

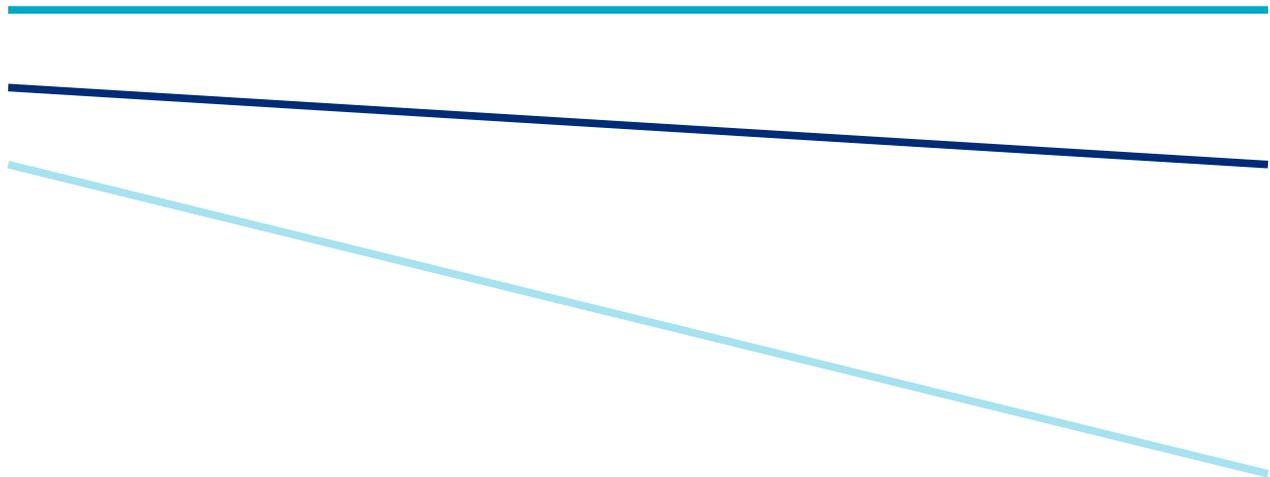


Badminton World Federation

IMPORTANT CONTRACT INFORMATION ENCLOSED

Unique Market Reference / Contract Number: B0509PACEN2250031

This document sets out the full terms and conditions of the contract agreed by the (re)insurer(s). We recommend that you read and store this document carefully and contact us immediately should you have any questions or concerns.



Signing Schedule

A signing schedule, if required, will be prepared by Marsh Limited in accordance with the signing provisions set out in the Security Details section. The signing schedule will detail the full legal name of each (re)insurer and sets out their respective levels of participation in the risk (signed lines) that will prevail over the written lines. The associated signing schedule and invoice will be issued in due course.

Tax Schedule

A schedule of (re)insurance taxes, if required by the terms of the contract herein, must be supplied and agreed prior to issuance of the invoice. Any delay in receiving and agreeing accurate premium and tax allocations per territory could delay payment to (re)insurer(s).

Endorsements

All endorsements to this contract document will be issued by Marsh Limited in a form which sets out all amendments agreed by the (re)insurer(s).

You should read and store any signing schedule, tax schedule and endorsements alongside this contract document.



In the United Kingdom, Marsh Specialty and Bowring Marsh are trading names of Marsh Ltd, which is authorised and regulated by the Financial Conduct Authority for General Insurance Distribution and Credit Broking. Registered Office: 1 Tower Place West, Tower Place, London EC3R 5BU. Registered in England and Wales number 01507274. VAT registration number: GB 244 2517 79.

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RISK DETAILS

**UNIQUE MARKET
REFERENCE:**

B0509PACEN2250031

TYPE:

GROUP Personal Accident AND TRAVEL INSURANCE

INSURED:

Badminton World Federation

**PRINCIPAL
ADDRESS:**Unit No. 1, Level 29
Naza Tower Platinum Park
No. 10, Persiaran KLCC
Kuala Lumpur
50088
Malaysia**PERIOD:**From: 1 July 2022
To: 30 June 2023
Both days at Inclusive Local Standard Time at the Principal Address
of the Insured.**INSURED
PERSONS:****417 Insured Persons, comprising of:**President (1)
Deputy President (1)
Vice Presidents (6)
Council Members (22)
Honorary Life Vice Presidents (8)
Employees of the Assured (45*)
Commissions [Those individuals not covered under other groups]
o Governance & Ethics Technical Commission (1)
o Para Badminton Commission (3)
o Sports Science and Medical Research Commission (6)
o Tournament Doctors Commission (6)
o Technical Officials Commission (4)
o Gender Equity Commission (6)
o Athletes' Commission (5)
o Para Badminton Athletes' Commission (5)
o Working Group Members (4)
Itinerant Coaches – Development (6)
Technical Officials

8249/8106/8106/B0509PACEN2250031



- o Referees (29)
 - o Umpires (84)
 - o Line Judges (97**)
 - o Tournament Doctors (12)
 - o Para Badminton Classifiers (14)
 - o Para Badminton Technical Delegates (3)
 - o Referee Assessment Panel (8)
 - o Umpire Assessment Panel (11)
 - o Semi-Professional Referees (8)
 - o Semi-Professional Umpires (7)
- Panels
- o Vetting Panel (3)
 - o Independent Hearing Panel (7)
 - o Sports Disciplinary Panel (5)
- Spouse/Partners: Included

The actual number of BWF Line Judges is 97, however only 10 are assigned at a time to BWF Major Championships. The travel will depend on the assignments. A maximum of 40 of the 97 will travel in the next 12 month period (1 July 2022 – 30 June 2023). Requirements for the 12 months - BWF World Championships 2022 (10), HSBC BWF World Tour Finals 2022 (10), BWF World Junior Championships 2022 (10), BWF Sudirman Cup 2023 (10)

OPERATIVE TIME: Whilst on business of the Assured, being from point of departure or last business place to commence their assignment for the Assured.

INTEREST: To cover the Insured Person(s) for Personal Accident and Travel benefits, as more fully stated in the attached schedule and as more fully stated in the wording herein.

SUM INSURED: As stated in the attached schedule.

BENEFITS EACH INSURED PERSON As per the Schedule of Benefits attached

AGGREGATE LIMIT: USD 10,000,000 any one accident event

SITUATION: Worldwide.

8249/8106/8106/B0509PACEN2250031

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8106



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CONDITIONS:

As per wording set forth herein.

Personal Accident coverage excludes illness

Accidental coverage limited to USD 12,000 for those under the age of 16.

Temporary Total Disablement coverage not applicable to those under the age of 16.

LMA5391 Coronavirus Exclusion, as attached

Cyber Exclusion LMA5433, as attached

LMA3100 Sanction Limitation and Exclusion Clause, as attached.

Coverage is extended to include limited COVID-19 related medical expenses with the following parameters:

1. Maximum per person USD 50,000 Covid-related medical expenses.
2. The Insured Person must not be travelling against FCO (or equivalent) advice.
3. Covid cover is only in relation to medical expenses (& not trip delay, curtailment, cancellation etc.)
4. Covid related medical expenses only incurred as prescribed by a qualified medical practitioner.
5. We exclude elective medical expenses.
6. We exclude Covid-19 tests.
7. Application of a minimum USD 50 deductible per person.
8. The age limit as per the underlying policy or 65 years, whichever is the lower.
9. No coverage provided in country of residence upon return, regardless of any continuation wording that might be in the underlying policy wording.
10. An additional premium of USD ___ per person, excluding any applicable insurance premium tax.

Where the terms '(Re)Insurer' and/or 'contract period' and/or '(Re)Insured' do not appear in the Risk Details or attached Policy wording the functional equivalents of these terms shall be deemed incorporated herein.

It is hereby understood and agreed by any and all (re)insurers subscribing to this (re)insurance that any subjectivity that has been raised within a quote slip/Market Reform Contract or quote sheet shall be void unless included within this final Market Reform Contract.

8249/8106/8106/B0509PACEN2250031



NOTICES: None.

**CHOICE OF LAW &
JURISDICTION:**

Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed by both the Insured and the Insurers to be subject to the laws of Malaysia

Each party agrees to submit to the jurisdiction of any court of competent jurisdiction within Malaysia and to comply with all requirements necessary to give such court jurisdiction.

All matters arising hereunder shall be determined in accordance with the law and practice of such court.

**PREMIUM
PAYMENT TERMS:**

None.

**TAXES PAYABLE
BY THE INSURED
AND
ADMINISTERED BY
INSURERS:**

None.

**TAXES PAYABLE
BY THE INSURERS
AND
ADMINISTERED BY
INSURED OR THEIR
AGENT:**

None.

**CLAIMS
NOTIFICATION:**

Marsh Limited
Victoria House
Queens Road
Norwich
NR1 3QQ

Email: PACEClaims@Marsh.com

8249/8106/8106/B0509PACEN2250031

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8106



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**RECORDING,
TRANSMITTING
AND STORING
INFORMATION:**

Where Marsh Limited maintains risk and claim data, information or documents, Marsh Limited may hold such data, information or documents electronically.

**INSURER
CONTRACT
DOCUMENTATION:**

This document details the terms, definitions, exclusions and conditions (the contract terms) that constitutes the contract document.

A physical or electronic copy of this document will be provided to the Insured as Evidence of Cover. No further contractual documentation will be issued however Insurers agree that in the event the Insured requires a formal policy to be issued, Marsh Limited may without any further agreement from the Insurers request that:

- a) Insurers provide such a policy; or
- b) Xchanging Ins-sure Services (XIS) provide such a policy and Insurers will accept any additional charge that may be required by XIS.

Language of contract:

By purchasing this insurance, the Insured hereby confirms his request that the present document and any other document and correspondence pertaining to the present insurance be in the English language.

For the purposes of this contract:

- i) Where there is any discrepancy between the headings stated in the Risk Details section herein and the terminology used in any corresponding Wording and/or Endorsements and/or Clauses attached or included herein, the headings stated in the Risk Details section shall read as per such Wording and/or Endorsements and/or Clauses.
- ii) If the words 'Underwriters', 'Company', 'Insurer' or 'Policy' appear herein, or in any Wording and/or Endorsements and/or Clauses attached or included herein, then those words shall mean 'Insurers', ' Insurers', 'Insurers' or 'contract document' respectively.



Where the term Lloyd's is used in this contract or any attaching wording or document, it is agreed that this is extended to include Lloyd's Insurance Company S.A where relevant.

Lloyd's Insurance Company S.A. is a Belgian limited liability company (société anonyme / naamloze vennootschap) with its registered office at Bastion Tower, Marsveldplein 5, 1050 Brussels, Belgium and registered with Banque-Carrefour des Entreprises / Kruispuntbank van Ondernemingen under number 682.594.839 RLE (Brussels). It is an insurance company subject to the supervision of the National Bank of Belgium.

Its Firm Reference Number(s) and other details can be found on www.nbb.be.

Website address: LloydsEurope.com.

E-mail: LloydsEurope.Info@lloyds.com.

Bank details: Citibank Europe plc Belgium Branch, Boulevard General Jacques 263G, Brussels 1050, Belgium - BE46570135225536.



POLICY WORDING

Policyholder:	Badminton World Federation
Policy Number:	B0509PACEN2250031
Insured Persons:	As defined in Risk details

Schedule of Benefits

PERSONAL ACCIDENT SECTION	COVERED / NOT COVERED	SUM INSURED
1. Death	Covered	USD 300,000 Limited to USD 12,000 for under 16
2. Loss of Limb	Covered	USD 300,000
3. Loss of Sight	Covered	USD 300,000
4. Loss of Hearing	Covered	USD 300,000
5. Loss of Speech	Covered	USD 300,000
6. Permanent Total Disablement	Covered	USD 300,000
7. Permanent Partial Disablement	Not Covered	Nil
8. Temporary Total Disablement due to Accident (payable 104 weeks)	Covered	100% weekly wage subject to 30 day Excess. Maximum payment per week USD1,600
9. Temporary Partial Disablement (payable 104 weeks)	Not Covered	Nil
10. Coma Benefit	Not Covered	Nil
11. Funeral Expenses	Not Covered	Nil
12. Hospital Inconvenience Benefit	Not Covered	Nil
13. Medical Expenses following an accident	Covered	up to 20% of benefit payable under items 8 and 9 subject to a maximum of USD20,000
14. Paraplegia	Covered	USD 300,000
15. Quadriplegia	Covered	USD 300,000
Maximum Sum Insured per Person for Death and Capital Benefits		USD 300,000
Maximum Overall Accumulation Limit		USD10,000,000
BUSINESS TRAVEL SECTION		
Medical, Emergency Assistance, Repatriation and Emergency Medical Evacuation	Covered	Up to USD 8,000,000 Dental Treatment: USD 2,500 Optical Treatment: USD 2,500 Additional Incidental Expenses: USD 1,600
Continuing Medical Expenses in the Singapore	Covered	Up to USD20,000
Funeral Expenses outside Singapore	Not Covered	Nil
Hospital Inconvenience Benefit	Covered	USD100 for each 24 hour period; up to a maximum of USD3,000
Search and Rescue	Not Covered	Nil
Kidnap, Ransom and Hostage	Not Covered	Nil
Political and Natural Disaster Evacuation	Covered	USD 250,000 per person

8249/8106/8106/B0509PACEN2250031



		USD 2,000,000 per event USD 10,000,000 in the aggregate
Hijack and Kidnap	Covered	USD500 for each 12 hour period, up to a maximum of USD5,000
Personal Belongings	Covered	Up to USD9,000 Single Item limit: USD2,000 Jewellery & Valuables Limit: USD 1,600 in all Laptop computers and/or Peripherals Limit: USD 2,000 in all iPads: USD 900 Emergency Purchases Limit: USD 700.
Temporary Loss of Personal Belongings	Not Covered	Nil
Business Samples	Not Covered	Nil
Business Equipment	Covered	Up to USD1,500
Loss of Keys	Not Covered	Nil
Money	Covered	Up to USD 6,000 Cash Limit USD 2,000
Fraudulent Use of Credit Card	Not Covered	Nil
Lost or Damaged Passport and/or Visa	Not Covered	Nil
Theft of Passport and/or Visa	Not Covered	Nil
Delayed Departure – Irrecoverable travel / accommodation expenses	Covered	USD10,000
Travel Delay		USD50 for first complete 4 hour delay, and USD50 for each subsequent 4 hour period, up to a maximum of USD500
Cancellation, Curtailment, Change of Itinerary, Replacement Employee	Covered	Up to USD10,000 Pre-booked Arrangement Additional Expenses limit: USD 3,000
Missed Departure	Covered	USD 1,000
Personal Liability	Covered	Up to USD 80,000
Legal Expenses	Covered	Up to USD 80,000
Ski Equipment	Covered	Up to USD 400
Ski Pack	Covered	Up to USD 150
Piste Closure	Covered	USD50 per day for transport to alternative resort of USD50 a day if unable to Ski because of closure of lift systems and tows subject to a maximum payment of USD400.
Avalanche	Covered	Up to USD300





Group Personal Accident, Illness and Business Travel Insurance

The Contract of Insurance

This is Your Group Personal Accident, Illness and Business Travel Insurance Policy ("Policy"), which with the Schedules of Insured Persons and Benefits should be read together and forms the contract of Insurance between You and Us, HDI Global Specialty SE UK Branch, but it is only valid if You have paid the premium.

Your premium has been based upon the information shown in The Schedules and recorded in the written application You have signed and/or declaration You have made. Please read them carefully to make sure that they meet Your requirements and that the details on The Schedules are correct. If after reading Your Policy and Schedules You have any questions, please contact Your insurance adviser.

In return for You having paid the premium for the Period of Insurance, We will indemnify You by payment or, at Our option, by reinstatement or repair, in respect of loss, liability, destruction, damage, accident injury or illness to the extent of and subject to the terms contained in or endorsed on the Policy.

Section 10 of the Insurance Act 2015 does not apply to the premium payment warranty (but will apply as usual to the rest of the Policy). As a result, if You fail exactly to comply with the premium payment warranty, We will irrevocably be discharged from liability from the time of such breach. Accordingly, You cannot avail Yourself of the defence that You have remedied the breach of the premium payment warranty before any loss has occurred

IMPORTANT

It is essential that you provide us with a fair representation of the risks we are accepting when applying for cover. It is also important that you advise your broker, intermediary or Us of any changes which occur during the period of insurance which may alter information previously provided. If you are in doubt as to whether you need to disclose information to us then this should be declared.

This means you may need to make enquiries with all Senior Management to ensure that you have declared all necessary information.

