>We won't reduce the amount we pay if the life covered's earnings increase as long as the increase isn't more than the change in the Retail Prices Index.</p> <p>If the illness or accidental injury that caused incapacity restricts the scope of the life covered's duties, their illness or accidental injury must:</p> <ul style="list-style-type: none"> last at least seven consecutive days; and restrict the scope of their duties for the remainder of the deferred period.

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<p>Hospital benefit</p> <p>We'll pay this for each night the life covered is hospitalised due to incapacity during the deferred period. We start paying it after the seventh consecutive night, provided the life covered has spent at least seven consecutive nights as a patient in hospital.</p>	<p>£75 a night for a maximum of 90 nights.</p>
<p>Death benefit</p> <p>We'll pay this if:</p> <ul style="list-style-type: none"> the life covered dies due to the illness or accidental injury we're paying benefit for; and death occurs within 12 months of the first monthly benefit being due. 	<p>A single payment of 12 times the last monthly payment we made, less the amount we've already paid.</p>
<p>Retirement benefit</p> <p>We'll pay this if:</p> <ul style="list-style-type: none"> we have paid full benefit, restricted benefit or back to work benefit for at least 12 consecutive months; and we stop paying benefit because the policy has reached the policy end date. 	<p>A single payment of three times the last monthly payment we made.</p>
<p>Waiver of premium</p> <p>If we accept your claim, we'll pay your premiums after the deferred period ends.</p>	<p>You need to pay your premiums until we accept your claim and your deferred period ends. If your premium was due before your deferred period ended, you'll still need to pay it. After that we'll pay your premiums for you.</p>

Benefit limit

The maximum amount we'll pay each year is 55% of the **life covered's earnings**. For the increasing cover option, this may increase on each **anniversary date** after we've started making payments to you.

If the **life covered** is entitled to income from other sources we'll deduct it from the maximum yearly amount we pay. If any of this income is taxable, we'll reduce the gross amount by 20%.

Income from other sources includes:

- continuing income from a business, including dividends
- continuing income from an employer, including benefits in kind and sick pay
- income from a pension which is first paid after **incapacity**
- any income received because of the **life covered's** illness or accidental injury (not including state benefit)
- regular income or benefits from other insurance policies (whether held with us or not) which exceeds £50 per month, including:
 - credit card protection
 - loan protection
 - income protection/permanent health insurance
 - mortgage payment protection
 - pension premium protection.

If we reduce the **benefit** because it exceeds the maximum yearly amount, we won't refund any premiums.

When payment of benefit starts

We'll pay full benefit, restricted benefit or back to work benefit after the **deferred period** has ended.

We'll pay monthly in arrears. If the **life covered's incapacity** ends part way through a month, we'll pay a daily **benefit amount** for that period of **incapacity**.

When payment of benefit stops

We'll stop paying full benefit, restricted benefit or back to work benefit when:

- the **incapacity** ends or, in the case of back to work benefit, the **life covered** no longer satisfies the requirements for payment of **benefit**; or
- the policy reaches the **policy end date**; or
- the **limited payment term** ends; or
- we've paid restricted benefit for a total maximum of 12 months; or
- the **life covered** is remanded in custody (we'll pay the **benefit** retrospectively if the **life covered** is not convicted of the offence) or receives a custodial sentence; or
- the **life covered** reaches their planned retirement age; or
- the **life covered** dies.

Other requirements for the payment of benefits

We'll only pay **benefit** if we accept a claim and the **life covered** is under the regular supervision and treatment of a **medical practitioner**. If the **incapacity** is in relation to drug or alcohol addiction, the **life covered** must also be following an agreed rehabilitation treatment plan/programme prescribed by a **medical practitioner**.

Recurring incapacity

Linked claims

We won't re-apply the **deferred period** if we've paid **benefit** and the **life covered** suffers from the same cause of **incapacity** within 12 months of the last monthly payment.

Linked periods of incapacity

If you have a **deferred period** of 13 weeks or more, we'll link separate periods of **incapacity** for the purpose of completing the **deferred period** as long as:

- each period of **incapacity** has the same cause; and
- each period of **incapacity** lasts at least seven consecutive days; and
- the **deferred period** is completed within a period of time twice its length (**deferred period** x 2).

