

Personal Accident Policy Wording - Basic

Your Policy

This policy is administered by your selling broker, arranged by Strategic Insurance Services Limited & underwritten by The Salvation Army General Insurance Corporation Limited. Registered in England No. 00101071. Registered office: Saxon House, 27 Duke Street, Chelmsford, Essex, CM1 1HT

Your selling broker is authorised and regulated by the Financial Conduct Authority.

The Salvation Army General Insurance Corporation Limited is authorised and regulated by the Financial Conduct Authority. Firm Reference No. 202327. You can check Our details on the Financial Services Register <https://register.fca.org.uk/>.

Contacting us

To Make a Claim	0203 551 6633 or email motor.quotes@strategicins.co.uk
Customer Services	Please contact your selling broker
To make a complaint	Please contact your selling broker

Important Information

In return for the payment of **your** premium **we** will provide the insurance cover detailed in **your** **policy schedule** and this policy document, subject to the terms and conditions, and exclusions shown in this document for all claims occurring during the **period of insurance**.

Your policy is valid for the **period of insurance** as shown on **your** **policy schedule**.

Please refer to the policy documents provided to **you** when the policy was purchased or amended, for details of the type and level of cover **your** policy provides.

Information you have provided

You must take reasonable care to provide accurate and complete answers to all the questions **you** are asked when **you** take out, make changes to, or renew this policy.

You must notify **your administrator** as soon as possible if any of the information in **your** policy documents is incorrect or if **you** wish to make a change to **your** policy.

If **you** do not provide accurate and complete answers to the questions **you** are asked, or **you** fail to notify **your administrator** of any incorrect information or changes **you** wish to make, **your** policy may not operate in the event of a claim. **We** may not pay any claim in full or **your** policy could be invalid.

Changes that may affect your cover

You must tell **us** as soon as possible about any changes to the information **you** provided when **you** purchased or renewed this policy, for example:

- If you move to a new house
- If you change your job or employer

This is not an exhaustive list and any changes you tell us about may affect your cover or result in a change to your premium. If **you** are unsure whether a change may affect **your** cover, please contact **us**.

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Cancellation by Us

We may at any time cancel any insurance policy by giving 14 days' notice in writing, where there is a valid reason for doing so. A cancellation letter will be sent to **you** at **your** last known address. Valid reasons may include but are not limited to:

- a) Non-payment of premium
- b) Threatening and abusive behaviour
- c) Failure to provide documents
- d) Non-compliance with policy terms and conditions.

If we cancel **your** policy, we will provide a refund of **your** premiums less a charge for the cover already provided, unless the reason for cancellation relates to fraud, which is detailed on page 8.

Definitions

The words or expressions detailed in this policy have the following meaning wherever they appear in bold:

- **Accident/Accidental** means a sudden and unexpected event which happens by chance and causes **bodily injury** or **death**, including **assault**, during the **period of insurance**.
- **Administrator** means Your selling broker
- **Bodily injury** means a physical injury listed in Table 1 that is incurred during the **period of insurance**, resulting solely and independently from an **accident** which within 12 months from the date of the **accident** results in the **insured person's** death or disability.
- **Burns** means full thickness burns or **burns** (third degree) covering more than 10% of the body surface.
- **Doctor** A medical specialist who is a member of an appropriate Royal College and recognised by that College as a medical specialist. The consultant must be registered and practising in the UK and must not be an **insured person** or a relative or employer of an **insured person**.
- **Hand(s)** means all the **fingers** and the **thumb** of a **hand**.
- **Hospital** means a lawfully registered establishment which has accommodation for residential patients with facilities for diagnosis and major surgery and which provides a 24 hour service by registered nurses. It does not include convalescent, self-care or rest homes, or a department in a hospital which has the role of convalescent or rest home.
- **Hospital cash benefit** If the **insured person** is admitted to a **hospital** following **bodily injury** or if their condition is treated by a **doctor** or nurse in an accident & emergency department, we will pay the sum shown in Table 1 for each 24 hour stay in **hospital**.
- **Insured person**
 - Category 1 **You** and **your** spouse (including common law and or civil law partner) and any **named driver**
 - Category 2 Any passenger travelling in any **vehicle** driven by **you** which **you** are insured to drive under the **motor insurance policy**
- **Limb(s)** means arm(s) or leg(s) at or above the wrist or ankle (excluding **hands** and **feet**).
- **Loss of hearing or speech** means the total, permanent and irrecoverable loss of hearing (in both ears) or speech.
- **Loss of sight** means complete and irrecoverable loss of sight in one or both eyes.
- **Loss of speech** means the total, permanent and irrecoverable loss of speech.
- **Loss** (in relation to limbs, **hands**, **thumbs**, fingers, feet, toes and internal organs) means the complete permanent and irrecoverable **loss** of use or **loss** by physical separation.
- **Maximum policy benefit** means £5,000.
- **Motor insurance policy** means the motor insurance policy issued to **you** by Your selling broker.