It is Your responsibility to prove any loss therefore we recommend that you keep receipts, photographs and relevant documents to help with any claim you make. This Policy is a legal

8249/8106/8106/B0509PACEN2250031

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8106



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contract. You must tell Us about any facts or changes which affect Your insurance and which have occurred either since the Policy started or since the last renewal date.

If You are not sure whether certain facts are relevant please ask Your adviser. If You do not tell Us about relevant changes, Your Policy may not be valid or the Policy may not cover You fully. You should keep a written record (including copies of letters) of any information You give Us or Your insurance adviser when You renew this Policy.

Choice of Law

The appropriate law as set out below will apply unless You and Us agree otherwise.
This contract will be subject to the law of England and Wales.

You and Us shall submit to the exclusive Jurisdiction of the courts of England and Wales.

This Policy is subject to the Insurance Act 2015 (the "**Act**") and except as expressly varied by the terms of this Policy, nothing herein shall be deemed to be a waiver of the Our rights under the Act.

Who We are

HDI Global Specialty SE, UK Branch

Branch Office: 20 Gracechurch Street, London, EC3V 0BG

Registered Office: Podbielskistraße 396, 30655 Hannover, Germany

Registered in Germany, Registration No. HRB 211924

Authorised and regulated by Bundesanstalt für Finanzdienstleistungsaufsicht. Deemed authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority. Details of the Temporary Permissions Regime, which allows EEA-based firms to operate in the UK for a limited period while seeking full authorisation, are available on the Financial Conduct Authority's website. (FRN: 659331).



Contents – a guide to your Policy

	Page Numbers
The Contract of Insurance	1
Choice of Law	1
Data Protection Notice	4
Our Commitment to You	7
Complaints Procedure	8
Financial Ombudsman Service	8
Financial Services Compensation Scheme	8
Useful Telephone Numbers and Websites	9
Who to contact in the event of a claim	9
Claims Procedures	9
HDI Global Specialty Assistance Services	11
Security Assistance	11
Medical Assistance	11
Policy Definitions	13
Policy Conditions	16
Policy Exceptions	18
Section A Personal Accident	19
Section B Illness	25
Section C Business Travel	26
Medical and Emergency Travel Expenses	27
Search and Rescue Expenses	30
Kidnap and Ransom Hostage	31
Political and Natural Disaster Evacuation	33
Personal Security Specialist Expenses	35

8249/8106/8106/B0509PACEN2250031



Personal Belongings	37
Money	39
Cancellation, Curtailment, Replacement or Change of Itinerary	40
Travel Delay	42
Missed Departure	43
Hijack and Kidnap	44
Personal Liability	45
Legal Expenses	46
NGS AppPlus Application	49



Data Protection Notice

This Data Protection Notice ("Notice") explains how Your data will be collected and dealt with, and Your rights concerning that data. In this Notice, 'We', 'Us' or 'Our' refers to HDI Global Specialty SE and its agents, co-insurers and reinsurers. 'You' or 'Your' refers to the individual whose personal data We are processing.

1. Responsible data controller

HDI Global Specialty SE
Podbielskistraße 396
30659 Hannover
Germany

Tel. +49 511 5604-2909
E-mail: contact@hdi-specialty.com

HDI Global Specialty SE is a Data Controller as defined under the EU General Data Protection Regulation ('GDPR').

You can reach Our Data Protection Officer by post at the aforementioned address (please include the additional address line "Data Protection Officer") or by e-mail via Our data privacy group mailbox:

E-mail: privacy-hqs@hdi-specialty.com

2. Personal data We may collect about You

- 2.1. *Individual details* such as name, address, proof of address, contact details (including emails and telephone numbers), gender, marital status, date and place of birth, nationality, employer, job title, employment history and family details (including their relationship to You).
- 2.2. *Identification numbers* issued by government bodies, agencies or similar such as national insurance, passport, tax identification or driving licence numbers.
- 2.3. *Financial information* such as bank account or payment card details, income or transaction histories.
- 2.4. *Insurance policy information* including information about quotes You receive and policies You take out.
- 2.5. *Credit and anti-fraud data* including credit history, credit score, sanctions and criminal offences, and information received from various anti-fraud databases relating to You.
- 2.6. *Information about previous and current claims* (including in connection with other related or unrelated insurance) which may include data about Your health, criminal convictions, or special categories of personal data and, in some cases, surveillance reports.
- 2.7. *Technical information* including Your computer's IP address.
- 2.8. *Special categories of personal data* which have additional protection under the GDPR, namely health, criminal convictions, racial or ethnic origin, political opinions,

8249/8106/8106/B0509PACEN2250031



religious or philosophical beliefs, trade union membership, genetic data, biometric, or data concerning sex life or sexual orientation.

3. Where We may collect Your personal data from

We may collect Your personal data from various sources:

- 3.1. You (including, from time to time, recordings of Your telephone calls with Us)
- 3.2. Your family members, employer or agent/representative (including Your broker)
- 3.3. Our agents, other insurers, insurance brokers, or reinsurers
- 3.4. Credit reference agencies
- 3.5. Websites or software applications for use on computers or mobile devices and/or social media content, tools and applications
- 3.6. Anti-fraud databases, sanctions lists, court judgments and other databases
- 3.7. Government agencies
- 3.8. Any open electoral register; or
- 3.9. In the event of a claim, third parties including the other party or parties to the claim, witnesses, experts, loss adjusters, solicitors, claims handlers, translators, surveillance agents, engineers and others.

4. Identities of Data Controllers and Data Protection Contacts

The operation of the insurance market means that personal data may be shared between insurance brokers, insurers, reinsurers and other market participants. You can find out the identity of the controller or controllers of Your personal data in the following ways:

- 4.1. If You took out the insurance Yourself, get in touch with the data protection contact at Your insurance broker or the entity You dealt with in taking out the insurance.
- 4.2. If Your employer or another organisation took out the insurance for Your benefit, You should get in touch with the data protection contact at Your employer or the organisation that took out the insurance.
- 4.3. If You are not a policyholder or an insured under the insurance, You should get in touch with the organisation that collected Your personal data.

5. The purposes, categories, legal grounds and recipients of Our processing Your personal data

5.1. Your personal data may be processed for the following purposes:

5.1.1. Quotation/inception:

- Setting You up as a client, including possible fraud, sanctions, credit and anti-money laundering checks
- Evaluating the risks and matching them to appropriate policy terms/premium
- Payment of premium where the insured is an individual

5.1.2. Policy administration

- Client care, including communicating with You and sending You updates
- Payments to and from individuals

8249/8106/8106/B0509PACEN2250031



5.1.3. Claims processing:

- Managing insurance and reinsurance claims
- Defending or prosecuting legal claims or regulatory proceedings
- Investigating or prosecuting fraud

5.1.4. Renewals

- Contacting You/the insured to renew the insurance
- Evaluating the risks and matching them to appropriate policy terms/premium
- Payment of premium where the insured is an individual

5.1.5. Other purposes including:

- Complying with Our regulatory or legal obligations
- Risk modelling
- Effecting reinsurance contracts
- Transferring books of business, company sales, restructuring and reorganisation.

5.2. We may also disclose personal data to the following non-exhaustive list of entities: reinsurers, financial institutions, service providers, contractors, agents, tax authorities, law enforcement and other regulators and group companies in connection with the above purposes. You will find the current list of service providers and Our companies who participate in data-processing operations hereon Our website or by emailing privacy-hqs@hdi-specialty.com.

5.3. We process Your data on one of the following legal grounds:

5.3.1. in order to place and operate the contract(s) of insurance;

5.3.2. where a legitimate interest to do so has been identified for which processing of Your data is necessary and which balances Your interest, rights and freedoms e.g. protecting You from fraud or personalising the insurance product to You; or

5.3.3. where We have a legal obligation to do so e.g. to prevent money laundering.

6. Consent

To provide insurance and deal with insurance claims in certain circumstances We may need to process special categories of Your personal data (see 1.8 above), such as medical or criminal records. Your consent to this processing may be necessary to achieve one or more of the purposes set out above.

Where this is the case, You may withdraw Your consent to such processing at any time by notifying privacy-hqs@hdi-specialty.com. If You do withdraw Your consent, however, this may mean We cannot provide insurance or pay claims.



7. Profiling

When calculating insurance premiums, We may compare Your personal data against other data such as industry averages or fraud patterns. Your personal data may also be used to create such other data to ensure, among other things, that premiums align to risk.

We may make decisions based on profiling and without staff intervention (known as automatic decision making).

8. Storage and retention of Your personal data

Data is held by Us on servers and in printed form, as well as on Our behalf in off-site storage facilities. We will keep Your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, so long as there is any possibility that either You or We may bring or face legal claims in connection with the insurance contract(s), or if there are legal or regulatory reasons to retain Your data, We must do so.

9. International transfer of data

We may need to transfer Your data to third parties outside the European Economic Area. These transfers will be made in compliance with the GDPR.

If You would like further details of how Your personal data would be protected if transferred outside the EEA, please contact privacy-hgs@hdi-specialty.com.

10. Amendment

We may amend this Notice from time to time. We will let You know if We make any significant changes.

11. Your rights

If You have any questions about Our use of Your personal data, please contact the relevant data protection contact as explained above. In certain circumstances You may have the right to require Us to:

- 11.1. Provide You with further details about the use We make of Your personal data
- 11.2. Provide You with a copy of the personal data We hold
- 11.3. Correct any inaccuracies in the personal data We hold
- 11.4. Delete any personal data We no longer have any lawful ground to use
- 11.5. Where the processing requires Your consent, to withdraw that consent so We stop the processing in question
- 11.6. Transfer Your personal data to another organisation
- 11.7. Object to any processing based on the legitimate interests ground at 4.3.2 above unless Our reasons for that processing outweigh any prejudice to Your data protection rights
- 11.8. Object to automated processing, including profiling



11.9. Restrict how We process or use Your personal data in certain circumstances e.g. whilst a complaint is being investigated.

In certain circumstances We may need to restrict the above rights to safeguard the public interest (e.g. prevention or detection of crime) or Our interests (e.g. legal or litigation privilege).

If You are not satisfied with our use of Your personal data or Our response to any request by You to exercise any of Your rights, or if You think We have breached the GDPR, You have the right to complain to the relevant national authority, details below.

<p>Germany (lead supervisory authority) Die Landesbeauftragte für den Datenschutz Niedersachsen Prinzenstraße 5 30159 Hannover Phone: +49 (0511) 120 45 00 Fax: +49 (0511) 120 45 99 E-mail: poststelle@lfd.niedersachsen.de Website: https://www.lfd.niedersachsen.de</p>			
<p>Sweden Datainspektionen Drottninggatan 29 5th Floor Box 8114 104 20 Stockholm Tel. +46 8 657 6100 Fax +46 8 652 8652 e-mail: datainspektionen@datainspektionen.se Website: http://www.datainspektionen.se/</p>			
<p>Italy Garante per la protezione dei dati personali Piazza di Monte Citorio, 121 00186 Roma Tel. +39 06 69677 1 Fax +39 06 69677 785 e-mail: garante@garanteprivacy.it Website: http://www.garanteprivacy.it/</p>			
<p>UK</p>			
England	Scotland	Wales	Northern Ireland
Information Commissioner's Office Wycliffe House Water Lane Wilmslow	Information Commissioner's Office 45 Melville Street Edinburgh EH3 7HL	Information Commissioner's Office 2 nd Floor Churchill House Churchill Way	Information Commissioner's Office 3 rd Floor 14 Cromac Place

8249/8106/8106/B0509PACEN2250031



Cheshire SK9 5AF		Cardiff CF10 2HH	Belfast BT7 2JB
Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate)	Tel: 0131 244 9001	Tel: 029 2067 8400	Tel: 0303 123 1114 (local rate) 028 9027 8757 (national rate)
casework@ico.org.uk	scotland@ico.org.uk	wales@ico.org.uk	ni@ico.org.uk

12. Contact Us

Head Office: Data Protection Officer, Podbielskistraße 396, 30659 Hannover, Germany, Tel. +49 511 5604-2909

UK Branch: Legal & Compliance, 10 Fenchurch Street, London, EC3M 3BE, Tel. +44 (20) 7015 4000

Scandinavian Branch: Legal & Compliance, Hantverkargatan 25, P.O Box 22085, SE-104 22 Stockholm, Tel. +46 8 617-5485

Italian Branch: Data Protection Officer, Podbielskistraße 396, 30659 Hannover, Germany

Our Commitment to You

Each of Our customers is important to Us, and We believe You have the right to a fair, swift and courteous service at all times. We acknowledge receipt of Your complaint and We will deal with it promptly and provide a response as quickly as possible.

Complaints Procedure

What to do if You have a complaint:

Our aim is to provide an excellent service to customers at all times. However, We understand that from time to time, We may not live up to our own high standards, and recognise that occasionally things do go wrong. Whenever this happens, We welcome Your feedback to ensure that We provide the kind of service You expect.

Complaints can be notified to Us by phone, e-mail or in writing. You will find contact details below. We take all complaints seriously and aim to resolve all problems promptly and fairly.

1. Upon receipt of Your complaint, We will, within no more than five working days, send You a letter to acknowledge your complaint, and explain to You how we will investigate Your complaint. We will also enclose a copy of Our complaints procedure.
2. We will endeavour to send a final response to You within eight weeks of receipt of Your complaint. If We are unable to provide You with a final response within this time frame, We will write to You explaining the delay and advise You when You can

8249/8106/8106/B0509PACEN2250031



expect a final response.

3. If more than eight weeks from the date of Your complaint have elapsed and You have not received a final response, or You are dissatisfied with the final response You have received from Us, You may choose to refer Your complaint to:

Financial Ombudsman Service (FOS)
Exchange Tower
London
E14 9SR

Tel: 0800 023 4 567 – free for people phoning from a “fixed line” (for example a landline at home)
0300 012 3 123 – free for mobile phone users who pay a month charge for calls to numbers starting 01 or 02
<http://www.financial-ombudsman.org.uk/>

Please note: You must refer your complaint to FOS within six months of the date on Our final response letter.

If You do not refer your complaint within this time period, FOS 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 FOS believes that the delay was as a result of exceptional circumstances.

Financial Ombudsman Service

Please note that the FOS will only consider Your complaint if You have given Us the opportunity to resolve it and You are a private Policyholder, a business with a group turnover of less than €2 million and/or fewer than ten employees, a charity with an annual income of less than €2 million, or a Trustee of a trust with a net asset value of less than €2 million.

Whilst We are bound by the decision of the FOS, You are not. Following the complaints procedure above does not affect Your right to take legal action.

Financial Services Compensation Scheme

HDI Global Specialty SE is covered by the Financial Services Compensation Scheme (FSCS), which means that you may be entitled to compensation if HDI Global Specialty SE is unable to meet their obligations to You.

For further information on the FSCS, please visit www.fscs.org.uk or by contacting:

Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU.

Telephone 0800 678 1100 or 020 7741 4000

Email enquiries@fscs.org.uk

8249/8106/8106/B0509PACEN2250031



Useful Telephone Numbers and Websites

Crisis Management Company; +44 (0) 203 4750 269

back up mobile +44(0) 7785627433

Claims Administrator: +44 (0) 203 4750 269

Medical Assistance: +44 (0) 203 4750 269

Foreign Office Travel advice: www.fco.gov.uk/en/travel-and-living-abroad/travel-advice-by-country/

Claims Information

It is a condition precedent to liability that on the happening of any event which may give rise to a claim You must tell Us immediately and give Us all the assistance We may reasonably require whether or not You intend to claim. When You tell Us about an incident or claim We may pass on information relating to it to any relevant claims related database.

We and other insurers may search relevant claims related database when You apply for insurance, in the event of incident or claim or at the time of renewal to validate Your claims history or that of any other person or property likely to be involved in the policy or claim.

Who to contact in the event of Claim

Claims Procedure

The Claims Administrator must be notified as soon as reasonably possible after any event or occurrence which may result in a claim and in any event no later than 60 days after the occurrence of such event. Should a claim be notified after this time, it may be declined.

For claims other than those falling under the, Kidnap and Ransom, Political and Natural Disaster Evacuation, Personal Security Specialist Expenses or Medical Assistance please contact our Claims Administrator:

Advent Insurance Management Limited

Email: hdiclaims@advent.claims

Phone: +44 (0) 203 4750 269



Claims Procedure

As soon as possible after the occurrence of any Accidental Bodily Injury or Illness the Insured Person must obtain and follow the advice of a Qualified Medical Practitioner. We shall not be liable for any consequences arising due to the Insured Person's failure to obtain and follow such advice or use such appliance or remedies as may be prescribed.