Increasing cover option

The increasing cover option can only be selected when you take out your policy. It is subject to our acceptance following underwriting and may increase your premium.

Your **policy schedule** will show whether the increasing cover option is included on your policy.

Increasing cover	What it means for your policy
	<p>You can automatically increase your benefit amount each year without answering any further medical questions.</p> <p>The increase will be based on the percentage increase in the Retail Price Index (RPI) over the 12 month period ending 12 weeks before the month of your policy anniversary date. The maximum increase will be 10%.</p> <p>Your premiums will increase each year. We'll take the current premium and multiply it by a factor of 1.5 and the rate of increase.</p> <p>We base the factor on the rate of increase and your policy term, and we won't change it during your policy term.</p> <p>Your premium won't increase by more than the factor multiplied by the maximum increase in RPI of 10%.</p> <p>If the change in the RPI is 0% or below, your benefit amount – and your premium – will stay the same.</p>
	<p>We'll write to you at least eight weeks before the anniversary date to tell you how much your benefit amount and premiums will increase by.</p> <p>You can choose not to increase your benefit amount if you don't want to pay the higher premium. If you do this, your benefit amount, and your premiums, will stay the same. You must tell us as soon as possible before the anniversary date if you want us to cancel the increase. We'll reinstate the increasing cover option the following year.</p> <p>If we accept a claim, we'll pay the benefit amount.</p>

Additional benefits

Your **policy schedule** will show which additional benefits are included on your policy.

<p>Life change benefit</p> <p>Can be used six months from the start date.</p>	<p>If your circumstances change, you can take out extra cover without answering further medical questions. This additional benefit will only be included if we accepted your policy on standard terms.</p>	
	Life change	Evidence needed
	Marriage or civil partnership.	Marriage or civil partnership certificate.
	Increased mortgage due to a house move or purchase or carrying out home improvements.	Evidence of new mortgage or increase on existing mortgage, or builders' receipts for work carried out.
	Having or adopting a child.	Birth or adoption certificate.
	20% increase in salary due to change of employer or promotion.	Copy of payslips, dated within 90 days of each other.
Divorce, dissolution of civil partnership or separation.	Decree absolute or dissolution order, evidence of new mortgage, mortgage transfer or new separate addresses.	
<p>The limit for each life change event is up to 20% of the original benefit amount. This is subject to a minimum of £100 per month and the maximum yearly amount applicable at the time that extra cover is taken out.</p> <p>You can't take out extra cover if you've been incapacitated during the policy term unless the incapacity:</p> <ul style="list-style-type: none"> ● didn't result in us paying benefit; and ● ended at least three months before you want to take out extra cover. <p>You can use the life change benefit as many times as you like as long as:</p> <ul style="list-style-type: none"> ● you take out the new policy before the life covered turns 55; and ● the new policy ends before the life covered turns 71; and ● you take out the new policy within 90 days of the life change happening; and ● you send us the evidence we need; and ● you are not within five years of the original policy end date. <p>The extra cover will be subject to the following conditions:</p> <ul style="list-style-type: none"> – The new policy can't have a shorter deferred period than the original policy. – The new policy can't end more than five years later than the original policy. – For limited payment term policies, the new policy can't have a longer payment term than the original policy. – We'll cancel any extra cover if your policy ends for any other reason than reaching the policy end date. – The combined total benefit amount, including extra cover, must not be more than the maximum yearly amount. <p>The new policy won't be subject to any minimum premium limits and can't include additional options which weren't included on the original policy. Also, the new policy won't include the life change benefit.</p> <p>The premium you'll pay for any new policy will be based on the rates available at the time of the request and the personal circumstances of the life covered. The policy conditions in force at the time will apply to the new policy.</p> <p>cont'd...</p>		

Sick Pay Solutions – for NHS doctors and surgeons

If the **life covered** is a doctor or surgeon employed by NHS in the UK and registered with the General Medical Council, we'll reduce the **deferred period**, subject to a minimum of 4 weeks. This means we'll start paying **benefit** to cover their NHS earnings when their sick pay from the NHS reduces or stops.

At the date of **incapacity**:

- you must have a single **deferred period** of 26 or 52 weeks or a dual **deferred period** of 26 and 52 weeks; and
- the **life covered's** sick pay entitlement from the NHS must be less than full pay for six months followed by half pay for six months.

