



Barclays
Accidental Death Plan

Policy

Document

1) Introduction

This document sets out the terms of **your** Barclays Accidental Death Plan; please read it carefully. It tells **you** what is covered and what is not, what to do if **you** want to make a claim and who to call if **you** need help.

We/us/our refers to Chartis Europe Limited.

You should familiarise **yourself** with the cover provided by this policy and all the terms, conditions and exclusions that apply. **You** should read the policy in conjunction with **your schedule**.

If **you** have any questions about **your** policy or wish to make **any** changes, please call Barclays Customer Services on 0845 677 0089*. Lines are open between 8.30 am and 5.30 pm Monday to Friday. **We** record all telephone calls for security and quality control purposes.

2) Policy

This policy, together with the **schedule**, the application and any endorsements, is evidence of the contract between the **policyholder** and **us**. **We** agree to provide the insurance cover described in this policy provided the premium is paid when due and **we** agree to accept it.

3) Scope of insurance

If **you** have an **accident** after the **start date** and suffer **bodily injury** which solely and independently of any other cause and within 24 months of the date of the **accident** causes death **we** will pay the amount shown in the **schedule**.

4) Table of Benefits

see Definitions and Limitations section for further details	Gold Cover	Platinum Cover
Accidental Death	£75,000	£100,000
If you suffer a bodily injury whilst on a motorcycle all benefits above are halved. Children's benefit is £7,500, irrespective of the level of cover chosen.		

5) Definitions

We use certain words in this policy which have a **specific** meaning. They have this specific meaning wherever they appear in the policy or **schedule** and are shown in **bold**.

Accident

A sudden, unexpected and specific event, external to the body, which occurs at an identifiable time and place.

Bodily injury

Identifiable physical injury to an **insured person's** body which is caused directly and solely by an **accident**, is not intentionally self-inflicted and does not result from sickness or disease.

Child or children

A person who is under 18 years of age or under 23 years of age if in full time education.

Insured persons

The person or people shown on the **schedule**.

Motorcycle

A two wheeled motor driven vehicle.

Policyholder

The person who has paid for this policy and is shown on the **schedule**.

Schedule

The document showing details of the cover and which should be read with this policy.

Start date

The start date of the policy that is shown on the **schedule**.

United Kingdom

England, Scotland, Wales and Northern Ireland.

War

Military action, either between nations or resulting from civil war or revolution.

We, us or our

Chartis Europe Limited.

You, your or yourself

An **insured person**.

6) What we don't cover

No benefit for **bodily injury** will be payable:

- if the **accident** occurs as a direct consequence of **war**;
- if **bodily injury** is sustained while **you** are flying unless **you** are a fare-paying passenger;
- if **you** take a drug or drugs other than according to the manufacturer's instructions or text as prescribed by

- a registered medical practitioner;
- d) if **you** take a drug or drugs for the treatment of drug addiction;
- e) if the **accident** occurs whilst driving a vehicle and **your** blood/urine alcohol level is above the legal limit stated in the laws of the country where the **accident** occurs;
- f) if **your bodily injury** is sustained whilst directly involved in an unlawful act;
- g) if **you** deliberately or recklessly expose **yourself** to danger; or
- h) if bodily injury is contributed to by **you** participating in, practicing or training for a sport as a professional.

7) Limitations

Benefit limitations

- a) The maximum amount payable under this policy in respect of an **insured person** is as shown in the **schedule**. The maximum benefit payable for a **child** is £7,500.
- b) No benefit is payable for a **child** if they are under six months of age at the time of death.
- c) If **you** suffer **bodily injury** whilst on a **motorcycle**, all benefits under this policy are halved.

Residence outside the United Kingdom

Cover under this policy cannot continue if the **policyholder** or **you** reside outside the **United Kingdom** for more than 180 consecutive days. Please tell **us** as soon as this happens so **we** can stop collecting premiums.

The cover will be cancelled from the 181st day the **policyholder** or **you** reside outside the **United Kingdom**.

Upper age limit

Cover for **you** will stop on the premium due date following **your** 75th birthday.

8) Conditions

Cooling off period

If the cover does not meet the **policyholder's** requirements the **policyholder** may cancel this policy within 15 days of the first premium due date shown on the **schedule** or within 15 days of receiving the policy and **schedule**, whichever is the later. **We** will give the **policyholder** a full refund of any premiums paid as long as no claim has been made in that period. **We** will provide this refund within 30 days from the date **we** receive notice of cancellation from the **policyholder**.

Cancelling the policy after the cooling off period

The **policyholder** may cancel this policy by writing to Barclays Insurance Health Protection Unit at 96 George Street, Croydon, CR9 1BU or by calling 0845 677 0089*.

Cover stops on the date Barclays Insurance Health Protection Unit receives notification of cancellation. **We** may cancel this policy by giving the **policyholder** at least 30 days written notice to the **policyholder's** last known address.

Disappearance

If **you** disappear and, after a suitable period of time, it is reasonable to believe that **you** have died as a result of an **accident**, then **we** will pay the benefit as shown in the **schedule**. If this belief is incorrect, then the amount paid must be repaid to **us**.

Exposure

For the purpose of this policy, exposure to severe weather conditions is regarded as an **accident**.