You must immediately pass on to the Claims Administrator unanswered, all communications from third parties in relation to any event that may result in a claim under this Policy. You must not admit or repudiate liability, nor offer to settle, compromise, make payment or pay any claim under this Policy without their written agreement.

In the event of a claim Our Claims Administrator will ask for the completion of a claim form and for the claimant to provide them all reasonable and necessary evidence to support Your claim which will include receipts and invoices as applicable, medical certificates, police evidence or in the case of Bodily Injury evidence to show that this was caused as a result of an Accident. If the information supplied is insufficient, they will identify the further information required. If they do not receive this information they may reject the claim or withhold payment until the information they may reasonably require is received.

The claimant must give the **Claims Administrator, Medical Assistance or Crisis Management Company** permission to obtain any medical reports or other records needed from any Qualified Medical Practitioner who has treated them otherwise We may not pay the claim.

The claimant must grant our **Claims Administrator, Medical Assistance or Crisis Management Company** permission to transfer personal information outside the European Economic Area or if different their Country of Domicile where necessary to enable them to provide the services described in Your policy documents (such as dealing with claims or providing Security or Medical Assistance). Failure to grant such permission may result in Our inability to provide such services or pay claims where the payment of such a claim is reliant on this information.

The Claims Administrator may ask the claimant to attend one or more medical examinations. If they do We will pay the cost of the examination(s) and for any medical reports and records (and the reasonable costs of any person required to travel with them provided these costs have been agreed by our Claims Administrator first). If the claimant to refuses to attend such examinations without reasonable cause We may reject their Claim.

In the event of the death of the claimant or Insured Person We have the right to request a post-mortem examination at our own expense. If this is refused We may not pay the claim.

The Claims Administrator may also contact third parties who have or who were to provide services to You, for example airlines or hotels, to verify the information provided to them to support a claim.

If the claimant or You do not comply with any reasonable request made by Our **Claim Administrator** or Us under this Claims Procedure We may not pay the claim.



All claims payments under this Policy will be made to You, the Policyholder. We or the **Claims Administrator** will not pay the Insured Person or any other person directly unless You, the Policyholder, request it.

The payment of a claim in full will fully discharge our liability under this Policy.



HDI Global Specialty Assistance Services

Security Assistance

In the event of a Security Emergency for Political and Natural Disaster Evacuation or Personal Security Specialist Expenses or claim for Kidnap and Ransom please contact **Our Crisis Management Company- Northcott Global Solutions on:**

Email: ops@northcottglobalsolutions.com

Phone: +44 (0) 203 4750 269

Back Up Mobile + 44(0) 7785627433

Our **Crisis Management Company** provides responses in respect of

- Political or Natural Disaster Evacuation Section
- Kidnap and Ransom Section
- Personal Specialist Expenses Section

Assistance and support is given to You through

- In house expert crisis management and response consultants
- In house security analysts.
- A network of response teams and security professional throughout the world.
- In country assistance and deployable resources in support and response to an emergency situation.
- Dedicated Kidnap and Ransom response teams.

Medical Assistance

Our **Medical Assistance Company** is operated by a specialist assistance provider who will advise on and where appropriate arrange all medical treatment, medical evacuation or repatriation, travel and accommodation.

In the event of a Medical Emergency overseas please contact **Our Medical Assistance Company – Northcott Global Solutions on:**

Email: ops@northcottglobalsolutions.com

Phone: +44 (0) 203 4750 269

Back Up Mobile + 44(0) 7785627433

Our **Medical Assistance Company** has experienced multi-lingual staff that will:

- Take charge of enquiries 24 hours a day 365 days a year and where they have agreed approved the treatment guarantee and for such treatment.
- Talk to doctors and hospital staff in their own language.
- Ensure medical advisers are consulted at the outset for their views on the possibility of arranging Repatriation and the best method of transportation to be adopted.

Provided medical treatment, travel or accommodation has been approved by Our **Medical Assistance Company** We will pay all associated costs incurred on behalf of You the Insured Person for the following:

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Marsh Limited

8106



A business of Marsh McLennan

- Making arrangements for the Insured Persons to travel home and where necessary ensure they are escorted by a medical attendant.
- Ensure assistance is provided upon arrival in the Insured Person's Country of Domicile following a Medical Repatriation.
- Making arrangements for the outward and return journeys for the next of kin or other nominated person to visit a sick or injured Insured Person.
- Assist in locating and sending drugs if not available locally.
- Provide advice on minor ailments.

Non-Emergency Assistance**Assistance and Guidance whilst travelling:**

- General Medical advice whilst abroad.
- Curtailment and Missed Departure assistance.
- A phone home service if there is an emergency.
- A translation and interpretation service if You need it.
- On stolen or lost passports, driving licenses, air tickets or other travel documents.
- On how to trace luggage with an airline operator if it is delayed or lost.
- On contacting local Embassies or Consulates.
- Information on languages and time zones.
- On transfer of money to You if required.
- On cancellation of credit cards if lost or stolen with the ability to report loss to the card provider.
- To relatives friends or employees if You are hospitalised.

Note: There may be charges for some services and You will have to pay these together with travel costs resulting from the advice You are given.



Policy Definitions

Each time We use one of the words or phrases listed below, it will have the same meaning wherever it appears in Your Policy unless We state otherwise. A defined word or phrase will start with a capital letter each time it appears in the Policy, except for headings and titles. Each Section of the Policy contains definitions which apply to that particular Section and they must be read in conjunction with the following Policy Definitions.

Accident / Accidental

Shall mean a sudden violent external unforeseen and identifiable event.

Accidental Bodily Injury

1. Injury caused by Accidental and/or violent means; or
2. Injury resulting from Exposure

occurring within 12 months from the date of the Accident by which such injury is caused.

Appropriate Authorities

The Foreign and Commonwealth Office of the United Kingdom, The United States Department of State, the Foreign Office of Canada or similar authority of the Policyholder's Country of Domicile.

Benefit Period

The total period, after the expiry of any Excess period stated in the Schedule of Benefits, for which We will pay benefits for Temporary Total Disablement and/or Temporary Partial Disablement in respect of any one Accident to or Illness of any Insured Person.

Country of Domicile

The country in which the Insured Person resides in and/or the country to which the Insured Person shall return to when repatriated or country in which they hold a valid passport

Death

Means death caused as a result of Accidental Bodily Injury.

Dependant(s)

The natural or legally adopted children or legal wards of an Insured Person (and/or Insured Person's Partner where applicable) living at the same address who are no older than 18 years of age or 23 years of age if in full time education at the time a claim occurs.

Excess

The number of calendar days at the commencement of each and every period of Temporary Total Disablement and/or Temporary Partial Disablement for which benefit is not payable.

Excluded Territory

Shall mean Afghanistan, Columbia, Iran, Iraq, Mexico, Nigeria, Mali, Pakistan, Philippines, Somalia, Syria, Sudan, South Sudan, Libya, Venezuela or Yemen or any other destination, country or region where the Appropriate Authority's advice at the time the trip was booked was against all travel to such destination, country or region.



Exposure

Death and/or injury to an Insured Person as a direct result of exposure to the elements shall be deemed to have been caused by Accidental Bodily Injury.

Hospital

Any establishment which is registered or licensed as a full time facility for surgical and medical diagnosis and treatment of injured and ill persons by and under the supervision of a Qualified Medical Practitioner continuously providing a 24 hours a day nursing service supervised by State Registered Nurses or nurses with equivalent qualifications and is not primarily a mental institution or a place of rest for the aged, for drug addicts or alcoholics.

Illness

Means illness or disease (not resulting from Accidental Bodily Injury) contracted anywhere in the world that declares itself during the Period of Insurance and occasions the total disablement of the Insured Person during the Period of Insurance.

Insured Person

Any director or employee under a contract of employment with You or person or category of persons shown in The Schedule.

Insured Person's Partner

The spouse or civil partner of an Insured Person living at the same address as the Insured Person for the last 12 months and sharing financial and where applicable responsibility for their Dependants.

Operative Time of Cover

The period of time for which We will cover the Insured Person for benefits described within the Schedule of Insured Persons:

1. **Continuous**
24 hours a day worldwide.
2. **Occupational**
Whilst the Insured Person is engaged in their usual occupational duties on Your behalf.
3. **Occupational including Commuting**
Whilst an Insured Person is engaged in their usual occupational duties on Your behalf or whilst travelling directly between the Insured Person's place of residence and place of work.
4. **Insured Journey**
Whilst the Insured Person is on an Insured Journey outside their Country of Domicile not exceeding 12 months in duration (unless otherwise agreed by Us) which You have authorised in connection with The Business (including any period of holiday which is purely ancillary to the Insured Journey) which begins during the Period of Insurance, and commences from the time the Insured Person leaves their Country of Domicile and continues during the entire period of the journey and terminating at the time of return to their Country of Domicile.



If the Insured Journey is solely within the Insured Person's Country of Domicile, cover will only be operative if the journey involves an air flight and/or overnight stay away from home.

Pandemic

A disease which is prevalent throughout a country or region and is declared as a Pandemic by the World Health Organisation

Period of Insurance

From the effective date until the expiry date shown in the Schedule of Insured Persons and any subsequent period for which We accept payment for renewal of this Policy.

Salary

The Insured Person's total gross annual salary or wages excluding any loan payments (but including overtime, commission or bonus payments, provided they have been specifically included in the estimated/actual salaries/wages on which the premium has been based) prior to deductions, paid in the 12 months immediately preceding the date of Accidental Bodily Injury or onset of Illness.

Senior Management

Those in Your organisation who play a significant role in management or organisational decision-making.

Schedule of Benefits

The document which specifies details of the benefits covered, sums insured and any Excesses, Endorsements and Conditions applying to the Policy.

Schedule of Insured Persons

The document which specifies details of The Policyholder, The Insured Persons, The Operative Time of Cover and The Business.

Temporary Partial Disablement

Disablement which prevents the Insured Person from attending to a substantial part of their usual occupation.

Temporary Total Disablement

Disablement which entirely prevents the Insured Person from engaging in their usual occupation.

The Business

Activities directly connected with The Business described in the Schedule of Insured Persons.

Qualified Medical Practitioner

A doctor or specialist who is registered or licensed to practice medicine under the laws of the country they practice in other than an Insured Person, Partner of an Insured Person, and a member of the immediate family of You or the Insured Person or an employee of Yours.

United Kingdom

For the purposes of this Policy means England Scotland Wales and Northern Ireland.



War

Shall mean armed conflict between nations, invasion act of foreign enemy, civil war, military or usurped power.

We/Us/Our

HDI Global Specialty SE, UK Branch.

Weekly Wage

The average weekly wage excluding any loan payments (but including overtime, commission or bonus payments, provided they have been specifically included in the estimated/actual salaries/wages on which the premium has been based) prior to deductions, paid in the 12 week period immediately preceding the date of the Accidental Bodily Injury or onset of Illness or any shorter period if the Insured Person has been employed by You for less than 12 weeks.

You/Your/The Policyholder

The persons, companies, partnerships or unincorporated associations named in the Schedule of Insured Person as The Policyholder.



Policy Conditions

Each Section of the Policy contains specific conditions. They must be read in conjunction with the following Policy Conditions which apply to all Sections unless otherwise stated. Where (i) there has been a failure to comply with a term (express or implied) of this insurance contract, other than a term that defines the risk as a whole; and (ii) compliance with such term would tend to reduce the risk of loss of a particular kind and/or loss at a particular location and/or loss at a particular time, We cannot rely on the breach of such term to exclude, limit or discharge Our liability if You show that the failure to comply with such term could not have increased the risk of the loss which actually occurred in the circumstances in which it occurred.

It is a condition precedent to liability that on the happening of any event which may give rise to a claim You must tell Us immediately and give Us all the assistance We may reasonably require whether or not You intend to claim. When You tell Us about an incident or claim We may pass on information relating to it to any relevant claims related database.

Adjustable Premium

If it has been agreed with Us that any part of the premium, being based on estimates, is adjustable You shall within 30 days of the end of each Period of Insurance provide Us with the actual figures and the premium will be adjusted accordingly.

Aggregate Limit

If the aggregate amount of all benefits payable exceeds the stated Aggregate Limit the benefits payable to an Insured Person shall be proportionately reduced until the total of all Benefits does not exceed the Aggregate Limit.

Alteration of Risk

Where there is a deliberate or reckless misrepresentation or non-disclosure of relevant information (such relevant information is including but not limited to where there has been any alteration to The Business and/or the occupation or pursuits of any Insured Person after the effective date of this insurance which increases the risk of loss, liability, destruction, damage, accident, injury or illness or where Your interest ceases except by will or operation of law) the policy will be treated as void and of no effect from the date of such misrepresentation or non-disclosure and no return of premium will be allowed.

Where such misrepresentation or non-disclosure is not deliberate or reckless but would have affected Our consideration of the risk, We may take the following actions with effect from the date of the misrepresentation or non-disclosure:

- i. if We would not have provided insurance on any terms, We will treat the policy as void and of no effect and We will return the amount of any premiums paid from that date;
- ii. if We would have entered the contract but at an additional premium We have the right to reduce any claim payment in proportion to the amount of the underpayment; and/or
- iii. if We would have entered the contract but applied different terms We have the right to amend the terms to those which would have been applied.



Assignment

You may not assign the benefits under this Policy. We shall not be bound to accept or be affected by any notice of any trust charge, lien, purported assignment or other dealing with or relating to this Policy.

Cancellation

We may cancel this Policy by sending You 30 days' written notice to Your last known address and We will return the Premium of any of the Period of Insurance remaining.

You may cancel this Policy at any time by sending Us 30 days written notice and any unearned premium shall be returned to You provided that during the current Period of Insurance there have been:

1. No claim(s) made under this Policy for which We have made a payment; and/or
2. No claims(s) made under this Policy which are still under consideration by Us; and/or
3. No incident(s) which You or the Insured person are aware of and are likely to give rise to a claim, which have not yet been reported to Us or the Claims Administrator

We may cancel the cover provided by this Policy for War by sending 7 days written notice to You at Your last known address.

Cessation of Employment

Payment of Temporary Total and Temporary Partial Disablement benefit will cease immediately if the Insured Person who is the subject of a claim retires or otherwise ceases to be employed by You.

Contribution

If at the time of an event giving rise to a claim there is any other insurance Policy in force in Your name which covers You or the Insured Person for the same expense, loss or liability We will only pay a proportion of the claim being determined by reference to the cover provided by each of the relevant policies with the exception of Personal Accident benefits which will be payable in full.

Fraud

1. If You or anyone acting on Your behalf makes a fraudulent claim under the Policy, We:
 - a) Are not liable to pay the claim; and
 - b) May recover from You any sums paid by Us to You in respect of the claim; and
 - c) May by notice to You treat the Policy as having been terminated with effect from the time of the fraudulent act.
2. If We exercise Our right under clause 1(c) above:
 - a) We shall not be liable to You in respect of a relevant event occurring after the time of the fraudulent act. A relevant event is whatever gives rise to Our liability under the Policy (such as the occurrence of a loss, the making of a claim, or the notification of a potential claim); and,
 - b) We need not return any of the premiums paid.



3. If a fraudulent claim is made under the Policy by or on behalf of an Insured Person, We may exercise the rights set out in clause 1 above as if there were an individual insurance contract between Us and the Insured Person. However, the exercise of any of those rights shall not affect the cover provided under the Policy for any other Insured Person or You.

Nothing in the above is intended to vary the position under the Insurance Act 2015.

Identification

The Policy and the Schedule of Insured Persons and the Schedule of Benefits will read as one contract. A particular word or phrase which is not defined will have its ordinary meaning.

Premium Payment Warranty.

You warrant that all premiums due to Us under this policy are paid within the terms agreed from the inception date. Non-receipt by Us of such premium, by midnight (local standard time) on the premium due date, shall render this policy void with effect from inception.

The Contracts (Rights of Third Parties) Act 1999

The Contracts (Rights of Third Parties) Act 1999 or any amendment thereto does not apply to this Policy. Only We and the Policyholder can enforce the terms of this Policy. No other party may benefit from this contract as of right. The Policy may be varied or cancelled without the consent of any third party.

Reasonable Precautions

You must take all reasonable precautions to avoid accident, injury or illness to any person, or loss, destruction or damage to their property, and You must comply with all legal requirements and safety regulations and conduct The Business in a lawful manner. If in relation to any claim You have failed to fulfil any of these conditions, You will lose your right to indemnity or payment for that claim.