Sick Pay Solutions won't cover:

- income the **life covered** receives from private practice; or
- any **benefit** the **life covered** is eligible for under Aviva's Protection Promise.

The maximum yearly amount will apply.

Making changes to your policy

Apart from where stated, you can make certain changes to your policy six months from the **start date**. If you ask to make any changes, they will apply from the date your next premium is due.

If you make any of the following changes, we'll amend your policy without asking you any further medical questions:

Decreasing:

- the **benefit amount** (change available in the first six months)
- the **policy term**

Increasing:

- the **deferred period** (change available in the first six months)

Removing:

- the increasing cover option
- the shortest **deferred period** from a policy with dual **deferred periods** so you wait longer before we pay benefit.

Amending:

- your cover by selecting a dual **deferred period** so the length of time before we pay benefit is increased.

If you remove the increasing cover option, your premium will stay the same for the remainder of the term, unless you make any other changes to your policy. For all other changes, we'll use the premium rates and smoker status available at the time that you took out your original policy, based on the age of the **life covered** at the start of the policy.

After you've made any of the above changes, your premium can't be lower than the minimum premium limit which applies at the time we agree to your request.

These **policy conditions** will continue to apply to your amended policy.

If you make any of the following changes we'll amend your policy. We may need to ask you some further medical questions. Depending on your answers, we may not be able to carry out the change:

Increasing:

- the **policy term**

Decreasing:

- the **deferred period**

Amending:

- your cover by selecting a dual **deferred period** so we pay your benefit sooner

Removing:

- the longest **deferred period** from a policy with dual **deferred periods** so we pay your benefit sooner

Changing:

- the **life covered's occupation**

After you've made any of the above changes, your premium can't be lower than the minimum premium limit which applies at the time we agree to your request.

If you want to change the **life covered's occupation**, we'll use the premium rates and smoker status available at the time you took out your original policy, based on the age of the **life covered** at the start of the policy. For all other changes, we'll use the premium rates and smoker status available when we make the change, based on the current age of the **life covered**.

These **policy conditions** will continue to apply to your amended policy.

If you want to increase the **benefit amount** (change available in the first six months), we'll issue a new policy for the additional benefit amount. We may need to ask you some further medical questions. Depending on your answers, we may not be able to carry out the change:

The minimum increase you can make is £100 per month. The total monthly **benefit amount** will be subject to the maximum yearly amount which applies when we agree to your request.

If we increase the benefit amount, we'll use the premium rates and smoker status available when we issue the new policy, based on the current age of the **life covered**. The new policy won't be subject to any minimum premium limits.

The **policy conditions** in force at the time will apply to the new policy.

Making a claim

If you need to make a claim, please contact us on 0800 158 3105. Lines are open Mon to Fri 8.30am – 5.00pm.

You need to tell us you want to make a claim before the:

- period of **incapacity** has lasted two months; or
- **deferred period** ends if it's shorter than two months.

If you or the **life covered** don't tell us within these time limits, we may postpone or refuse a claim. This is because we may not be able to confirm the **incapacity**.

Before we can pay a claim, we need to assess it. To do this, we'll ask for some important information, consents and documents. Apart from any medical evidence we ask for, you'll have to pay for the information.

The kind of things we need may include, but aren't limited to, the following:

- A claim form signed by you and the **life covered**.
- Proof that the **life covered** is ill or has been accidentally injured.
- Proof of who legally owns the policy.
- Written consent that lets us:
 - access the medical records or reports of the **life covered**
 - receive the results of any medical examinations or tests of the **life covered**
 - apply for evidence and information from other third parties.
- Conversations with, and reports from, third parties such as **medical practitioners**, employers and coroners.
- Evidence of earnings:
 - If the **life covered** is employed we need:
 - the last 12 months payslips immediately before **incapacity**; or;
 - the last P60 certificate; and
 - A PAYE coding notice (or replacement) if benefits in kind are covered.

- If the **life covered** is a director, we also need:
 - evidence of their dividends during the 12 months immediately before **incapacity**, as assessed for income tax and declared to/agreed by HMRC; and
 - the profit and loss accounts.
- If the **life covered** is self-employed we need:
 - evidence of personal earnings during the 12 months immediately before **incapacity**, as assessed for income tax and declared to/agreed by HMRC; and
 - the profit and loss accounts which relate to their personal earnings.