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- **Named driver** means any driver named on **your motor insurance policy**
- **Permanent total disablement** means total disablement from engaging in or attending to any occupation whatsoever for at least 12 months from the date of **bodily injury**, and at the end of that time being beyond hope of improvement.
- **Policy period.** This insurance will run concurrently with **your motor insurance policy** for a maximum of 12 months. If this policy was purchased after the start date of the **motor insurance**, cover starts from the purchase date of this policy.
- **Start date** means the date this policy was added to the associated **motor insurance policy**, until its renewal or cancellation, up to a maximum of 12 months.
- **Thumb(s)** means the entire **thumb** or **thumbs**.
- **Toe(s)** means the entire **toe**.
- **UK** means the United Kingdom, Channel Islands and Isle of Man.
- **Vehicle** means a private motor vehicle
- **We/us/our** means The Salvation Army General Insurance Corporation Limited.
- **You/Your** means the person named as the policyholder in the **motor insurance policy**.

Eligibility

The **insured person** is eligible for this insurance cover if:

- **You** have a valid **motor insurance** policy from Your selling broker.
- **You** are a **UK** resident with a permanent **UK** address.
- **You** are aged 17 or over and **You** are under the age of 81 at the **start date**.
- The premium has been paid along with the appropriate insurance premium tax.

What is covered

Within the **UK** and the **period of insurance**, we will pay the amount shown below if due to an insured incident an **insured person** suffers **bodily injury** or death following an **accident** or an incident of **road rage**.

Insured incidents:

1. An **accident** which occurs whilst a Category 1 **insured person** is driving any **vehicle** which they are insured to drive under the **motor insurance policy**, or whilst they are a passenger in any **vehicle**, including getting into or out of such a vehicle.
2. An **accident** which occurs whilst a Category 2 **insured person** is travelling in, getting into or out of, any **vehicle** driven by **you** which **you** are insured to drive under the **motor insurance policy**.

Table 1

	Accidental bodily injury resulting in:	Standard cover
1	Death	£5,000
2	Permanent total disablement	£5,000
3	Permanent total loss of sight in one eye	£1,500
	Permanent total loss of sight in both eyes	£5,000
4	Permanent total loss of speech	£2,500

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5	Permanent total loss of hearing in both ears	£2,500
	Permanent total loss of hearing in one ear	£1,000
6	Permanent loss of use of one limb	£1,500
	Permanent loss of use of two limbs	£2,500