Recovery from third parties

In the event that a third party is held liable for all or part of any claim paid under this Policy We may exercise Our legal right to pursue the third party to recover Our outlay. You or the Insured person will upon Our request agree to and permit Us to do such acts and things as may be necessary or reasonably required for the purpose of exercising this right. We will pay the costs and expenses involved in exercising the right against third parties.

Sanction Limitation and Exclusion Clause

We shall not provide cover or pay or be liable for any claims or provide any benefit under this Policy if by providing any cover, paying any claims or providing any benefit under this Policy would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.



Policy Exceptions

Each Section of the Policy contains Exceptions. They must be read in conjunction with the following

Exceptions which apply to all Sections unless otherwise stated.

This Policy does not cover:

1. The Insured Person engaging in any kind of flying other than as a passenger in a commercially licensed passenger carrying aircraft.
2. The Insured Person being a full time member of the armed forces of any nation or international authority or a member of any reserve forces called out for permanent service.
3. The Insured Person's own criminal act or committing or attempting to commit suicide or intentionally inflicting self injury or participating in civil commotions or riots of any kind.
4. Any claim incurred in any country, destination or region where the Appropriate Authorities advice at the time the trip was booked is 'against all travel to'.
5. Any claim arising in an Excluded Territory.
6. An Insured Person once they have attained the age of 81.
7. Any claim in any way caused by or resulting from:
 - a. Coronavirus disease (COVID-19);
 - b. Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2);
 - c. any mutation or variation of SARS-CoV-2;
 - d. any fear or threat of a), b) or c) above.
8. We will not pay:
 1. any benefits for bodily injury or illness; or
 2. for any loss, damage, liability, cost or expense; caused deliberately or accidentally by the use of, or inability to use, any application, software or programme in connection with any electronic device (for example a computer, laptop, smartphone, tablet or internet-capable electronic device).

LMA5433

08 July 2020



Section A – Personal Accident

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section, unless an alternative definition is stated to apply. Please also refer to the Policy Definitions at the front of this Policy document.

Aggregate Limit

The maximum amount shown in the Schedule of Benefits We shall pay per Insured Person for the total of all benefits per Event.

Capital Benefits

Capital Benefits include Loss of Hearing, Loss of Limb, Loss of Sight, Loss of Speech, Permanent Total Disablement.

Event

All instances of Accidental Bodily Injury specifically occurring at an identifiable time and place. The duration and extent of the event shall be limited to 72 consecutive hours and within a 10 mile radius.

In-home Domestic Service

Any person, employed (excluding any member of the Insured Person's family) in one or more of the following capacities: nanny, cook, cleaner or house-keeper.

Loss of Hearing

Total and permanent loss of hearing in one or both ears to the extent that the hearing loss is greater than 95 decibels across all frequencies using a pure tone audiogram .

Loss of Limb

Shall mean in respect of:

1. An arm – physical severance of all 4 fingers at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand) or permanent and total loss of use of a complete arm or hand at or above the metacarpal phalangeal joints (where the fingers join the palm of the hand).
2. A leg – physical severance at or above the level of the ankle (talo-tibial joint) or permanent total loss of use of an entire leg at or above the level of the ankle (talo-bial joint).

Loss of Sight

Loss of Sight shall include total and permanent loss of sight, which shall be deemed to have occurred:

1. In both eyes when the Insured Person's name has been added to the register of Blind Persons on the authority of a fully qualified ophthalmic specialist.
2. In one eye when the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.

Which means the Insured Person is only able to see at 3 feet that which they should normally be able to see at 60 feet and We are satisfied that the condition is permanent and without expectation of recovery.



Loss of Speech

Total and permanent loss of speech.

Paraplegia

The total and permanent paralysis of both lower limbs, bladder and rectum as a result of Accidental Bodily Injury, which in all probability shall continue for the remainder of the Insured Person's life.

Permanent Total Disablement

Permanent disablement wholly preventing the Insured Person from engaging in or giving attention to their usual occupation caused other than by Loss of Limb or Sight or Speech or Hearing which disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.

Quadriplegia

The total and permanent paralysis of all four limbs as a result of Accidental Bodily Injury which in all probability shall continue for the remainder of the Insured Person's life.

Retraining Expenses

The reasonable expenses incurred in engaging professional rehabilitation advice and assistance to retrain the Insured Person.

Cover

We will pay the sum insured shown in the Schedule of Benefits to You for Accidental Bodily Injury to an Insured Person during the Operative Time of Cover and Period of Insurance which within 24 months of the date of the Accident solely directly and independently of any other cause results in any of the benefits listed below:

- Death
- Capital Benefits
- Temporary Total Disablement
- Temporary Partial Disablement

Amount payable

The amount payable to You for any Insured Person shall be the amount as stated in the Schedule of Benefits for that category of Insured Person. Subject to that benefit being noted as being Covered at the time of sustaining Accidental Bodily Injury.

Disappearance

If an Insured Person has been missing for a period of 180 consecutive days and there is sufficient evidence to support the conclusion that death has been caused by Accidental Bodily Injury, that person will be presumed to have died. However You will repay any benefit if the Insured Person is found to have been alive or is found alive.

Permanent Partial Disablement

If as a result of Accidental Bodily Injury the Insured Person sustains disablement not resulting in Permanent Total Disablement We will depending on the seriousness in degree of disablement pay the benefit shown in the Schedule of Benefits as a percentage of the Permanent Total Disablement benefit. No consideration shall be given to the Insured



Person's occupation, business or profession when assessing the seriousness in the degree of disablement.

Extensions

The following Extensions apply if stated as being Covered in The Schedule of Benefits, but will be subject to the Aggregate Limit stated in The Schedule of Benefits.

Catastrophic Personnel Replacement Expenses

In the event that five or more of the Insured Persons are involved in the same Accident during the Operative Time of Cover and which results in their Death or Permanent Total Disablement We will indemnify You for additional costs incurred for:

1. paying out overtime and/or for hiring temporary staff to carry out their duties up to a maximum of 23 weeks.
2. finding permanent replacements including any advertisement or recruitment fees and a joining bonus paid direct to such replacements of up to 1 x annual salary.
3. the internal and external costs and expenses incurred in training the replacements

Up to a maximum of £1,000,000 per Event.

In the event of a claim under this section there will be no further benefit payable under the Replacement Recruitment Expenses for the same Accident.

Childcare Expenses

In the event that an Insured Person sustains Accidental Bodily Injury during the Operative Time of Cover which results in a valid Capital Benefits or Temporary Total Disablement claim We will indemnify the Insured Person for up to £500 a week for a maximum of 104 weeks for the cost of necessary childcare expenses incurred whilst recovery is in progress.

Coma Benefit

In the event that an Insured Person sustains Accidental Bodily Injury during the Operative Time of Cover which results in a continuous unconscious state We will pay You on behalf of the Insured Person an additional sum of £50 per day for each day of continuous unconsciousness up to a maximum of 730 days.

Commuting Expenses

In the event of a claim being paid for Temporary Total Disablement We will Indemnify You on behalf of the Insured Person up to 5% of the benefit claimed for the cost of a licensed taxi or mini cab service to and from their usual place of work if they have recovered sufficiently to return to work but it is medically certified that they are unable to travel in their usual way to work by either driving a vehicle or travelling on public transport up to a maximum of £5,000 for the expenses incurred.

Corporate Reputation Protection

If during the Operative Time of Cover an Insured Person or a visitor to Your premises suffers Accidental Bodily Injury which results in their Death or in them sustaining Loss of Hearing, Loss of Limb, Loss of Sight, Loss of Speech or Permanent Total Disablement whilst legally



on Your premises We will reimburse You for all costs incurred (other than Your own internal costs) for:

1. the engagement of image and/or public relations consultant; and/or
2. the release of information through the media within 15 days of, and directly in connection with, such Accidental Bodily Injury, to protect and/or positively promote Your image.

Up to a maximum of £25,000 per Event.

Death of Visitors

In the event that a third party visits Your premises during the Operative Time of Cover in an authorised business capacity and sustains Accidental Bodily Injury, that had the visitor been an employee would have resulted in a valid Death benefit claim, We will pay You a benefit of £10,000 subject to a maximum payment of £50,000 in the aggregate annually.

Dental and Optical Benefits

If during the Operative Time of Cover the Insured Person sustains Accidental Bodily Injury which results in them suffering loss or damage to their dentures, prescription glasses or contact lenses We will indemnify them for the cost of replacing such items up to a maximum of £1,000 per Insured Person.

Facial Disfigurement

If during the Operative Time of Cover an Insured Person suffers Accidental Bodily Injury which within two years is the sole cause of permanent facial disfigurement with a visible scar tissue of at least one centimetre in length in the area from the hairline including the lower jaw and ears We will pay the Insured Person

1. For a Scar of 1 to 5 cm in length £1,250
2. For a Scar over 5 cm in length £2,500

Subject to a maximum payment of £5,000 per Insured Person.

Family Benefit

In the event of the Death of an Insured Person during the Operative Time of Cover We will increase the Death benefit payable by an additional £5,000 for each surviving Dependant subject to a maximum payment of £25,000 per Event.

Fracture Benefit

If during the Operative Time of Cover an Insured Person suffers Accidental Bodily Injury which results in a fracture We will pay the Insured Person the following benefits

1. Skull (excluding nose and teeth) £250.
2. Shoulder (scapula and clavicle) £250.
3. Arm (humerus, ulna, and radius) £250.



4. Leg (femur, patella, tibia and fibula) £250.

subject to a maximum payment of £2,500 per Insured Person.

No claim will be payable where the Insured Person was suffering from Osteoporosis and the condition had been diagnosed and made known to the Insured Person before the fracture occurred.

Funeral Expenses

In the event of the Death of the Insured Person during the Operative Time of Cover and the payment of a Death benefit under this Policy We will Indemnify the Insured Person's estate for the reasonable costs of a funeral up to a maximum payment of £10,000 subject to this not being included in any claim under the Medical and Emergency Travel Expenses Insurance Section of this Policy.

Home Improvement Expenses

If during the Operative Time of Cover the Insured Person sustains Accidental Bodily Injury which results in the Insured Person becoming a Paraplegic or Quadriplegic We will indemnify the Insured Person for the expenses incurred in adapting their home or for relocating to another home to cater for their disability up to a maximum of £25,000 per Insured Person.

Hospital Inconvenience

In the event that an Insured Person is admitted as a Hospital in-patient as a result of Accidental Bodily Injury occurring during the Operative Time of Cover We will pay You on behalf of the Insured Person £50 for each complete 24 hour period that the Insured Person spends as an in-patient increasing to £100 for each complete 24 hour period on public or bank holidays, up to a maximum of 365 days subject to this not being included in any claim under the Medical and Emergency Travel Expenses Insurance Section of the Policy.

In-House Domestic Service

In the event of a claim being paid for Temporary Total Disablement We will Indemnify You on behalf of the Insured Person up to 5% of the benefit claimed for an In-home Domestic Service whilst recovery is in progress up to a maximum of £10,000 for the expenses incurred.

Loss of Enjoyment of Life Benefit

If during the Operative Time of Cover the Insured Person suffers Accidental Bodily Injury which results in them requiring the assistance of another person or mechanical device to undertake two or more of the following activities for the remainder of their life

1. dressing and undressing, or
2. washing, bathing and toileting, or
3. eating and drinking, or
4. general household duties, shopping and driving.

We will pay the Insured person a benefit of £5,000 subject to no benefit having already been paid



under the Quality of Life Improvement Benefit

A claim will only be considered to be valid where the Insured Person's treating Qualified Medical Practitioner confirms the need for such assistance or mechanical device.

Medical Expenses

If an Insured Person sustains Bodily Injury which results in them incurring Medical Expenses as an inpatient in a Hospital or nursing home We will Indemnify You on their behalf for up to 15% of the amount payable for a valid Death and/or Capital Benefits claim or up to 30% of the amount payable for a valid Temporary Total Disablement and/or Temporary Partial Disablement Benefits claim subject to a maximum payment of £20,000.

Nominated Person Benefit

In the event of the Insured Person being hospitalised as an in-patient following Accident Bodily Injury occurring during the Operative Time of Cover beyond a 10 mile distance from their normal place of residence We will indemnify You on behalf of the Insured Person for reasonable costs of transporting the person nominated by the Insured Person to visit them for the duration of such hospitalisation up to a maximum of £2,500.

Paraplegia or Quadriplegia

In addition to a valid Permanent Total Disablement claim We will pay £125,000 if the Insured Person becomes a Paraplegic or £250,000 if they become a Quadriplegic.

Post Traumatic Stress Disorder-Terrorism

If during the Operative Time of Cover and within their Country of Domicile the Insured Person directly witness an act of terrorism and without sustaining Accidental Bodily Injury suffers Post Traumatic Stress Disorder resulting in their Temporary Total Disablement within 6 months of the event We will pay You 50% of their weekly wage or £500 per week which ever is the lesser for up to a maximum of 26 weeks subject to no claim being paid under the Illness Section of the policy for the same event.

Quality of Life Improvement

If during the Operative Time of Cover an Insured Person suffers Accidental Bodily Injury which results in a valid Permanent Total Disablement claim that prevents them from attending to their usual occupation We will Indemnify You on their behalf in respect of the cost of obtaining professional advice and assistance to improve their quality of life up to a maximum of £15,000.

Rehabilitation Case Management

If during the Operative Time of Cover the Insured Person sustains a valid Capital Benefits or Temporary Total Disablement claim We will appoint a firm of independent injury management specialists to provide rehabilitation case management services up to the amounts stated in the Schedule of Benefits

Replacement Recruitment Expenses

We will indemnify You up to £10,000 for all costs incurred by You, subject to Our prior approval, to recruit a replacement employee following the Death of an Insured Person that results in a valid Death claim under this Policy.



Retraining Expenses

In the event of a valid claim being paid for Permanent Total Disablement or Loss of Limb(s) or Loss of Sight We will indemnify You for all reasonable expenses incurred in retraining the Insured Person for either, an alternative occupation or in order to improve the quality of their life, up to a maximum of £15,000.

Return Home Expenses

Where Accidental Bodily Injury during the Operative Time of Cover results in the Insured Person being incapacitated more than 10 miles from their normal Place of Residence for more than 72 hours We will indemnify You for the additional and reasonable expenses necessarily incurred in returning the Insured Person, their personal belongings and any portable Business Equipment carried by them on the journey, to their normal place of residence up to a maximum of £1,500.

Surviving Dependants Benefits

In the event that the Insured Person and the Insured Person's Partner (whether or not the Partner is Insured under this Policy) suffer a fatal injury in the same Accident during the Operative Time of Cover the Family Benefit will not be payable but We agree to double the Death benefit payable to the Insured Person or their Partner (if also Insured under this Policy) subject to a maximum of £1,000,000 per Event.

Urgent Expenses following Death

In the event of the Accidental Death of an Insured Person during the Operative Time of cover that results in a valid Death claim We will pay the Insured Person's Partner or their estate up to £2,000 for the urgent payment of expenses whilst the Insured Person's estate is being settled.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

Accumulation Limit

The maximum We will pay in respect of all benefits under this Policy in aggregate in respect of all Insured Persons involved in the same Event shall not exceed the Maximum Accumulation Limit stated in the Schedule of Benefits and individual benefits shall where necessary be reduced proportionally until the total aggregate of individual benefits does not exceed the maximum accumulation limit.

Limitation of Benefits

Once an Insured Person has attained the age of 75 the Permanent Total Disablement benefit payable under this Policy is limited to 25% of the current sum insured or £25,000 whichever is the lesser and the definition of Permanent Total Disablement will be Permanent Disablement wholly preventing the Insured Person from engaging in or giving attention to any and every occupation caused other than by Loss of Limb or Sight or Speech or Hearing which disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.



Minors

If the Insured Person is under age 16 at the date of the Accident giving rise to a claim:

1. The maximum amount payable for Death will be £20,000 or the sum insured shown in the Schedule of Benefits whichever is lesser.
2. The definition of Permanent Total Disablement will be Permanent Disablement wholly preventing the Insured Person from engaging in or giving attention to any and every occupation caused other than by Loss of Limb or Sight or Speech or Hearing which disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.
3. No benefit will be payable for Temporary Total Disablement or Temporary Partial Disablement.