We may postpone or refuse a claim if we don't receive the information, consents or documents we need in a reasonable time.

The **life covered** must take whatever steps are necessary to help their recovery, including meeting, and working, with disability counsellors and/or advisers appointed by us.

If we need the **life covered** to undergo any medical examinations or tests, we'll pay for them. We'll also appoint the medical examiner.

When we assess a claim, we rely on the information we're given. If any of the information is untrue or incomplete it could affect whether we pay a claim or not, and may mean we won't pay a claim. Or, if we've already paid a claim it may mean we can reclaim the money. If this happens, we won't make any further payments, and we may also cancel the policy without refunding any premiums.

This doesn't affect any other legal rights we have.

If we accept a claim, we'll make any relevant payment to you in the currency of the UK.

Paying a claim if the life covered is overseas

If you claim whilst the **life covered** is travelling or living in the following countries (but outside of the UK, the Channel Islands, the Isle of Man and Gibraltar), we'll pay the **benefit** for a maximum total of three years:

- Andorra
- Australia
- Canada
- European Union
- The Faroe Islands
- Liechtenstein
- Monaco
- New Zealand
- Norway
- San Marino
- Switzerland
- USA
- The Vatican City

If the **life covered** travels to, or lives in, any part of the world other than the following, we'll pay the **benefit** for a maximum total of six months:

- Andorra
- Australia
- Canada
- Channel Islands
- European Union
- The Faroe Islands
- Gibraltar
- Isle of Man
- Liechtenstein
- Monaco
- New Zealand
- Norway
- San Marino
- Switzerland
- UK
- USA
- The Vatican City

If the **life covered** returns to live in the UK, Channel Islands, Isle of Man or Gibraltar and they are still **incapacitated**, we'll carry on paying the **benefit** to you. We won't backdate any **benefit** we didn't pay when the **life covered** was living outside the UK, Channel Islands, Isle of Man or Gibraltar.

Claiming against a third party

If you're making a claim against a third party who may be responsible for the **incapacity** which resulted in a claim on this policy, you must tell us as soon as possible. For example, a road traffic accident that was not your fault. You must keep us fully informed in writing about the third party claim. You must also take all steps we require when making the claim.

We're entitled to take legal proceedings in your name for any claim on this policy which caused us to pay any **benefits** or costs. We'll make all decisions on the conduct, and settlement, of the proceedings. Or, we'll allow you, your lawyer, or anyone acting on your behalf to conduct these proceedings. In either case, we'll be entitled to recover any **benefit amount** from the money you receive from the third party claim.

When you take out this policy, you consent to us to contacting and instructing anyone dealing with the third party claim on your behalf.

You should tell us immediately if anyone offers to settle your third party claim, or makes a payment into court. You mustn't agree to settle or withdraw the claim without our approval.

If you don't accept the recommendation of the person acting on your behalf to accept a reasonable offer or payment into court as settlement, we may refuse to pay further **benefit**.

We won't be responsible for any claim for any other losses that aren't related to this policy. For these claims you need to take independent legal advice.

Eligibility

You must be at least 18 to apply for this policy and no older than 59 when we accept the application.

You must be a **resident** of the UK, Channel Islands, Isle of Man or Gibraltar, and be employed or self employed, either on a full or part time basis to be eligible for this policy.

Paying your premiums

You must pay your premiums monthly by Direct Debit. All Direct Debits need to come from a current bank or building society account in the UK, Channel Islands, Isle of Man or Gibraltar, in the currency of the UK.

We show the initial premium you'll pay, and the date the initial premium and subsequent premiums are due, in the **policy schedule**. You have 60 days from each due date to pay your premium. If you have to make a claim during this period, we'll deduct the unpaid premium from the **benefit amount** we pay.

If you don't pay your premiums by the due date, or within the 60 day period, we'll cancel your policy. If this happens, you won't be able to make a claim.

What to do if circumstances change

We use the information you give us in your application to determine the cover we can offer and how much you will pay for the policy. If any of the information changes before your policy starts, you must tell us. If, based on the new answer, our original decision would have been different we have the right to change the terms of, or withdraw our offer of cover.