Fraud or mis-statement

Any fraud, deliberate mis-statement or concealment when **you** applied for this policy, or when **you** make a claim, will render this policy null and void. In this event, any benefit due under this policy will be forfeited, including any benefit that had been paid. No premiums will be returned.

Law and jurisdiction

This policy will be governed by the law that applies in the part of the **United Kingdom** where the **policyholder** normally lives unless agreed to the contrary by the **policyholder** and **us** before the **start date**, otherwise the law of England and Wales will apply whose courts alone will have jurisdiction.

Payment of benefit

The benefit will be paid to **your** legal representatives or executor and their receipt will discharge **our** liability under the policy. In the case of a **child** the benefit will be paid to the **policyholder**.

Payment of benefit is made income Tax free under current legislation but may be subject to Inheritance Tax or other taxation.

Policy alteration

We may change the terms and conditions, including the premium, of the policy as considered necessary to reflect any event outside **our** control that **we** expect to have an impact on future claims which **we** could not reasonably have foreseen when the assumptions were last reviewed, or in the event of any change in the law affecting policy, for example a change in Insurance Premium Tax. Before **we** make any changes, **we** will give the **policyholder** 30 days notice in writing to the **policyholder's** last known address.

Alternatively the **policyholder** can cancel the policy and stop paying premiums altogether.

Premium payment

The premium is payable monthly as shown in the **schedule**. It is due on the first premium due date and subsequently on the 1st day of each month. Each premium paid purchases cover under the terms of this policy for the calendar month in which it is due.

If any premium is not paid on the date it is due, the **policyholder** has 30 days in which to pay it. If it is not paid during that period, the policy will be automatically cancelled from the date on which the unpaid premium was due. If the premium is paid during the 30 day period, then cover will operate as if it had been paid on the due date.

9) Claim procedure

A claim can be made under this policy in writing to Barclays Insurance Health Protection Unit at 96 George Street, Croydon, CR9 1BU or by calling 0845 677 0089*.

We must be told as soon as reasonably practicable after the **accident** and a claim form completed and returned to **us**. The claim may be rejected if it is made it so long after the **accident** happens that it makes it difficult or impossible for **us** to investigate the claim fully.

We will ask for certificates and information in support of a claim at no expense to **us**.

If **we** are not given the information **we** need, the claim could be rejected. If any statement in support of the claim is misleading or is found to be incorrect, the claim will be rejected and the policy will be cancelled. Any amounts already paid must be repaid to **us**.

We reserve the right to ask for a post-mortem examination which **we** will pay for.

10) If something goes wrong with our service

Complaints procedure

We are committed to providing **you** with a first class service at all times, however, **we** recognise that occasionally **you** may be unhappy with some aspect of this service.

If **you** are not satisfied with the service **you** have received **you** or someone on **your** behalf should contact one of the following:

If **your** complaint is about a claim – Claims Manager, Barclays Insurance Health Protection Unit, 96 George Street, Croydon, CR9 1BU telephone 0845 677 0089* quote the claim and policy number.

If **your** complaint is not about a claim - Customer Support Manager, Barclays Insurance Health Protection Unit, 96 George Street, Croydon CR9 1BU telephone 0845 677 0089* and quote **your** policy number.

We will acknowledge all complaints and keep **you** or the complainant regularly informed about the progress of the complaint. For complaints relating to claims it may take **us** a little longer to respond, especially if **we** need to consult with medical professionals, however **we** will let the complainant know what information **we** are waiting for.

We will do **our** best to resolve the complaint quickly and will issue a final response letter to **you** or the complainant addressing any issues raised. If **we** are not able to resolve the complaint satisfactorily, **you** or the complainant may be entitled to refer any disagreement to the Financial Ombudsman Service (FOS) to review the case, without affecting legal rights to take action. The address is:

Financial Ombudsman Service,
South Quay Plaza,
183 Marsh Wall, London E14 9SR.
Telephone: 0845 080 1800
www.financial-ombudsman.org.uk

Financial Services Compensation Scheme (FSCS)

We are covered by the Financial Services Compensation Scheme (FSCS). If **we** are unable to meet **our** financial obligations **you** may be entitled to compensation from the scheme, depending on the type of insurance and the circumstances of the claim. **You** can get more information about compensation scheme arrangements by visiting the FSCS website at www.fscs.org.uk and on 0207 892 7300 or 0800 678 1100, or by writing to the following address:

Financial Services Compensation Scheme
7th Floor Lloyds Chambers
Portsoken Street, London E1 8BN.

11) Other information

Barclays Insurance Services Company Limited acts as the intermediary for this plan.

This insurance is underwritten by Chartis Europe Limited

Chartis Europe Limited is regulated by the Financial Services Authority. This can be confirmed with the Financial Services Authority on www.fsa.gov.uk/register or by calling 0845 606 1234. Chartis Europe Limited is also a member of the Association of British Insurers.

Chartis Europe Limited is registered in England number 1486260

Registered office: 58 Fenchurch Street, London EC3M 4AB.



Any questions call

0845 677 0089*

Lines are open 8.30am – 5.30pm Monday to Friday (excluding public holidays).

*For **our** joint protection and training purposes, telephone calls will be recorded and / or monitored.
For BT residential customers, calls will cost no more than 4.5p per minute, plus 12.5p call set-up fee (current at May 2011).
The price on non-BT phone lines may be different.