Non Employees

In respect of Insured Persons who are not a director or employee of the Policyholder the definition of Permanent Total Disablement will be:

Permanent disablement wholly preventing the Insured Person from engaging in or giving attention to any and every occupation caused other than by Loss of Limb or Sight or Speech or Hearing which disablement lasts without interruption for more than 12 months from the date of Accident, and in all probability shall continue for the remainder of the Insured Person's life.

Payment of Benefit

We will not pay under more than one of the benefits listed in the Schedule of Benefits for Death or Capital Benefits in conjunction with the same Accident for the same Insured Person. After payment has been made for a Death or Capital Benefit claim no further liability shall attach to Us in respect of that Insured Person during the current Period of Insurance. If the Death benefit is not covered then We will not pay for benefits for Loss of Limb or Sight or Speech or Hearing until at least 13 weeks after the date of the Accident and only then if the Insured Person has not died as a result of the Accident.

Payment of Permanent Total Disablement

Benefit under Permanent Total Disablement will be payable after expiry of 52 consecutive weeks disablement and on certification that disablement is permanent and without expectation of recovery by a medical examiner appointed by Us.

Payment of Partial Disablement

Where more than one form of disablement results from one Accident for the same Insured Person We will not pay more than 100% of the Permanent Total Disablement benefit due or if a benefit is paid for Loss of use of a Limb no benefit shall be paid for Permanent Partial Disablement.

Payment of Temporary Total and Temporary Partial Disablement

Payment of benefit for Temporary Total Disablement and Temporary Partial Disablement shall not preclude entitlement to any other benefit but shall cease immediately following payment of Death,

8249/8106/8106/B0509PACEN2250031

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Loss of Limb, Sight, Speech or Hearing or a Permanent Total Disablement benefit.

Payment of benefit for Temporary Total Disablement and Temporary Partial Disablement will be paid at
4 weekly intervals in arrears commencing after the expiry of the Excess.

Benefits payable under Temporary Total Disablement and/or Temporary Partial Disablement shall not be paid longer than the Benefit Period shown in the Schedule of Benefits.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not pay any claim for Accidental Bodily Injury directly or indirectly caused by:

1. Gradually operating cause or any naturally occurring condition or degenerative process.
2. Illness or disease (unless resulting directly from Accidental Bodily Injury).

Or for any amount in excess of the Aggregate Limit.



Section B – Illness

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section. Please also refer to the Policy Definitions at the front of this Policy document.

Normal Pregnancy

Any symptoms or combination of symptoms which normally accompany pregnancy (including multiple pregnancy) which are generally minor or temporary (or both) and which do not represent a medical danger to the mother or baby; and childbirth, including delivery by Caesarean section or any other medically or surgically assisted delivery that does not cause any medical complications.

Pre-Existing Medical Condition

Any physical defect, infirmity, injury, disability or chronic or recurring Illness which the Insured Person have received advice, medication, treatment for, or is under investigations or referrals for any undiagnosed conditions.

Cover

We will pay the sum insured shown in the Schedule of Benefits to You for the Illness of an Insured Person during the Period of Insurance which results in the Temporary Total Disablement of that Insured Person.

Amount Payable

The amount payable to You for any Insured Person shall be the amount as shown in the Schedule of Benefits for that category of Insured Person.

Conditions

The following conditions apply to the Illness section. Please refer also to the Policy Conditions at the front of this Policy document.

Payment of Temporary Total Disablement

1. Payment of benefit for Temporary Total Disablement will be paid at 4 weekly intervals in arrears commencing after the expiry of the Excess.
2. In respect of any one Illness, benefit will not be payable under Temporary Total Disablement for longer than the Benefit Period shown in the Schedule of Benefits.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not pay any claim for

1. Any Pre-Existing Medical Condition of an Insured Person.
2. The Insured Person being under the influence of or being directly or indirectly affected by the effects of intoxicating liquor or drugs or any other condition thereby aggravated

8249/8106/8106/B0509PACEN2250031

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8106



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- other than drugs taken in accordance with treatment prescribed and directed by a Qualified Medical Practitioner but not for the treatment of drug addiction.
3. Normal Pregnancy unless it develops into a complication which is diagnosed by a doctor or consultant who specialises in obstetrics.
 4. Once an Insured Person has attained the age of 66 unless declared to and accepted by Us in writing.
 5. A tropical disease where the Insured Person has not (unless the Insured Person's doctor advises otherwise) had the recommended inoculations and/or taken the recommended medication.
 6. Any condition caused by or prolonged or aggravated by any psychological or psychiatric condition, anxiety, depression, stress or fatigue.



Section C – Business Travel

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section. Please also refer to the Policy Definitions at the front of this Policy document.

Aggregate Limit

The total amount We will pay for all Cancellation and/or Curtailment and/or Replacement and/or Change of Itinerary claims for all Insured Persons per Insured Journey.

Business Equipment

Any property which is owned hired or borrowed by You other than Electronic Business Equipment or Business Samples.

Business Samples

Business and trade samples owned hired or borrowed by You

Electronic Business Equipment

Electronic articles hired or borrowed by You other than Business Equipment or Business Samples.

Hijack

Unlawful seizure or unlawful control of an aircraft or other conveyance in which the Insured Person is travelling as a passenger.

Kidnap

Unlawful seizure, detention or taking by force or fraud of an Insured Person (except a child by its parent or legal guardian) by a third party without the consent of that Insured Person.

Money

Coins, bank or currency notes, cheques, postal orders, travellers cheques, travel tickets, luncheon vouchers, petrol or other coupons with a monetary value and credit vouchers which belong to or are under the custody and control of the Insured Person.

Personal Belongings

Items which are the property of the Insured Person or property for which they are personally responsible (other than Business Equipment, Electronic Business Equipment or Business Samples) and which are taken on or acquired during an Insured Journey.

Repatriation

With prior approval from Us and due solely for medical reasons the return of the Insured Person to their Country of Domicile by normal scheduled airlines or by an air ambulance or other suitable means of transport.



Medical and Emergency Travel Expenses

Cover

In the event of the Insured Person sustaining Injury or contracting illness during the course of an Insured Journey We will pay up to the sum insured shown in the Schedule of Benefits for:

1. **Medical Expenses**
Reasonable and necessary emergency medical, surgical, hospital and nursing home charges or emergency dental (for the relief of pain and suffering) fees, incurred outside the Insured Person's Country of Domicile, including the cost of rescue services to take the Insured Person to Hospital.
2. **Emergency Travel Expenses**
Reasonable and necessary additional costs of transport and accommodation incurred in respect of the Insured Person or any one relative or friend who has to travel to remain with or escort the Insured Person home to the Insured Person's Country of Domicile.
3. **Repatriation**
Upon medical advice the Repatriation of the Insured Person to the Insured Person's Country of Domicile.
4. **Emergency Medical Evacuation**
Upon the advice of **Our Crisis Management Company** the reasonable and necessary costs of transporting the Insured Person to the nearest suitable Hospital.

Extensions

The following Extensions apply if stated as being Covered in The Schedule of Benefits, but will be subject to the Aggregate Limit stated in The Schedule of Benefits.

Continuing Medical Charges

In the event of a valid claim under for Medical Emergency Travel Expenses We will pay the reasonable and necessary cost of Hospital in-patient medical charges incurred within 3 months immediately following the date of the Insured Person's Repatriation to their Country of Domicile up to a maximum of £50,000.

Funeral Expenses

In the event of the death of the Insured Person whilst on an Insured Journey We will Indemnify the Insured Person's estate up to a maximum of £10,000 for the reasonable costs incurred of a funeral outside the Insured Person's Country of Domicile or the costs of transportation of the Insured Person's body or ashes and the Insured Person's Personal Belongings, Business Equipment, Electronic Business Equipment and Business Samples back to their Country of Domicile.

Hospital Inconvenience

In the event that an Insured Person is admitted as a Hospital in-patient outside their Country of Domicile We will pay You on behalf of the Insured Person £50 for each complete 24 hour



period that the Insured Person spends as an in-patient increasing to £100 for each complete 24 hour period on public or bank holidays, up to a maximum of 365 days.

Emergency Medical Assistance

Our Crisis Management Company is operated by a specialist assistance provider who will advise on and where appropriate arrange all medical treatment, travel and accommodation covered under Medical and Emergency Travel Expenses.

In the event of a Medical Emergency overseas please contact **Our Medical Assistance Company**:

Northcott Global Solutions on:

Email: ops@northcottglobalsolutions.com

Phone: +44 (0) 203 4750 269

Back Up Mobile + 44(0) 7785627433

Our **Medical Assistance Company** has experienced multi-lingual staff that will:

- Take charge of enquiries 24 hours a day 365 days a year and where necessary contact hospitals and guarantee any necessary fees.
- Talk to doctors and hospital staff in their own language.
- Ensure medical advisers are consulted at the outset for their views on the possibility of arranging Repatriation and the best method of transportation to be adopted.

Provided medical treatment, travel or accommodation has been arranged by the specialist assistance provider We will pay all associated costs incurred on behalf of You the Insured Person for the following:

- Making arrangements for the Insured Persons to travel home and where necessary ensure they are escorted by a medical attendant.
- Ensure assistance is provided upon arrival in the Insured Person's Country of Domicile following a Medical Repatriation.
- Making arrangements for the outward and return journeys for the next of kin or other nominated person to visit a sick or injured Insured Person.
- Assist in locating and sending drugs if not available locally.
- Provide advice on minor ailments.

Other emergency services provided whilst travelling**Assistance and Guidance whilst travelling:**

- General Medical advice whilst abroad.
- Curtailment and Missed Departure assistance.
- A phone home service if there is an emergency.



- A translation and interpretation service if You need it.
- On stolen or lost passports, driving licenses, air tickets or other travel documents.
- On how to trace luggage with an airline operator if it is delayed or lost.
- On contacting local Embassies or Consulates.
- Information on languages and time zones.
- On transfer of money to You if required.
- On cancellation of credit cards if lost or stolen with the ability to report loss to the card provider.
- To relatives friends or employees if You are hospitalised.

Note: There may be charges for some services and You will have to pay these together with travel costs resulting from the advice You are given.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document. In the event of a conflict between a specific condition in this section and a term in the Policy Conditions, the specific condition will apply in relation to this Section.

1. The Insured Person must as soon as reasonably possible contact **Our Medical Assistance Company** if they require in-patient hospital treatment, Emergency Medical Evacuation or Repatriation and obtain their pre-approval for such in-patient hospital treatment, Emergency Medical Evacuation or Repatriation.
2. Failure to obtain **Our Medical Assistance** pre-approval for in-patient hospital treatment, Emergency Medical Evacuation or Repatriation means We will not pay or reimburse the costs incurred.
3. If We incur costs as a result of advice or assistance being provided or the settlement of any expenses being made in good faith by **Our Medical Assistance Company** to any person who is not insured under this Policy, You shall reimburse Us in respect of such costs and expenses.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. In-patient hospital treatment, Emergency Medical Evacuation or Repatriation which does not have the prior approval of **Our Medical Assistance Company**
2. Medical expenses incurred when the specific purpose of the journey is for the Insured Person to receive medical treatment or advice.
3. Medical expenses arising from an illness which the Insured Person is aware of and is travelling against medical advice or where a terminal prognosis has been given.



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4. Medical Expenses (other than Continuing Medical Charges) incurred within the Insured Person's Country of Domicile.
 5. Any expenses incurred 12 months after the date the need for treatment first arises.
 6. Any expenses incurred whilst on an Insured journey of 12 months or over unless such journey has been declared to and accepted by Us.
 7. Any expenses incurred in excess of £50,000 for a child born outside Your Country of Domicile whilst on an Insured Journey.



Search and Rescue Expenses

Cover

We will indemnify You up to a maximum of £50,000 in the aggregate annually for all Insured Persons during the Policy Period for all reasonable and necessary costs incurred by the authorities in searching for the Insured Person and bringing them to a place of safety, if during the course of an Insured Journey whilst outside the Country of Domicile the Insured Person is either (1) reported missing and it is known or reported that the Insured Person may have sustained Accidental Bodily Injury or suffered illness, or (2) the weather conditions are such that in order to prevent Accidental Bodily Injury or the suffering of illness the police or rescue authorities instigate a search and rescue for the Insured Person.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. The Insured Person must comply at all times with local safety advice and must comply with all recommendations and restrictions prevalent at the time.
2. Expenses are only payable for the Insured Person's chargeable proportion of any search and rescue operation.
3. Our Emergency Medical Assistance Service must be informed immediately of any emergency that potentially might give rise to a claim.
4. Expenses will only be covered up to the point where the Insured Person is recovered by search and rescue team or up to the time the authorities advise that continuing the search is no longer viable.
5. In the event of a claim a written report must be obtained from the search and rescue authority and provided to Us before a claim can be paid.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. The Insured Person knowingly endangering either their own life or of any other person(s).
2. The Insured Person engaging in activities where their experience or skill levels falls below those reasonably required to participate in such activities.
3. The Insured Person disregarding or not complying with any local safety advice, warnings, restrictions or rescue or police authority warnings in force during or at the time of undertaking such activities.



Kidnap, Ransom and Hostage

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section. Please also refer to the Policy Definitions at the front of this Policy document.

Ransom Monies

Cash, monetary instruments, bullion or the fair market value of any securities property or services.

Hostage

The unlawful detention of an Insured Person by a third party who threatens to kill, injure or to continue to detain an Insured Person in order to compel a state, international organisation or person to do or abstain from doing any act.

Consultants Costs

The reasonable fees and expenses of Our Crisis Management Company incurred during a response to a Kidnapping including but not limited to the costs of travel accommodation, qualified interpretation communication and payments to informants.

Cover

We will Indemnify You for any Ransom Monies paid out and Consultants Costs incurred if during an Insured Journey an Insured Person is Kidnapped and held for Ransom or Hostage.

The maximum amount We will pay under this Section in the aggregate annually for all Insured Persons during the Policy year is:

1. £250,000 for Ransom Monies
2. £50,000 for Consultants Costs

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. This Policy will not cover the payment of any claim or provision of any benefit which would be contrary to the law of the Country of Domicile of the Policyholder or country where the incident occurred.
2. You and the Insured Person shall take all reasonable and necessary steps to ensure that the existence of this Policy is not made common knowledge.
3. The Crisis Management Call Centre must be advised immediately of any situation that may give rise to a claim. If the Crisis Management Call Centre is not contacted immediately Our liability to pay any subsequent claim under this Section will cease.
4. You must provide Us and the Crisis Management Company with all assistance and information requested in a timely manner.
5. You must not make or attempt to make arrangements without the agreement of Our Crisis Management Company.



6. Our Crisis Management Company shall take over and control all negotiations on Your behalf and no offer, promise or payment shall be made without Our prior approval.

In the event of a situation or event that may give rise to a claim please immediately contact Our Crisis Management Company- Northcott Global Solutions:

Northcott Global Solutions

Email: ops@northcottglobalsolutions.com

Phone: +44 (0)207 183 8910

Back Up Mobile + 44(0) 7785627433

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claims resulting from:

1. The Fraudulent dishonest or criminal acts of You, the Insured Person or any person authorised by You to have custody of the Ransom Monies.
2. Kidnapping of an Insured Person whilst in their Country of Domicile.
3. Kidnapping which occurs in an Excluded Territory.
4. Any amount that You or an Insured Person became legally liable to pay as the result of any legal action for damages including legal costs incurred in defence of such action, resulting from alleged negligence or incompetence in Hostage retrieval operations or negotiations following the Kidnap of an Insured Person or alleged negligence in not preventing the Kidnap of an Insured Person.
5. Any amount of Ransom Monies surrendered to any person other than those responsible for making a previously communicated Ransom demand to you.
6. Any claim if you have had any Kidnap Insurance cancelled or declined in the past.
7. The Kidnapping of a child by its parent(s) or legal guardian.
8. Any claim for Kidnapping where an attempt to Kidnap an Insured Person or a threat to Kidnap an Insured Person had been made in the 12 months before taking out this Policy and such attempt or threat was not made known to Us and accepted by Us at such time.



Political and Natural Disaster Evacuation

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section. Please also refer to the Policy definitions at the front of this Policy document.