You should review the level of cover if the **life covered**:

- becomes unemployed;
- reduces their working hours or chooses to stop working;
- changes their planned retirement date;
- takes out any other insurance for illness or injury;
- has a change made to continuing income from an employer or business; or
- has a reduction in **earnings**.

If you don't review your cover, we won't backdate any refunds if you choose to reduce your cover at a later date.

What to do if retirement plans change

You must tell us as soon as possible if the **life covered** plans to retire before the **policy end date**. If they are, we may lower the **policy end date** or cancel your policy.

If we lower the **policy end date**, your premium will be lower. If we cancel the policy, we'll give you 30 days' notice.

Changing your details

You need to let us know if your contact details, or those of any **life covered**, change.

Acceptance of instructions

We can't accept any instruction, request or notice from you until we receive all the information we need. We'll tell you what kind of information or documentation we need.

Cancelling your policy

You have a 30 day cooling off period to change your mind. If you cancel within this period, we'll refund any premiums you've paid.

The cooling off period begins on the later of:

- the day we give you the policy **start date**
- the day you receive your policy documents.

You can still cancel the policy after the cooling off period ends, but we won't refund your premiums. If you cancel your policy, you won't be able to make a claim.

General Conditions

Policy amendments

We may alter these **policy conditions** for any of the following reasons:

- To respond, in a proportionate manner, to changes in:
 - the way we administer policies of this type
 - technology or general practice in the life and pensions industry
 - taxation, the law or interpretation of the law, decisions or recommendations of an ombudsman, regulator or similar body, or any code of practice with which we intend to comply.
- To correct errors, if it is fair and reasonable to do so.

If we think any alteration to these **policy conditions** is to your advantage, we'll make it immediately and tell you at a later date. We'll also do this if the alteration is due to regulatory requirements.

If any alteration is to your disadvantage, we'll aim to tell you in writing at least 60 days before we make it. However, external factors beyond our control may mean we have to give you less notice.

If you're not happy with any alteration we make to your policy, you can cancel it.

Incorrect information

If the date of birth of a **life covered** is wrong, we'll base the payment we make for any successful claim on the correct date of birth. We'll tell you if this happens.

If, using the correct date of birth, the age of any **life covered** when you took out your policy would have been outside our limits, we'll cancel your policy. If this happens, we'll tell you. You won't be able to make a claim after we've cancelled your policy. However, we'll refund all your premiums (without interest).

We rely on the information you give us. If any of it is untrue or incomplete and would have affected our decision to provide your policy, we may:

- change the terms of the policy
- change the premiums you have to pay
- cancel your policy and refund the premiums you've paid (without interest).

If we cancel your policy, you won't be able to make a claim.

We may at any time, in line with reasonable underwriting and insurance practice (and retrospectively where appropriate), change your policy terms or cancel your cover without refunding your premiums if you, or the **life covered** has:

- knowingly claimed **benefit** other than provided for in this policy
- misled us, for example telling us incorrect information or not telling us something that we have asked for
- defrauded or attempted to defraud us
- agreed to any attempt by someone else to defraud us

- not acted openly and honestly in dealings with us
- unreasonably refused to comply with these **policy conditions**.

Third party rights

This **policy** does not give any rights to anyone except you and us.

We may, with your agreement, amend or cancel this policy without reference to, or the consent of, any other person.

General

You may not transfer ('assign') the policy to someone else.

The **policy schedule** records the policy's details at the **start date**. Any subsequent changes will be recorded and confirmed to you separately and should be kept in a safe place.

Where appropriate, words in the singular include the plural and vice versa.

Law

This policy is issued in England, under English law.

Braille, large font, audio material

You can order our literature in Braille, large font or audio. Just call us on 0800 285 1098 (+44 (0) 1603 603 479 from outside the UK) or email protection@aviva.co.uk and tell us:

- the format you need
- your name and address
- the name or code of the document (found at the bottom of the back page of most documents). Our Customer Call Centre is open Monday to Friday, 8.30 am to 5.30 pm. Saturday, 8.30am to 5:00pm.

Definitions

Throughout these **policy conditions** we have highlighted defined terms in bold type (except for personal terms like "we" and "you") so you know when they apply. The meanings of these words are set out below.