What we will not pay

1. We will not pay more than the **maximum policy benefit** in any one **policy period**.
2. More than one claim under each cover from the consequences of one **Accident** to any one **Insured Person**.
3. We will not pay for more than one benefit under each section.
4. **We will not cover any bodily injury** which the **insured person** suffered from in the 12 month period immediately prior to the **start date** which:
 - a) The **insured person** knew about, or should reasonably have known about or
 - b) The **insured person** had seen or arranged to see a **doctor** about.
5. Where the **insured person** is committing, or attempting to commit suicide or intentional self-injury or deliberate exposure to exceptional danger except in an attempt to save a human life
6. Where the **insured person** is over the **UK** prescribed limit of alcohol, or is unfit to drive due to being under the influence of drugs, whether prescribed or otherwise.
7. Any claims arising from or relating to physical or mental conditions or disabilities which the **insured person** suffered from prior to the **accident**;
8. More than one claim for each insured event as a result of the same **accident**;
9. Any claims as a result of the use of **your vehicle** for hire or reward, racing, competition, trials, track days, speed testing or for any purpose in connection with the motor trade, haulage or courier services, minibus or professional driving instruction;
10. Any claims as a result of a provoked assault or fighting (except in bona fide self-defence);
11. Any claims as a result of matrimonial or family dispute.
12. Any claims as a consequence, howsoever caused, including but not limited to Computer Virus in Electronic Data being lost, destroyed, distorted, altered, or otherwise corrupted. For the purposes of this policy, Electronic Data shall mean facts, concepts and information stored to form useable data for communications, interpretations, or processing by electronic or electromechanical data processing or other electronically controlled hardware, software and other coded instructions for the processing and manipulation of data, or the direction and manipulation of such hardware. For the purposes of this policy, Computer Virus shall mean a set of corrupting, harmful, or otherwise unauthorised instructions or code, whether these have been introduced maliciously or otherwise, and multiply themselves through a computer system or network of whatsoever nature.
13. Any claims as a direct or indirect consequence of war, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation or requisition or destruction of or damage to property by or under the order of any government or public or local authority.
14. Any claims as a direct or indirect consequence of terrorism as defined by the Terrorism Act 2000 and any amending or substituting legislation.
15. Any claims as a direct or indirect consequence of:
 - a) irradiation or contamination by Nuclear Material; or
 - b) the radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter; or

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- c) any device or weapon employing atomic or nuclear fission and / or fusion or other like reaction or radioactive force or matter.

General Conditions

1. Benefit will be paid upon receipt of supporting medical evidence.
2. No benefit will be paid unless **you** are admitted into hospital or **your** condition is treated by a **doctor** or nurse in an Accident & Emergency department. Payment will only be made once we have received a completed claim form and evidence of this assessment and/or admittance which must be sent to **us** at **your** expense.
3. Claims
When a claim or possible claim occurs, **you** or an **insured person** must notify the claims department, in writing, as soon as possible. **You** or the **insured person** must seek and follow advice from a registered **Doctor** and have any medical examination that the claims department requests. If an **insured person** dies, the claims department will be entitled to ask for, at **our** expense, a post-mortem examination. **You** or any **insured person** must provide (at **your** own expense) any documents, information and evidence the claims department requires.

Please see section 'Making a Claim' on Page 8 for contact details.

4. Fraudulent Claims

If a claim is made which **you** or an **insured person**, or anyone acting on **your** or their behalf, knows is false, fraudulent or exaggerated, **we** will not pay the claim and cover under this insurance will end without any return of premium. Any claim paid to **you** or an **insured person** will need to be repaid to **us**. In these circumstances, **we** may inform the police or other insurers.

5. Aggravated Physical Disability

If the consequence of an injury is aggravated by a physical disability or condition of an **insured person** which existed before the **accident** occurred, the amount of any compensation payable under this insurance in respect of the consequences of the **accident** shall be the amount which is considered would have been payable if such consequences had not been so aggravated.

6. Cooling Off Period

You may cancel this policy, without giving reason, by sending written notice to the **administrator**, returning the insurance documents within 14 days of inception or within 14 days of **you** receiving the insurance documents (if later). **Your** premium will be refunded in full provided a claim has not been made against this policy. If a claim has been made against this policy, no refund of premium will be provided.

7. Cancellation

If **you** decide to cancel this policy after the cooling off period, please return it to the **administrator**. If **you** wish to cancel **your** policy after 14 days the premium will not be refunded.