Insured Event

1. The Insured's Appropriate Authority issues a travel advice for a particular country or region where the Insured Person is on an Insured Journey, recommending that certain categories of person which includes the Insured Person should leave that country or region.
- or -
2. The recognised Government in their Host Country:
 - a) Declares a state of emergency necessitating immediate evacuation; or
 - b) Formally recommends or instructs that the Insured Person should leave that country or region for safety; or
 - c) Seizes, confiscates or expropriates the Insured or Insured Person's property, plant or equipment; or
 - d) Expels the Insured Person or declares the Insured Person "persona non grata"; or
 - e) Withdraws all scheduled international commercial flights for a period in excess of 24 hours as a result of political or military action intervention which has a direct impact on the Insured persons safety and prevents them leaving the country.
3. Natural Disaster within their Host Country which puts the Insured Person in a Life-threatening situation(s).
4. The Political or military events in the country the Insured Person is staying puts them in a Life-threatening situation(s).

Evacuation and Repatriation

The costs incurred by the Policyholder or Insured Person for the emergency evacuation of an Insured Person to the nearest place of safety or their Country of Domicile following an Insured Event.

Expenses

The cost of accommodation, transportation and food and any other reasonable and necessary expenses.

Host Country

The Country in which the Insured Person is staying.

Life-threatening situation(s)

Any situation occurring outside the Insured Person's Country of Domicile where **Our Crisis Management Company** have agreed that the Insured Person's life is in danger.

Natural Disaster

Any event caused by natural phenomenon including earthquake, flood, hurricane, landslide, tornado, tsunami, volcanic eruption, or as a result of a Pandemic declared by the World Health Organisation.

8249/8106/8106/B0509PACEN2250031



Cover

We will indemnify You if, during an Insured Journey outside the Insured Person's Country of Domicile, the Insured Person incurs Evacuation and Repatriation Costs and/or Expenses as a result of an Insured Event.

The maximum amount We will pay under this Section annually for all Insured Persons during the Policy year is:

1. £50,000 for Evacuation and Repatriation Costs in the aggregate.
2. £100 per Insured Person per day for a maximum of 30 days for Expenses.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. The Insured Person is not travelling to a country of region contrary to the advice of their Appropriate Authority.
2. The Crisis Management Call Centre must be advised immediately of any situation that may give rise to a claim or as soon as reasonably possible thereafter. If the Crisis Management Call Centre is not contacted immediately Our liability to pay any subsequent claim under this section will cease.
3. You must provide us and the Crisis Management Company with all assistance and information requested in a timely manner.
4. The Insured Person must follow the advice of The Crisis Management Call Centre at all times.
5. Where you or an Insured Person is entitled to any refund on unused tickets or returnable deposits or advanced payments We will be entitled to deduct these from the value of any claim.

In the event of a situation or event that may give rise to a claim please immediately contact Our Crisis Management Company- Northcott Global Solutions:

Northcott Global Solutions

Email: ops@northcottglobalsolutions.com

Phone: +44 (0)207 183 8910

Back Up Mobile + 44(0) 7785627433

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claims resulting from or (if applicable) attributable to:

1. An alleged violation of the laws of the Host Country by You or the Insured Person.
2. Your failure or the Insured Person's failure to maintain and possess duly authorised and issued required immigration, work, residence or similar visas or permits or other relevant documentation for the country where they are visiting on an Insured Journey.

8249/8106/8106/B0509PACEN2250031



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3. Accommodation or Evacuation Expenses incurred more than 30 days before or 10 days after the Insured Event.
 4. In whole or in part to a debt insolvency, commercial failure, the repossession of any property by any title holder or lien holder, or any other financial cause.
 5. You or the Insured Person failing to honour any contractual obligation, bond or specific performance condition in a licence.
 6. The conditions leading to the Insured Person's departure being in existence prior to the Insured Person entering the country or where such conditions were reasonably foreseeable prior to the Insured Person entering the country on an Insured Journey.
 7. More than one Insured Event in any one Period of Insurance.
 8. The Insured Person being in their own Country of Domicile.



Personal Security Specialist Expenses

Definitions

The following definitions apply to this Section and shall keep the same meaning wherever they appear in the Section. Please also refer to the Policy Definitions at the front of this Policy document.

Security Specialist

The security specialist appointed by Our Crisis Management Company.

Security Specialists Expenses

The reasonable and necessary costs of and expenses incurred by the security specialist appointed by Our Crisis Management Company.

Cover

If during an Insured Journey outside their Country of Domicile the Insured Person becomes involved in a Life-threatening situation(s) We will pay the Security Specialists Expenses incurred in extracting the Insured Person from such situation.

The maximum amount We will pay under this Section in the aggregate annually for all Insured Persons during the Policy year is £10,000.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. You and the Insured Person shall take all reasonable and necessary steps to ensure that the existence of this Policy is not made common knowledge.
2. Any extraction of an Insured Person must be organised by Our Crisis Management Company.
3. The Crisis Management Company Call Centre must be advised immediately of any situation that may give rise to a claim. If the Crisis Management Company Call Centre is not contacted immediately Our liability to pay any subsequent claim under this Section will cease.
4. You must provide Us and the Crisis Management Company with all assistance and information requested in a timely manner.
5. You or the Insured Person must not attempt to or make any arrangements without the prior approval of Our Crisis Management Company.
6. The Insured Person must follow the advice of The Crisis Management Call Centre at all times any failure to follow such advice Our liability to pay any subsequent claim under this Section will cease.

In the event of a situation or event that may give rise to a claim please immediately contact Our Crisis Management Company- Northcott Global Solutions:

Northcott Global Solutions

Email: ops@northcottglobalsolutions.com

Phone: +44 (0)207 183 8910

Back Up Mobile + 44(0) 7785627433

8249/8106/8106/B0509PACEN2250031

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8106



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Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claims resulting from:

1. Any unpaid debt or fraudulent, dishonest or criminal acts of You or the Insured Person.
2. Any amount that You or an Insured Person became legally liable to pay as the result of any legal action for damages, including but not limited to legal costs incurred in defence of such action, resulting from alleged negligence or incompetence in extraction from the Life-threatening Situation or alleged negligence in not preventing the involvement of the Insured in such a situation.
3. Any amount in excess of the annual aggregate limit.
4. Any claim arising from an Insured Event in a destination, region or country where prior to the commencement of the Insured Journey warnings had been issued by the Appropriate Authorities or Foreign and Commonwealth Office against all travel to such destination, region or country.
5. Any claims in a destination, region or country where after the commencement of the Insured Journey the local authorities or the Foreign and Commonwealth Office had issued instructions to leave or evacuate the destination, region or country and the Insured Person had not done so in a timely manner.
6. The Insured Person deliberately exposing themselves to danger.
7. Any claim in relation to Hijack, Kidnapping or Political and Natural Disaster Evacuation.



Personal Belongings

Cover

In the event of the Insured Person suffering loss of or damage to their Personal Belongings during an Insured Journey We will indemnify You or an Insured Person in respect of such loss or damage up to the sum insured shown in the Schedule of Benefits.

Extensions

The following Extensions apply if stated as being Covered in The Schedule of Benefits.

Temporary Loss

In the event of an Insured Person being temporarily deprived of their Personal Belongings for at least 4 hours from the time of arrival at their destination during an Insured Journey, We will reimburse You or the Insured Person in respect of emergency and necessary purchases subject to a maximum of £1,000 for any one claim.

Business Samples

In the event of Business Samples in the care, custody or control of the Insured Person being lost or destroyed during an Insured Journey We will indemnify You in respect of such loss or damage up to £1,000.

Business Equipment

In the event of loss of or damage to Business Equipment in the care, custody and control of the Insured Person during an Insured Journey We will indemnify You in respect of such loss up to £2,000.

Electronic Business Equipment

In the event of loss of or damage to Electronic Business Equipment in the care, custody and control of the Insured Person during an Insured Journey We will indemnify You in respect of such loss up to £2,000.

Loss of Keys

In the event of the Insured Person losing their keys to their main permanent residence whilst on an Insured journey We will indemnify the Insured Person for the costs (parts and labour) of replacing the relevant locks up to a maximum of £1,000. We will not arrange for the work to be carried out and will not be liable for any damage caused in the process of replacing the locks.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. The Insured Person shall take all reasonable care in avoiding any loss or damage to Personal Belongings, Business Equipment, Electronic Business Equipment and Business Samples.
2. We shall be entitled in the event of a loss and at Our sole option to replace any article lost (whether wholly or in part) or to reimburse You or the Insured Person not exceeding in any event the insured value thereof. The maximum amount payable in respect of any one item will be £2,000 unless You bear the first 25% of any amount in

8249/8106/8106/B0509PACEN2250031



excess of the £2,000 up to the total sum insured stated in the Schedule of Benefits.

3. In the event of the total loss or destruction of any item of Personal Belongings the basis of settlement shall be on a full replacement value of the item provided that the replacement item is substantially the same but not better than the original item when new and proof of purchase /ownership must be provided for items valued in excess of £700.
4. Total Loss or destruction of Business Equipment, Electronic Business Equipment and Business Samples shall be dealt with on a full replacement value of the item at the date of loss subject to taking into account wear and tear and depreciation.
5. Any amount paid for Temporary Loss will be deducted from any subsequent payment for total loss or subsequent damage where the Temporary Loss becomes Permanent
6. The Insured Person must retain any damaged articles for Our inspection. We shall be entitled to take up and keep possession of any damaged property and to deal with it as salvage following such damage.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. Breakage of articles of a brittle nature unless caused by an accident to the conveyance in which the article is being carried.
2. Loss or damage caused by:
 - a) moth or vermin or gradual deterioration, atmospheric or climatic conditions, wear and tear (this does not apply to the loss of or damage to any item resulting from wear and tear to a clasp setting or other fastening to a carrier or container).
 - b) Mechanical or electrical failure or breakdown.
 - c) Any process of cleaning, dying, restoring, repairing or alteration.
3. Loss of Money, except as specifically included.
4. Loss or damage caused by delay, detention or confiscation by order of any Government or Public Authority.
5. Loss which is not reported to the local police or appropriate authorities within 24 hours of its discovery and a written report obtained (in the case of an airline the Insured Person will need to obtain a property irregularity report).
6. Loss or damage from the effect of pressure in an aircraft cargo hold.
7. Theft or attempted theft of Personal Belongings, Business Samples, Business Equipment or Electronic Business Equipment from any unattended vehicle unless kept out of sight in a locked boot or compartment or in the case of a hatchback or estate car under a purpose built luggage cover. There must be evidence that the vehicle has been broken into.
8. Loss or damage to vehicles, their parts or accessories.
9. Loss or damage to Personal Belongings sent as freight or under a bill of lading.
10. Loss or damage to sports equipment (including winter sports equipment) while in use.

8249/8106/8106/B0509PACEN2250031

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8106



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11. Loss of Business Equipment, Electronic Business Equipment or Business Samples not involving theft by violent and forcible means.
 12. Loss of Business Equipment, Electronic Business Equipment or Business Samples which is insured under any other Insurance.
 13. Any loss in excess of the single item limit stated in the Schedule of Benefits.



Money

Cover

1. Loss or theft of Money.

In the event of the Insured Person suffering the loss or theft of Money:

(a) During the course of an Insured Journey or

(b) During the 120 hours immediately prior to such Insured Journey or the 120 hours immediately following such Insured Journey if obtained for the purposes of undertaking the Insured Journey and in the custody and control of the Insured Person

- we will indemnify you or the Insured Person in respect of such loss up to the sum insured shown in the Schedule of Benefits.

2. Fraudulent Use of Credit Cards.

If You or the Insured Person sustains financial loss as a direct result of a credit, charge, debit or bankers card being lost or stolen during an Insured Journey and it being fraudulently used by someone other than the Insured Person, We will indemnify You or the Insured Person for such loss up to a maximum of £5,000 for any one Insured Journey provided that You or the Insured Person has fully complied with all terms and conditions under which such card has been issued.

Extensions

The following Extensions apply if stated as being Covered in The Schedule of Benefits.

Lost or damaged passport and visa

If the Insured Person sustains loss or damage resulting in any visa and/or passport required for an Insured Journey becoming void during the course of the Insured Journey We will indemnify You on behalf of the Insured Person in respect of fees charged by the appropriate consular visa and/or passport office for any additional travel or accommodation expenses in obtaining any official or temporary travel documents or replacement visa and/or passport up to a maximum of £2,000 for any Insured Journey.

Theft of passport and visa

If an Insured Person sustains theft of any visa and/or passport within 7 days prior to the proposed departure date of an Insured Person We will indemnify You on behalf of the Insured Person for any additional accommodation and/or travel expenses necessarily incurred prior to the proposed departure date by the Insured Person or nominated representative in travelling to and obtaining replacement documents at the nearest issuing office from which a replacement can be obtained subject to a maximum of £1,000 for any claim.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

1. We will not be liable for any claim resulting from:

8249/8106/8106/B0509PACEN2250031

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8106



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- a) Delay, confiscation, errors or omissions in receipts or payment or accountancy or depreciation in value.
 - b) Loss which is not reported to the local police or appropriate authorities within 24 hours of its discovery and a written report obtained (in the case of an airline the Insured Person will need to obtain a property irregularity report).
 2. We will not pay for any loss or theft of a credit, charge, cash, debit or bankers card which results in fraudulent use unless the Insured Person has complied with all the terms and conditions under which the card was issued.
 3. We will not pay for any single loss of coins; bank or currency notes in excess of £2,000 unless You bear the first 25% of any amount in excess of the £2,000 up to the total sum insured stated in the Schedule of Benefits.
 4. We will not pay for theft or attempted theft of Money from any unattended vehicle unless kept out of sight in a locked boot which is separate from the passenger compartment or locked glove compartment. There must be evidence that the vehicle has been broken into.



Cancellation, Curtailment, Replacement or Change of Itinerary

Cover

Cancellation

If You or the Insured Person is forced to cancel an Insured Journey as a direct and necessary result of any cause outside Your or the Insured Person's control We will reimburse You or the Insured Person for all non returnable deposits, advance payments and other charges paid or due to be paid by You or the Insured Person for travel and accommodation in respect of the Insured Journey up to the sum insured shown in the Schedule of Benefits.

Curtailment

If You or the Insured Person is forced to cut short an Insured Journey and return to the Country of Domicile as a direct and necessary result of any cause outside Your or the Insured Person's control We will reimburse You or the Insured Person up to the sum insured shown in the Schedule of Benefits for:

1. All non returnable deposits, advance payments and other charges paid or due to be paid by You or the Insured Person for travel and accommodation in respect of the Insured Journey.
2. The reasonable additional cost of travel and accommodation necessarily incurred to return the Insured Person to their Country of Domicile.

Replacement

When an Insured Journey has been cut short following departure as a direct and necessary result of any cause outside Your or the Insured Person's control We will reimburse You for the additional cost of travel and accommodation necessarily incurred as a direct result of:

1. Returning the Insured Person to their normal Country of Domicile.
2. Sending a replacement to assume the duties of the original Insured Person.

Change of Itinerary

If following departure You or the Insured Person is forced to alter pre-booked travel arrangements in connection with an Insured Journey as a direct and necessary result of any cause outside Your or the Insured Person's control We will reimburse You or the Insured Person for the additional costs of travel and accommodation necessarily incurred to enable the Insured Person to continue that Insured Journey up to the sum insured shown in the Schedule of Benefits.

Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

1. The maximum We will pay in respect of all benefits under this Policy in the aggregate in respect of all Insured Persons per Insured Journey shall not exceed the maximum Aggregate Limit stated in the Schedule of Benefits. If the aggregate amount of benefits exceed this limit the benefit amount payable shall reduce proportionately until the total of all benefits does not exceed the Aggregate Limit.
2. Where reasonable You must obtain prior approval from Our specialist assistance provider before incurring additional travel and accommodation costs when Curtailing

8249/8106/8106/B0509PACEN2250031



Your Insured Journey.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. The Insured Person travelling against or planning to travel against the medical advice of a Qualified Medical Practitioner or for the purpose of obtaining medical treatment.
2. Disinclination to travel or if on an Insured Journey, deciding not to continue.
3. You or the Insured Person's financial circumstances.
4. Redundancy or resignation of an Insured Person or the termination of an Insured Person's contract of employment within 30 days of a pre-booked Insured Journey or once an Insured Journey has started.
5. Any expenses incurred where an Insured Journey is subject to Curtailment, altered, rearranged or an Insured Person must be replaced as a result of redundancy or resignation of the Insured Person or the termination of their contract of employment once the Insured Journey has commenced.
6. The financial failure or omission or neglect of any provider or their agent of transport or accommodation.
7. Withdrawal from service temporarily or permanently of any means of transport on the orders or recommendation of the manufacturer, the Civil Aviation Authority, any port authority or similar body in any country except where on the day the Insured Person is due to depart from their Country of Domicile such Insured Person is prevented from making their Insured Journey due to:
 - a) Aerospace being closed for 24 hours from the date and time of their scheduled departure as shown on their ticket/itinerary; or
 - b) A port or airport they are scheduled to travel from or through being closed for 24 hours from the date and time of their scheduled departure as shown on their ticket/itinerary.