You or **your** refers to the **policyholder(s)** named in the **policy schedule**, or anyone else who becomes the legal owner of the policy.

We, us or **our** means Aviva Life & Pensions UK Limited.

Anniversary date

The anniversary of the **start date** shown in the **policy schedule**.

Benefit

The benefits described in the "Your benefits" section of these **policy conditions**.

Benefit amount

The amount payable under this policy in the event of a claim which we accept. The **benefit amount** is set out in your **policy schedule** and is subject to the maximum yearly amount payable.

Deferred period

The number of consecutive weeks of **incapacity** which must pass before you become entitled to receive the **benefit**. The **deferred period(s)** is shown in your **policy schedule**.

Duties

The material and substantial duties that are normally required for, and form a significant and integral part of, the performance of the **life covered's occupation** that cannot be reasonably omitted or modified.

Duties do not include:

- Duties which aren't necessary to perform the **occupation** within the trade profession (eg duties that are not necessary with another employer or within another business) or;
- The commute to and from your place(s) of work.

Earnings

The **life covered's** employed salary or their self-employed earnings.

- Employed salary
The **life covered's** earnings, salary or wage (including benefits in kind) before tax from their employment in the 12 months immediately before **incapacity**.
- Benefits in kind
The following benefits in kind to a combined taxable total of up to £10,000 will be accepted as forming part of employed salary:
 - Company car
 - Living accommodation
 - Private medical insurance
- Dividends
If income from the **life covered's** trade or business is received in the form of company dividends or distributions, we'll include this amount as earnings under this policy as long as they are:
 1. paid directly to the **life covered** instead of regular wages or salary in the 12 months immediately before **incapacity**; and
 2. consistent with a level of regular wages or salary that the paying company's trading position reasonably allows on a continuing basis.
- Self-employed earnings
The **life covered's** income from their business before tax, in the 12 months immediately before **incapacity**, less any allowable expenses against income tax. (This means their share of pre-tax profits from their insured **occupation**).

End date

The date shown in the **policy schedule** on which **benefits** under this policy end.

Incapacity

Incapacity means the **life covered** can't perform, on a full or part time basis, the duties of every occupation they're following in the 12 months immediately before **incapacity**, because of illness or accidental injury.

Occupations that formed less than 10 hours of the **life covered's** average working week will be ignored for the purposes of determining **incapacity**.

If, immediately before **incapacity**, the **life covered** wasn't working, **incapacity** means the life covered can't perform, on a full or part-time basis, the duties of the last occupation they followed due to their illness or accidental injury.

Life covered

The person whose life is being covered.

Limited payment term

If selected, **benefit** payments will be restricted to a total maximum of two years for all periods of **incapacity**, whatever their cause. After we've paid the benefit for a total of two years, the policy will end.

Medical practitioner

A medical practitioner on the List of Registered Medical Practitioners with the UK General Medical Council, or in the case of **benefit** paid for temporary overseas residence, the equivalent body in the relevant country.

Occupation

Occupation means work undertaken for profit, pay or reward.

Policy conditions

This document, which forms our contract of insurance with you, providing the cover under the policy as agreed.

The application (that you made and we accepted) and the **policy schedule** also form part of the contract and must be read together with these **policy conditions**.

Policy schedule

This will show the specific detail of your policy, such as who it covers, the **benefit amount**, how much it will cost and any optional benefits and additional benefits included. The definition also includes any subsequent amendments to your policy, which we confirm to you in writing.

Policy term

This relates to the period your policy is in force, from the **start date** until the **end date**.

Resident

At the time you complete the application you must be physically living in the named territory and you:

- are a citizen of that territory or a British Overseas Territory citizen; or
- have been granted permission to settle permanently in the named territory.

Retail Prices Index (RPI)

The monthly index calculated by the government that demonstrates the movement of retail prices in the UK, or an equivalent replacement of that index.

Standard terms

Following an application being underwritten, we may only be able to offer cover with a higher premium than first quoted, with certain **benefits** excluded, or both. This would not be classed as standard terms. We will have told you whether you were accepted on standard terms when confirming our decision on your application.

Start date

The date on which cover under this policy starts. It's shown in the **policy schedule**.