The **insurer** shall not be bound to accept renewal of any insurance and may at any time cancel any insurance document by giving 14 days notice in writing where there is a valid reason for doing so. A cancellation letter will be sent to **you** at **your** last known address. Valid reasons may include but are not limited to:

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- a) Where **We** reasonably suspect fraud
- b) Non-payment of premium
- c) Threatening and abusive behaviour
- d) Non-compliance with policy terms & conditions
- e) You have not taken reasonable care to provide complete and accurate answers to the questions **We** ask.

If **we** cancel the policy and/or any additional covers **you** will receive a refund of any premiums **you** have paid for the cancelled cover, less a proportionate deduction for the time **we** have provided cover.

Where **our** investigations provide evidence of fraud or misrepresentation, **we** may cancel the policy immediately and backdate the cancellation to the date of the fraud or the date when **you** provided **your administrator** with incomplete or inaccurate information. This may result in **your** policy being cancelled from the date **you** originally took it out and **we** will be entitled to keep the premium.

If **your** policy is cancelled because of fraud or misrepresentation, this may affect **your** eligibility for insurance with **us**, as well as other insurers, in the future.

8. Notification

The Police must be notified immediately following any event likely to give rise to a claim under this insurance.

9. Governing Law

Unless some other law is agreed in writing, this policy is governed by English law. If there is a dispute, it will only be dealt with in the courts of England or of the country within the United Kingdom in which **your** main residence is situated.

10. Changes to your circumstances

You must contact the **administrator** immediately in the event that there is a change to **your** circumstances:

- **You** change **your** address;
- **You** are convicted of a criminal offence or receive a police caution;
- **You** have insurance refused, declined, cancelled or terms applied by another insurance provider;
- **Your motor insurance policy** is cancelled.

Your responsibility

You must take reasonable care to:

- a) supply accurate and complete answers to all the questions **your administrator** may ask as part of **your** application for cover under the policy
- b) to make sure that all information supplied as part of **your** application for cover is true and correct
- c) tell **your administrator** of any changes to the answers **you** have given as soon as possible.

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You must take reasonable care to provide information that is accurate and complete answers to the questions **your administrator** ask when **you** take out, make changes to and renew **your** policy. If any information **you** provide is not accurate and complete, this may mean **your** policy is invalid and that it does not operate in the event of a claim or **we** may not pay any claim in full.

If **you** become aware that information **you** have given **your administrator** is inaccurate or has changed, **you** must inform them as soon as possible.

Fraud

You must not act in a fraudulent way. If **you** or anyone acting for **you**:

- fails to reveal or hides a fact likely to influence whether **we** accept **your** proposal, **your** renewal, or any adjustment to **your** policy;
- fails to reveal or hides a fact likely to influence the cover **we** provide;
- makes a statement to **us** or anyone acting on our behalf, knowing the statement to be false;
- sends **us** or anyone acting on our behalf a document, knowing the document to be forged or false;
- makes a claim under the policy, knowing the claim to be false or fraudulent in any way;
- makes a claim for any loss or damage **you** caused deliberately or with **your** knowledge; or
- If **your** claim is in any way dishonest or exaggerated,

We will not pay any benefit under this policy or return any premium to **you** and **we** may cancel **your** policy immediately and backdate the cancellation to the date of the fraudulent claim. **We** may also take legal action against **you** and inform the appropriate authorities.

Making a Claim:

If **You** wish to make a claim please contact:

Strategic Insurance Services Limited
Motor PA Claims
Delmon House
36 - 38 Church Road
Burgess Hill
West Sussex
RH15 9AE
Email: motor.quotes@strategicins.co.uk

In all correspondence please state that **your** insurance is provided by Strategic Insurance Services Limited and quote scheme reference Motor PA.

Strategic Insurance Services Limited is an agent of The Salvation Army General Insurance Corporation Limited and in the matters of a claim act on behalf of The Salvation Army General Insurance Corporation Limited.