All claims must be supported by documentary evidence that the Insured Person has been able to obtain a refund from their travel and or accommodation provider.

8. Strike, labour dispute or failure of the means of transport other than where the departure of any means of transport on which the Insured Person is booked to travel is delayed by at least 24 hours unless the delay is due to a strike or industrial action which existed or the possibility of which existed and for which advance warning had been given prior to the date on which the Insured Journey was booked.
9. Any Insured Journey cancelled or subject to Curtailment where the Appropriate Authority's advice at the time the trip was booked is 'against all travel to' the chosen destination, region or country.
10. An Insured Person failing to check-in according to the itinerary provided unless the failure was due to strike or industrial action.
11. Any amount in excess of the Aggregate Limit stated in the Schedule of Benefits for all Insured Persons per Insured Journey.

8249/8106/8106/B0509PACEN2250031

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8106



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12. Any amounts where you are legally entitled to be indemnified from any other source.
 13. Any circumstance that could have been reasonably foreseen as giving rise to a claim at the time an Insured Journey was booked.



Travel Delay

Cover

If the outward or homeward departure of an aircraft, train or sea vessel in which the Insured Person has booked to travel is delayed due to strike, industrial action, adverse weather conditions, mechanical breakdown or structural defect affecting that aircraft, train or sea vessel, or if the Insured Person has to travel on a later departure due to the transport provider overbooking, which results in delay for at least 4 hours from the departure time indicated by the carrier. We will pay the Insured Person £50 for the first complete 4 hours delay and £50 for each subsequent 4 hours delay thereafter but not exceeding the amount paid in respect of the fares or £2,000 whichever is the greater.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. The failure of the Insured Person to check in not later than the time indicated by the carriers.
2. The failure of the Insured Person to obtain written confirmation from the carriers or their handling agents of the number of hours delay and the reason for such delay.
3. Withdrawal from service temporarily or otherwise of any aircraft or sea vessel on the orders or recommendation of the manufacturer, the civil aviation authority, any port authority or any similar body in any country except where on the day the Insured Person is due to depart from their Country of Domicile such Insured Person is prevented from making their Insured Journey due to
 - a) Aerospace being closed for 24 hours from the date and time of their scheduled departure as shown on their ticket/itinerary.
 - b) A port or airport they are scheduled to travel from or through being closed for 24 hours from the date and time of their scheduled departure as shown on their ticket/itinerary

All claims must be supported by documentary evidence that the Insured Person has been able to obtain a refund from their travel and or accommodation provider.

4. The failure of the Insured Person to accept alternative equivalent means of transport within the period of delay where this is offered on reasonable terms in lieu of the original mode of conveyance.
5. Strike, labour dispute or industrial action which existed or the possibility of which existed and for which advance warning had been given prior to the date on which the Insured Journey was booked.
6. Delay where compensation is recoverable from the airline or other carrier.
7. Any circumstance that could have been reasonably foreseen as giving rise to a claim at the time an Insured Journey was booked.



Missed Departure

Cover

We will indemnify You for additional accommodation and transport expenses incurred for the Insured Person to reach their final destination caused by their late arrival at any departure point shown on their itinerary to start the Insured Journey caused by:

1. The public transport used by the Insured Person being delayed.
2. The car the Insured Person is travelling in being involved in an accident.
3. The car the Insured Person is travelling in breaking down.

Up to a limit of £1,000 per Insured Journey.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not pay any claim:

1. Unless a police report or Insurer's accident report form has been obtained showing the time and place of the accident.
2. Unless a written repairer's report has been obtained if claiming because the vehicle the Insured Person was travelling in has broken down.
3. If the Insured Person does not do everything possible to get to the International Departure Point from or to their Country of Domicile for the time specified on the travel tickets.
4. Any circumstance that could have been reasonably foreseen as giving rise to a claim for at the time an Insured Journey was booked.



Hijack and Kidnap

Cover

Hijack

In the event of the conveyance in which the Insured Person is travelling being subject to Hijack during an Insured Journey and the Insured Person being detained as a result for a period in excess of 24 hours

- or -

Kidnap

If during an Insured Journey the Insured Person is detained as a result of Kidnap.

We will pay an amount of £300 to You on behalf of the Insured Person for each complete 24 hour period of detention up to a maximum of £20,000 in total for any one occurrence.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not be liable for any claim resulting from:

1. Any claim for an Insured Person within their Country of Domicile if different.
2. Any criminal or fraudulent act by You or the Insured Person.



Personal Liability

Cover

We will indemnify the Insured Person for sums which the Insured Person shall become legally liable to pay as damages and the Insured Person's costs and expenses in respect of Accidental Death or Accidental Bodily Injury to any other person or accidental loss of or damage to material property of any other person.

Conditions

The following conditions apply to this Section.

Please also refer to the Policy Conditions at the front of this Policy document

1. The Insured Person shall give immediate notice to Us of any occurrence for which there may be liability under this Policy and shall provide Us with such particulars and information We may require and shall forward to Us immediately on receipt of every letter, writ or summons, and shall advise Us in writing immediately if the Insured Person has knowledge of any impending prosecution, inquest or fatal inquiry in connection with the said occurrence.
2. The Insured Person must not admit any liability or pay, offer to pay or negotiate any claim without Our written consent.
3. We shall be entitled at Our discretion to take over and conduct in the name of the Insured Person the defence or settlement of any claim and to prosecute at Our own expense and for Our own benefit any claim for indemnity or damages against any other persons and the Insured Person shall give all information and assistance required.
4. We may at any time at Our sole discretion pay to the Insured Person the limit of liability stated for Personal Liability in respect of any occurrence or any lesser sums for which the claim or claims arising from such occurrence can be settled and We shall not be under any further liability in respect of that occurrence except for the payment of costs and expenses of litigation incurred prior to such payment.
5. In the event of a claim or series of claims resulting in a liability of the Insured Person to pay a sum in excess of the limit of liability stated in the Schedule of Benefits Our liability for such costs and expenses shall not exceed an amount being in the same proportion as Our payments to the Insured Person bears to the total payment made by or on behalf of the Insured Person in settlement of the claim or claims.
6. Our liability under this Policy for all damages payable by the Insured Person to any claimant or number of claimants in respect of any one occurrence or all occurrences of a series arising out of one original cause shall not exceed the limit of liability shown in the Schedule of Benefits.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not indemnify the Insured Person in respect of:

8249/8106/8106/B0509PACEN2250031

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8106



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1. Any liability in respect of accidental death or bodily injury sustained by any member of the Insured Person's family or any person who is under a contract of service with You and which arises out of and in the course of their employment by You or liability arising in connection with any business profession or occupation.
2. Liability for loss of or damage to property belonging to or in the custody or control of the Insured Person, their family or of any servant or agent of the Insured Person or liability arising out of the ownership possession or use by the Insured Person of any land or buildings.
3. Liability arising from the ownership possession or use of any mechanically propelled vehicle aircraft hovercraft or watercraft (other than hand propelled watercraft) under the control of the Insured Person.
4. Liability assumed by the Insured Person by agreement unless such liability would have attached to the Insured Person in the absence of such agreement.
5. Liability which is the result of any claim resulting from the transmission of any communicable disease or virus.
6. Liability which is the result of any wilful malicious or unlawful act.
7. Any punitive or exemplary damages.



Legal Expenses

Definitions

The following definitions only apply to this Section. Please also refer to the Policy Definitions at the front of this Policy document.

Appointed Representative

The lawyer or other suitably qualified person appointed by Us to act on the Insured Person's behalf.

Costs and Expenses

1. All reasonable and necessary legal costs incurred by the Appointed Representative in pursuing a claim or Legal Proceeding against a third party who has caused the Accidental Bodily Injury or illness of the Insured Person including other amounts reasonably incurred by the Appointed Representative in appealing or resisting an appeal against the judgment of a court or tribunal or arbitrator.
2. Legal costs which an Insured Person is legally liable to pay following an award of court or tribunal or any legal costs payable following an out of court settlement made in connection with any claim or legal proceedings.

Legal Proceedings

The pursuit of a claim for damages.

Prospect of Success

The probability that an Insured Person will:

1. Recover damages or obtain any other legal remedy which we have agreed to.
2. Make a successful appeal.
3. Make a successful appeal or defence of an appeal.

Prospects of Success will be assessed by Us or an Appointed Representative on Our behalf.

Cover

We will indemnify You on behalf of the Insured Person or their legal representative for Legal Expenses incurred in pursuit of a claim for damages or compensation against a third party who caused the Accident Bodily Injury or illness of the Insured Person during an Insured Journey providing that:

1. The insured incident occurs during the Period of Insurance.
2. Prospects of Success exist for the duration of the claim.
3. In respect of any appeal or defence of an appeal, it has been reported to Us at least 10 working days prior to the deadline for any appeal.
4. The maximum amount We will pay for Costs and Expenses for any one Insured Person in respect of any or all claims arising from one cause is £50,000.
5. An Insured Person or their legal representative reports an insured incident as soon as possible and in any event no later than 180 days after the date the Insured Person knew or should have known about the insured incident.



Conditions

The following conditions apply to this Section. Please also refer to the Policy Conditions at the front of this Policy document.

Claims – an Insured Person’s duty

You must report an insured incident to us as soon as possible and in any event no later than 180 days after the date the Insured Person knew or should have known about the insured incident.

Claims – legal representation

On acceptance of a claim, if appropriate, We will appoint an Appointed Representative:

1. If it is necessary to start court proceedings or there is a conflict of interest, the Insured Person is free to nominate an Appointed Representative by sending to Us the name and address of the suitably qualified person.
2. If We do not agree to the Insured Person’s choice of Appointed Representative, they may choose another suitably qualified person.
3. If there is still a disagreement with regard to the Appointed Representative, We will ask the president of a relevant national law society to choose a suitably qualified person to represent You. We and You must accept such choice.
4. In all other circumstances We will be free to choose an Appointed Representative.
5. An Appointed Representative will be appointed by Us and represent the Insured Person according to Our standard terms of appointment.

Claims – Our rights and Your obligations

We will have direct access to the Appointed Representative who will, upon request, provide Us with any information or opinion on the claim.

The Insured Person must co-operate fully with Us and the Appointed Representative and must keep Us up-to-date with the progress of the claim.

At Our request the Insured Person must give the Appointed Representative any instructions that We require.

The Insured Person must notify Us immediately if anyone offers to settle a claim or makes a payment into court.

If the Insured Person does not accept the recommendation of the Appointed Representative to accept a reasonable offer or payment into court to settle a claim, We may refuse to pay further costs and expenses.

No agreement to settle on the basis of both parties paying their own costs is to be made without Our prior approval.

Discontinuance of a claim

If the Insured Person settles a claim or withdraws a claim without Our prior agreement or does not give suitable instructions to the Appointed Representative or dismisses an



Appointed Representative without Our prior consent the cover We provide will end immediately and We will be entitled to re-claim any Costs and Expenses We have incurred from the Insured Person.

Recoveries

The Insured Person must take every available step to recover Costs and Expenses that We have to pay and must pay Us any Costs and Expenses that are recovered.

Disputes

If any difference arises between Us and the Insured Person in respect of the acceptance, refusal, control or handling of any claim under this section, You can take the steps outlined in Our complaints procedure stated under Our Promise of Service.

Arbitration

You have the right to refer any difference that arises between Us and You in respect of the acceptance, refusal, control or handling of any claim under this section to arbitration which will be decided by counsel chosen jointly by Us and You. If there is a disagreement with regard to the choice of counsel, We will ask the president of a relevant national law society to choose a suitably qualified person. The arbitrator's decision shall be final and binding on both parties. All costs for resolving the difference will be met by the party whom the decision is made against.

The most We will pay

The most We will pay for each Insured Person in respect of any or all claims arising from one cause is £50,000.

Exceptions

The following exceptions apply to this Section. Please also refer to the Policy Exceptions at the front of this Policy document.

We will not pay any claim:

1. If an Insured Person does not keep to the terms, conditions and exceptions under this Section.
2. Where You or the Insured Person are more specifically insured for any amount and You or the Insured Person cannot recover because the insurer of that insurance refuses the claim.
3. Relating to the Insured Person driving a motor vehicle without a valid license and/or insurance.
4. Relating to any illness, death or bodily injury which develops gradually or is not caused by a specific sudden event.
5. Arising from Deep Vein Thrombosis (DVT) or its symptoms that result from travelling by air.
6. In respect of libel or slander.
7. For Costs and Expenses incurred prior to Our written acceptance of a claim.
8. For Costs and Expenses which have been incurred by the Appointed Representative on a contingency fee basis.



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9. For any legal action an Insured Person takes which We have not agreed to or where an Insured Person does anything to hinder Us or the Appointed Representative.
 10. For any claim deliberately or intentionally caused by the Insured Person or as a result of the Insured Person's criminal act.
 11. For any fines, penalties, compensation or damages which the Insured Person is ordered to pay by a court or other authority.
 12. For an application for judicial review.
 13. In respect of a dispute with Us.
 14. For any claims against You or another Insured Person, a member of the Insured Person's family, a tour operator, travel agent, insurer or their agent, or Us.



With this insurance policy you have access to the NGS App Plus.



The app, at a touch of a button, sends all information from the insured's phone to the NGS 24/7/365 Operations Room, along with the GPS location of the device at that time.

The app is designed to speed up transfer of information to NGS Ops, whilst providing generic advice for the following; security, localized incidents and large-scale incidents.

To download the app, please visit www.northcottglobalsolutions.com

Select the green INSURANCE Tab on the top right side of the site, where you will need to register. When filling out the details the fields marked with an Asterisk are the only required ones, however the more information filled in the better as this will be used if assistance is required. It is important you fill in your insurance policy details, existing medical conditions and medication which will help the NGS Operations team help you in your time of need.

Once registered you will be presented with a link & QR code to download the correct IOS/Android version of the app. Follow the instructions to download the app onto your phone.

Once downloaded login to the app with your previously created credentials.

Please ask for a step-by-step guide for more information.

We are able to provide a user guide explaining the download process as well as explaining the available features of the app

Any queries contact InsExec@northcottglobalsolutions.com.

If the app is pressed without an accompanying phone call to NGS Ops, NGS is not required to contact the holder of the app. It is for the insured to officially inform NGS of a request for assistance by a phone call or email.

A request for NGS assistance using the app is to be communicated verbally in line with their policy instruction through the initial phone call that automatically opens up when the app is triggered.

For the avoidance of doubt, the purpose of the app is for information transfer only and not for triggering any kind of emergency response. This information consists of the information that the app holder entered into the device on setup.

For the call to go through successfully, the device will need signal. The email specifying the GPS coordinate requires data coverage in your area. Data on your device will also need to be switched on. There is an option to manually switch to SMS should you not have data coverage or your device is not data enabled; you will need GSM coverage for this.



CORONAVIRUS EXCLUSION

Your Insurance Policy does not / This Insurance does not cover any claim in any way caused by or resulting from:

- a. Coronavirus disease (COVID-19);
- b. Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2);
- c. any mutation or variation of SARS-CoV-2;
- d. any fear or threat of a), b) or c) above.

**LMA5391
04 March 2020**



CYBER EXCLUSION LMA5433

We will not pay:

1. any benefits for bodily injury or illness; or
2. for any loss, damage, liability, cost or expense;

caused deliberately or accidentally by the use of, or inability to use, any application, software or programme in connection with any electronic device (for example a computer, laptop, smartphone, tablet or internet-capable electronic device).

LMA5433
08 July 2020



SANCTION LIMITATION AND EXCLUSION CLAUSE

No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

15/09/10
LMA3100

INFORMATION SECTION

All information as provided to and agreed by the Contract Leader at attachment of risk hereunder and available to all (Re)Insurers.

- 1. BWF Insured Persons - Numbers - 2022 - 2023 Group Travel Renewal.pdf (134KB)
- 2. BWF - Estimated Travel Days - 2022 - 2023 - VF 31032022.pdf (116KB)
- 3. BWF Calendar of Events 2022 - Grade 1 and 2 Level.pdf (656KB)



SECURITY DETAILS

**(RE)INSURER'S
LIABILITY:**

LMA3333

(Re)insurer's liability several not joint

The liability of a (re)insurer under this contract is several and not joint with other (re)insurers party to this contract. A (re)insurer is liable only for the proportion of liability it has underwritten. A (re)insurer is not jointly liable for the proportion of liability underwritten by any other (re)insurer. Nor is a (re)insurer otherwise responsible for any liability of any other (re)insurer that may underwrite this contract.

The proportion of liability under this contract underwritten by a (re)insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown next to its stamp. This is subject always to the provision concerning 'signing' below.

In the case of a Lloyd's syndicate, each member of the syndicate (rather than the syndicate itself) is a (re)insurer. Each member has underwritten a proportion of the total shown for the syndicate (that total itself being the total of the proportions underwritten by all the members of the syndicate taken together). The liability of each member of the syndicate is several and not joint with other members. A member is liable only for that member's proportion. A member is not jointly liable for any other member's proportion. Nor is any member otherwise responsible for any liability of any other (re)insurer that may underwrite this contract. The business address of each member is Lloyd's, One Lime Street, London EC3M 7HA. The identity of each member of a Lloyd's syndicate and their respective proportion may be obtained by writing to Market Services, Lloyd's, at the above address.

Proportion of liability

Unless there is 'signing' (see below), the proportion of liability under this contract underwritten by each (re)insurer (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together) is shown next to its stamp and is referred to as its 'written line'.

Where this contract permits, written lines, or certain written lines, may be adjusted ('signed'). In that case a schedule is to be appended to this contract to show the definitive proportion of liability under this contract underwritten by each (re)insurer (or, in

8249/8106/8106/B0509PACEN2250031

Marsh Limited

8106



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the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of the syndicate taken together). A definitive proportion (or, in the case of a Lloyd's syndicate, the total of the proportions underwritten by all the members of a Lloyd's syndicate taken together) is referred to as a 'signed line'. The signed lines shown in the schedule will prevail over the written lines unless a proven error in calculation has occurred.

Although reference is made at various points in this clause to 'this contract' in the singular, where the circumstances so require this should be read as a reference to contracts in the plural.

Where coverage includes both EEA and Non EEA exposure, the following is applicable to Lloyds Insurance Company(ies) participation only which replaces the LMA3333 above.

SEVERAL LIABILITY NOTICE

The subscribing (re)insurers' obligations under contracts of (re)insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing (re)insurers are not responsible for the subscription of any co-subscribing (re)insurer who for any reason does not satisfy all or part of its obligations.

08/94
LSW1001

ORDER HEREON: 100% of 100%

BASIS OF WRITTEN LINES: Percentage of Whole

SIGNING PROVISIONS:

In the event that the written lines hereon exceed 100% of the order, any lines written 'to stand' will be allocated in full and all other lines will be signed down in equal proportions so that the aggregate signed lines are equal to 100% of the order without further agreement of any of the underwriters.

However:

- a) in the event that the placement of the order is not completed by the commencement date of the period of Insurance then all lines written by that date will be signed in full;



- b) the (Re)Insured may elect for the disproportionate signing of (Re)Insurers' lines, without further specific agreement of (Re)Insurers, providing that any such variation is made prior to the commencement date of the period of (Re)insurance, and that lines written 'To Stand' may not be varied without the documented agreement of those (Re)Insurers;

the signed lines resulting from the application of the above provisions can be varied, before or after the commencement date of the period of Insurance, by the documented agreement of the underwriters and all underwriters whose lines are to be varied. The variation to the contracts will take effect only when all such underwriters have agreed, with the resulting variation in signed lines commencing from the date set out in that agreement.



In relation to the WRITTEN LINES

MODE OF EXECUTION:

This contract and any changes to it may be executed by:

- electronic signature technology employing computer software and a digital signature or digitiser pen pad to capture a person's handwritten signature in such a manner that the signature is unique to the person signing, is under the sole control of the person signing, is capable of verification to authenticate the signature and is linked to the document signed in such a manner that if the data is changed, such signature is invalidated;
- a unique authorisation provided via a secure electronic trading platform
- a timed and dated authorisation provided via an electronic message/system;
- an exchange of facsimile/scanned copies showing the original written ink signature of paper documents;
- an original written ink signature of paper documents (or a true representation of a signature, such as a rubber stamp).;

The use of any one or a combination of these methods of execution shall constitute a legally binding and valid signing of this contract. This contract may be executed in one or more of the above counterparts, each of which, when duly executed, shall be deemed an original.

If OFFSLIP DELETE red content

In a co-(re)insurance placement, following (re)insurers may, but are not obliged to, follow the premium charged by the contract leader.

(Re)Insurers may not seek to guarantee for themselves terms as favourable as those which others subsequently achieve during the placement.

(Re)Insurers confirm and agree that where NCAD (Notice of Cancellation at Anniversary Date) is embedded in their stamp/line this will mean NCED (Notice of Cancellation at Expiry Date). This does not affect the right of the (re)insurer to issue a Notice of Cancellation in accordance with the contract terms.

WRITTEN LINES:

As detailed herein and, where placed electronically either wholly or in part via Placing Platform Limited (PPL), as shown in the PPL SECURITY DETAILS.

If wet stamps (non PPL), and exposure is EEA and Non EEA placements the following headers must be added to each written lines page:

In respect of NON EEA

8249/8106/8106/B0509PACEN2250031

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8106



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CONTRACT ADMINISTRATION AND ADVISORY SECTIONS

8249/8106/8106/B0509PACEN2250031

Marsh Limited

8106



A business of Marsh McLennan

SUBSCRIPTION AGREEMENT SECTION

**CONTRACT
LEADER:**

HDI Global Specialty SE

In respect of placements completed using PPL, the Contract Leader will be indicated in the relevant field in PPL and on the subsequent Security Details.

Wherever the term 'Slip Leader' appears throughout this contract it is amended to read and mean 'Contract Leader'.

BUREAU LEADER:

The first Lloyd's bureau stamp on this contract. The first Company bureau stamp on this contract

In respect of placements completed using PPL, the Bureau Leader will be indicated in the relevant field in PPL and on the subsequent Security Details.

**BASIS OF
AGREEMENT TO
CONTRACT
CHANGES:**

Subject to the GUA (Version 2.0 February 2014) incorporating Non Marine Schedule (Dated October 2001).

Where the "Claims Agreement Parties" heading states "none" the Contract Leader alone is authorised to agree Alterations set out in Parts 1 and 2 of the GUA schedules (as identified herein) on behalf of Other Insurers.

**OTHER
AGREEMENT
PARTIES FOR
CONTRACT
CHANGES, FOR
PART 2 GUA
CHANGES ONLY:**

Unless any other (Re)Insurers are specified below, the Agreement Parties for Part Two changes will be the Contract Leader only.

8249/8106/8106/B0509PACEN2250031

Marsh Limited

8106



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**AGREEMENT
PARTIES FOR
CONTRACT
CHANGES, FOR
THEIR
PROPORTION
ONLY:**

None, unless any (Re)Insurers are specified here.

Where a following (Re)Insurer has charged a different contract premium to that required by the Contract Leader and there is a contract change which

- a) is binding upon the following (Re)Insurers with the agreement of only the Contract Leader (and any additional agreement party if present), and
- b) involves premium adjustment which is not already provided for within the terms of the contract, then the following (Re)Insurers agree to follow the premium adjustment agreed by the Contract Leader in the same ratio as their respective contract premium bears to that of the Contract Leader.

**BASIS OF CLAIMS
AGREEMENT:**

As specified under the CLAIMS AGREEMENT PARTIES and to be managed in accordance with:

- i) The SINGLE CLAIMS AGREEMENT PARTY ARRANGEMENTS - LMA9150 for claims or circumstances assigned as Single Claims Agreement Party Claims (SCAP Claims) or, where it is not applicable, then the following shall apply as appropriate:
- ii) The Lloyd's Claims Scheme (Combined), or as amended or any successor thereto.
- iii) International Underwriting Association of London IUA claims agreement practices.

For non-bureau (re)insurers only, the contract leader only and to be binding for non-bureau (re)insurers.



**CLAIMS
AGREEMENT
PARTIES:**

- A. Claims falling within the scope of the LMA9150 to be agreed by Contract Leader only on behalf of all (re)insurers subscribing (1) to this Contract on the same contractual terms (other than premium and brokerage) and (2) to these Arrangements.

For the purposes of calculating the Threshold Amount, the sterling rate on the date that a financial value of the claim is first established by the Contract Leader shall be used and the rate of exchange shall be the Bank of England spot rate for the purchase of sterling at the time of the deemed conversion.

- B. For all other claims:

- i) For Lloyd's syndicates

The leading Lloyd's syndicate and, where required by the applicable Lloyd's Claims Scheme, the second Lloyd's syndicate.

Where applicable, the second Lloyd's syndicate is deemed to be the first syndicate stamp to appear after the leading Lloyd's syndicate. For PPL the 2nd claims agreement party will be

- ii) Those companies acting in accordance with the IUA claims agreement practices, excepting those that may have opted out via iii below.

The first IUA company and, where required by IUA practices, the second IUA company.

- iii) Those companies that have specifically elected to agree claims in respect of their own participation.

- iv) Notwithstanding anything contained in the above to the contrary, any ex gratia payments to be agreed by each (re)insurer for their own participation.



CLAIMS**ADMINISTRATION:**

Marsh Limited and (re)insurers agree that any claims hereunder (including any claims related costs/fees) that are in scope and supported by Electronic Claims File (ECF) will be notified and administered via ECF with any payment(s) processed via CLASS, unless both parties agree to do otherwise.

Where claims or circumstances are not administered via ECF, notification, administration and payment(s) will be email or paper file.

Where a Lloyd's syndicate or IUA company is not an agreement party to the claim or circumstance (per CLAIMS AGREEMENT PARTIES A. above), they agree to accept correct ECF sequences for administrative purposes to ensure information is circulated to all subscribing parties.

Claims, or any element thereof, settled in a currency for which Marsh Limited do not hold a banking account will be agreed using a notional rate of exchange which is subject to adjustment. Any difference greater than GBP1,000 per payment or in the aggregate, to be paid by or refunded to (re)insurers as appropriate.

Extension of time to file a proof of loss to be agreed

- a) if the contract leader is a non-Lloyd's (re)insurer, by the contract leader and Lloyd's Claims Agreement Parties only;
- b) if the contract leader is a Lloyd's (re)insurer, by the Lloyd's Claims Agreement Parties only.

Notwithstanding any contrary provisions concerning notification contained in applicable contract documentation to which this agreement applies and in the absence of a condition specifically nominating a party to whom notice must be given (other than (re)insurers) and provided that notification otherwise fully satisfies policy conditions then the (re)insured will be regarded as having complied with contract notification provisions when Marsh Limited or its subsidiary or successor entities receives notification by email, facsimile or post.

**EXPERT FEES
COLLECTION:**

Expert fees payable by (re)insurers for services performed on their behalf to be collected by the expert or their appointed fee collection service provider.



**RULES AND
EXTENT OF ANY
OTHER
DELEGATED
CLAIMS
AUTHORITY:**

None, unless otherwise specified here by any other claims agreement parties shown above.

**SETTLEMENT DUE
DATE:**

29 August 2022

**BUREAU(X)
ARRANGEMENTS:**

Premium payment requirements deemed met if premium/accounts are correctly released for settlement to XIS in line with bureaux procedures on or before the Settlement Due Date (SDD).

Where applicable, (Re)Insurers agree that second and subsequent premium instalments are to be taken down as Additional Premiums.

Where a Premium Payment Condition (PPC) or Premium Payment Warranty (PPW) requires payment by a date which is later than the SDD or, in the case of LSW3000 the Premium is paid to Insurers; the SDD is deemed to have been amended and shall be the same as the PPC or PPW due date or, in the case of LSW3000 the date the Premium is paid to Insurers.

Where any SDD, PPW or PPC due date falls on a weekend or public holiday, presentation to XIS or (Re)Insurers hereon as applicable on the next working day will be deemed to be in compliance with such SDD, PPW or PPC.

A PPW, PPC or SDD shall not be deemed to be breached if the original presentation of signing slip and/or premium advice note to a London Market Bureau is in time, but subsequently amendments to the signing slip and/or premium advice note are notified as required to enable it to be processed and the premium signing completed. In such event, Marsh Limited will have an additional period of seven days from such notification to complete the amendments and to resubmit the signing slip and/or premium advice note to the Bureau.

De-linked accounts to be presented by Marsh Limited to XIS.



Bureau (Re)Insurers agree to allow XIS not to “group” associated de-linked signings. Each individual de-linked signing may be released for settlement to XIS independently of any other associated items.

Bureau (Re)Insurers agree to accept an interim For Declaration Only (FDO) signing.

In respect of non-settlement currencies:
XIS to accept settlement of premium in Pounds Sterling (GBP) converted at the rate of exchange at the date of receipt of payment by Marsh Limited. However, in the event Marsh Limited are paid in Pounds Sterling (GBP), U.S. Dollars (USD) or EUROS (EUR) then settlement will be made via XIS in GBP, USD or EUR as received by Marsh Limited.

In respect of electronically placed lines via PPL. In the event the Settlement Due Date and/or the Allocation of Premium to Coding and/or Year of Account shown in the PPL Security Details differ from those shown in this MRC, the information set forth in this MRC shall take precedence.

**PLACING
PLATFORM
LIMITED (PPL)
ARRANGEMENTS:**

(Re)Insurers instruct Xchanging to accept tax schedules and/or any documents in the PPL data pack, without sight of agreement from (re)insurers on the understanding that Marsh Limited has obtained agreement thereto from the applicable (re)insurers via the PPL platform.

**NON-BUREAUX
ARRANGEMENTS:**

Where any Premium Payment Warranty (PPW) or Premium Payment Condition (PPC) due date falls on a weekend or public holiday, payment of premium by telegraphic transfer or any other relevant electronic settlement method on the next working day will be deemed to be in compliance with such PPW or PPC.

Where (Re)Insurers have agreed to regular (weekly/ monthly/ quarterly) accounting the Premium Payment Warranty (PPW) or Premium Payment Condition (PPC) due date shall be overridden by the accounting agreement.



**NOTICE OF
CANCELLATION
PROVISIONS:**

Where (re)insurers have the right to give notice of cancellation, in accordance with the provisions of the contract, then:

To the extent provided by the contract, the Contract Leader is authorised to issue such notice on behalf of all participating (re)insurers; and (optionally)

Any (re)insurer may issue such notice in respect of its own participation.

The content and format of any such notice should be in accordance with the 'Notice of Cancellation' (NOC) standard, as published by the London Market Group (LMG), or their successor body, on behalf of London Market Associations and participants. However failure to comply with this standard will not affect the validity of the notice given.

The notice shall be provided to Marsh Limited by an email to Rahoul.Hore@Marsh.com

Failure to comply with this delivery requirement will make the notice null and void. Satisfactory delivery of the notice will cause it to be effective irrespective of whether Marsh Limited has acknowledged receipt.



FISCAL AND REGULATORY SECTION**TAX PAYABLE BY
INSURER(S):**

None.

**COUNTRY OF
ORIGIN:**

Malaysia

**REGULATORY RISK
LOCATION:**

Non EEA 100%

**OVERSEAS
BROKER:**Marsh Insurance Brokers (Malaysia) Sdn Bhd
Unit B-9-1, Level 9
Block B, Menara UOA Bangsar
No 5, Jalan Bangsar Utama 1
Kuala Lumpur
59000
Malaysia**US
CLASSIFICATION:**

Non-Regulated – Non U.S. Risk.

**ALLOCATION OF
PREMIUM TO
CODING:**

KS – 100%

**REGULATORY
CLIENT
CLASSIFICATION:**

Commercial - Other

8249/8106/8106/B0509PACEN2250031

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8106



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SECURITY DETAILS

REFERENCES

UMR (Unique Market Reference): B0509PACEN2250031

Date contract printed to PDF: 17:24 11 July 2022

SIGNED UNDERWRITERS

HDI Global Specialty SE

HDI

LIRMA **XIS**
H4509

100.000000%
Written

C	A	0	6	9	3	5	2	2	0	0	0			
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100.000000%
Signed

13:59 11 July 2022

HDI Global Specialty SE, UK branch - Personal Accident, LIRMA H4509

Maroula Leon

Bound as Slip Leader, XIS Leader

SETTLEMENT INFORMATION

Terms of Settlement

Settlement Due Date: 29 August 2022

Instalment Premium Period of Credit: 0 day(s)

Adjustment Premium Period of Credit: 0 day(s)

HDI Global Specialty SE, UK branch - Personal Accident, LIRMA H4509

Bureau Leader and XIS Leader

Maroula Leon