Complaints

It is the intention to give **you** the best possible service but if **you** do have any questions or concerns about this insurance or the handling of a claim **you** should follow the Complaints Procedure below:

Complaints regarding:

SALE OF THE POLICY

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Please contact Your selling broker.

CLAIMS

Strategic Insurance Services Limited
Motor PA Claims
Delmon House
36 - 38 Church Road
Burgess Hill
West Sussex
RH15 9AE
Email: motor.quotes@strategicins.co.uk

In all correspondence please state that **your** insurance is provided by Strategic Insurance Services Limited and quote scheme reference Motor PA.

If we have not completed our investigations into **your** complaint within 8 weeks of receiving **your** complaint or if **you** are not happy with **our** Final Response, **you** may ask the Financial Ombudsman Service (FOS) to look at **your** complaint. If **you** decide to contact them, **you** should do so within 6 months of receiving **our** Final Response Letter.

For more information regarding the scope of the Financial Ombudsman Service please refer to www.financial-ombudsman.org.uk.

The Financial Ombudsman Service,
Exchange Tower, London E14 9SR
Tel: 0800 023 4567

Get in touch on line: <https://www.financial-ombudsman.org.uk/contact-us/complain-online>

The above complaints procedure is in addition to **your** statutory rights as a consumer. For further information about **your** statutory rights contact **your** local authority Trading Standards Service or Citizens Advice Bureau.

If **you** have purchased the insurance policy online, **you** may also raise **your** complaint via the EU Online Dispute Resolution Portal at <http://ec.europa.eu/consumers/odr/>. This will forward **your** complaint to the correct Alternative Dispute Resolution scheme. For insurance complaints in the UK this is the Financial Ombudsman Service. However, this may be a slower route for handling **your** complaint than if **you** contact the Financial Ombudsman Service directly.

Compensation Scheme

The Financial Services Compensation Scheme (FSCS) was set up to protect customers should an insurer go out of business and be unable to meet its liabilities or pay Claims.

If one of the insurers on this Policy fails in this way, You may be entitled to compensation from FSCS.

The FSCS protection for insurance Claims is 90% of the Claim with no upper limit in respect of UK insurance policies issued by a UK authorised insurer. This Policy and the insurers involved in providing the cover meet these requirements.

For further information, contact the:

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Financial Services Compensations Scheme
10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU
Telephone: 0800 678 1100 or 0207 741 4100, Fax: 020 7892 7301
Email: enquiries@fscs.co.uk Website: www.fscs.org.uk

Data Protection & Privacy Policy

At SAGIC we recognise our responsibility to treat your personal information with care and to comply with all relevant legislation, in particular the Data Protection Act 2018 and the EU General Data Protection Regulation (GDPR). This notice covers our requirement to provide You with information on how and why We use Your personal data and of Your rights under GDPR.

We have provided You with a quotation and/or administer Your insurance policy and are classed as the “data controller” which means We process Your data. Your data may be passed to other parties, including Reinsurers & Loss Adjuster for the administration of claims. These parties could also be a data controller and where necessary will issue their own Data Protection & Privacy Policies.

Personal Information & Legal Basis

We are required to have a lawful basis (as defined in GDPR) in order to process Your personal data, the reasons We collect personal data and the relevant bases which We use are show in the table below:-

Why we collect your data	Lawful basis	Information collected
Provide You with a quotation for Insurance.	Necessary for the performance of an insurance contract.	- Basic personal details such as name, address, email, telephone, date of birth.
Arrange and administer Your policy if You buy one through us.	Necessary for the performance of an insurance contract.	- Information on your insurance requirements, including details about your home/property.
To notify You of changes in our service.	Our legitimate interests	- Your insurance history, including claims data and other insurance policies you have had.
Marketing	Your explicit consent - in accordance with preference you have expressed	- Sensitive personal information, including previous unspent criminal convictions
Statistical analysis.	Our legitimate interests - to refine and enhance the products and pricing which we can offer.	- Your marketing preferences
To provide improved quality and training for SAGIC staff.	Our Legal and Regulatory obligations.	- Payment details to enable payment of insurance premium.
Prevent, detect and investigate crime, including fraud and money laundering, and analyse and manage other commercial risks.	Our Legal and Regulatory obligations.	
Resolve complaints, and handle requests for data access or correction.	Our Legal and Regulatory obligations.	
Comply with applicable laws and regulatory obligations, such as those relating to anti-money laundering and anti-terrorism.	Our Legal and Regulatory obligations.	

Some of the personal information We ask You to provide may be sensitive (special category) as defined in GDPR, e.g. You may have to give us information about Your medical history, criminal convictions and driving offences. We are allowed under GDPR to collect such information for specified “insurance

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purposes” without Your specific consent but it will only be used for the purposes set out above. If You give us information about another person, in doing so You confirm that they have given You permission to provide it to Us and that We may use their personal data in the same way as Your own as set out in this notice.

Where the lawful basis of processing your data is ‘Your explicit consent’ then this consent can be withdrawn at any time by contacting Us.

Use of Cookies

A cookie is a small file which asks permission to be placed on your computer's hard drive. Once you agree, the file is added and the cookie helps analyse web traffic or lets you know when you visit a particular site. Cookies allow web applications to respond to you as an individual. The web application can tailor its operations to your needs, likes and dislikes by gathering and remembering information about your preferences.

We use cookies to identify which pages are being used. This helps us analyse data about webpage traffic and improve our website in order to tailor it to customer needs. We only use this information for statistical analysis purposes and then the data is removed from the system.

Overall, cookies help us provide you with a better website by enabling us to monitor which pages you find useful and which you do not. A cookie in no way gives us access to your computer or any information about you, other than the data you choose to share with us.

You can choose to accept or decline cookies. Most web browsers automatically accept cookies, but you can usually modify your browser setting to decline cookies if you prefer. This may prevent you from taking full advantage of the website.

Data Security

SAGIC is committed to protecting the security of Your personal information. We use a variety of security technologies and procedures to help protect Your personal information from unauthorised access, use, or disclosure.

Disclosure of your Personal Information

As a necessary part of providing You with the services described above We may need to disclose Your personal data to other third parties. These include: Computer bureaux/Software Houses, Insurers, other Insurance Intermediaries, Loss Adjusters, Insurance Industry databases, Government databases, Regulatory authorities and the Police/other law enforcement bodies and this will be to assist with fraud prevention and detection.

Retention Period

Your data will not be retained for longer than is necessary and will be managed in accordance with our data retention policy. In most cases the period will be for a maximum of 7 years following the expiry of an insurance contract unless we are required to retain the data for a longer period due to business, legal or regulatory requirements.

International transfers of data

We will ensure that we do not transfer Your personal data to destinations outside the European Economic Area (EEA).

Your Rights

Under GDPR You have the following rights in relation to Our processing of Your personal data:-

1. The right to be informed about how we use your personal data (This Privacy Notice);
2. The right to see a copy of the personal information We hold about You;
3. The right to have personal information rectified if inaccurate or incomplete;

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4. The right of erasure of Your personal information where there is no compelling reason for its continued processing;
5. The right to restrict processing in certain circumstances, e.g. if its accuracy is being contested;
6. The right to data portability which, subject to certain conditions, allows You to obtain and reuse Your personal data across different services;
7. The right to object to certain processing including for the purposes of direct marketing;
8. Rights to information in relation to automated decision making and profiling.

Contact us

For further information on this Privacy Notice, to access Your personal information or to exercise any of Your other rights, please contact

The Data Protection Officer,
The Salvation Army General Insurance Corporation Limited,
Saxon House, 27 Duke Street, Chelmsford, Essex, CM1 1HT Email:- DPO@sagic.co.uk
Telephone:- 0300 030 1865

If You have a complaint about how We use Your personal information please contact us at the address above. You also have the right to lodge a complaint with the Information Commissioner's office at any time.