

DTW: Sports Personal Accident

Policy Objective:

Should the Insured Person suffer Permanent Total Disablement then the Insurer agrees to pay the Benefit up to the amount stated in the Schedule and Specification.

Policy Wording: DTW1991ProSports2016

Last Updated: 01/07/2018

a fresh approach to a financially independent lifestyle



General information

Product Availability:	New Policyholders
Provider:	DTW 1991 Underwriting Ltd
Regulated by the FCA:	Yes
AKG Financial Strength Rating:	Not Rated
Premium type:	Reviewable
Premium frequency:	Annual
Entry Ages:	16-32
Medical underwriting?	Yes
Is the policy valid if I move to a club outside the UK?	Yes
Can the Terms & Conditions change once the policy has commenced?	Yes, as the policy is renewed annually
Requirements to commence policy:	None
Deferred (Waiting) period:	Up to 24 months
Maximum insurable lump sum:	£500,000 standard, up to £1,000,000
Is the benefit taxable?	No, it is tax free
Can I increase the lump sum I am insuring with contract changes?	Yes
Will the increase be on the same terms?	No, will be dependent on the terms available at date of increase.

Important Information

This document represents a summary of the Sports Personal Accident policy and referenced wording provided by DTW 1991 Underwriting Ltd.

This document is not a recommendation. It does not constitute advice by DBL Asset Management LLP. Should you require advice on the suitability of this contract please contact a financial adviser.

This document has not been designed or approved by DTW 1991 Underwriting Ltd.

All statements concerning the tax treatment of products and their benefits are based on DBL Asset Management LLPs understanding of current tax law and Inland Revenue practice.



Contact information

Who is the point of contact for this policy?	Tracey Byrne tracey@traceybyrneconsulting.com 07931385141
Is the company regulated by the FCA?	Yes, appointed representative of www.feastnoble.com
Is the point of contact authorised by the FCA to give advice?	No
How is the point of contact paid for arranging this policy?	Commission

Claim information

If I am in claim do I have to continue to pay the premiums?	No
If I move outside the UK and I am in claim will the claim still complete?	Yes
At what age does the policy stop insuring me to play rugby?	33
Who do I contact to make a claim?	Tracey Byrne tracey@traceybyrneconsulting.com 07931 385 141
Claim Notification Period:	30 days
Rehabilitation Clause:	Yes
Cover whilst on international duty:	Yes
Proportional Benefit Clause:	Yes



What does the jargon mean?

New Policyholders The policy is available for new business

FCA The Financial Conduct Authority regulates firms and financial advisers so that markets and financial systems remain sound, stable and resilient. The FCA encourages transparent pricing that's easy for everyone to understand. The FCAs aim is to help firms put the interests of their customers and the integrity of the market at the core of what they do. http://www.fca.org.uk

AKG Financial Strength Rating AKG is an actuarially based consultancy specialising in the provision of ratings, information and market assistance to the financial services industry. The objective is to provide a simple broad-brush indication of the general financial strength of a company. In addition to an assessment of the company's ability to meet all of its guaranteed payments to policyholders, AKG also aims to factor in the degree to which policyholders' expectations are likely to be met, or even exceeded, in the long-term. http://www.akg.co.uk/

Reviewable Premiums Reviews will be carried out when the policy is renewed to determine whether the premium will change. This is to establish if the premium is enough to provide the level of cover selected. If your premium increases you can accept the increased premium or keep your premium the same but reduce your level of cover.

Entry Age The ages at which the policy can be applied for

Commission The arranger is paid by the product provider. Premiums fund the commission.

Pre-Existing Condition A Physical and/or psychological impairment defect infirmity or degenerative process which existed and was diagnosed up to thirty-six months prior to the commencement of the Period of Insurance and for which medical treatment was provided recommended or prescribed by a Health Care Practitioner.

Elimination Period A term used in insurance to refer to the time period between an injury and the receipt of benefit payments. In other words, it is the length of time between the beginning of an injury or illness and receiving benefit payments from an insurer.

Rehabilitation Clause Where the Insured Person is a professional sportsperson who suffers Bodily Injury or

Illness and subsequently Participates in the number of Games or Tournaments stated in the Schedule and Specification they shall be deemed to have sufficiently rehabilitated and no Benefit shall be payable.

Proportionate Benefit Clause Where Permanent Total Disablement is attributable in part to Bodily Injury and in part to a Degenerative Condition then the percentage of Permanent Total Disablement which is attributable to such a Degenerative Condition shall be assessed by a Health Care Practitioner and the Benefit payable shall be reduced by such percentage. If Permanent Total Disablement is medically determined to be wholly attributable to a Degenerative Condition then no Benefit is payable

Policy Exclusions – Degenerative Condition

osteoarthritis arthritis or any other degenerative process affecting the joints, bones, tendons or ligaments.

Sports Personal Accident Insurance Policy Summary



This Personal Accident Policy is underwritten by DTW 1991 Underwriting Limited on behalf of Syndicate DTW1991 at Lloyd's

Your insurance is provided by DTW 1991 Underwriting Limited on behalf of Syndicate DTW1991 at Lloyd's Registered in England and Wales No. 008330551. Registered Office: 71 Fenchurch Street London EC3M 4BS. DTW 1991 Underwriting Limited is an Appointed Representative of R&Q Managing Agency Limited which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority

Syndicate DTW1991 at Lloyd's is managed by R&Q Managing Agency Limited. Registered in England and Wales No.: 04690709 Registered Office: 71 Fenchurch Street London EC3M 4BS.

Full details are available on the Financial Services Register which is held on the Financial Conduct Authority's (FCA) website www.fca.org.uk or by contacting the FCA on telephone no. 0800 111 6768

This Policy is intended to cover the Business and provide the protection that has been requested by you (the Insured)

Key Cover Features and Benefits

The policy can provide benefits for:

- Death as a result of Bodily Injury only
- Permanent Total Disablement as a result of Bodily Injury or illness
- Temporary Total Disablement as a result of Bodily Injury or illness

The Schedule and Specification will show which of these Benefits apply and the amount of such Benefits

The policy is in force for the Period of Insurance and Operative Time stated in the Schedule

Significant Exclusions and Limitations

The policy does not cover accidental bodily injury arising from:

- physical and/or psychological impairment defect infirmity or degenerative process which existed and
 was diagnosed up to thirty-six months prior to the commencement of the Period of Insurance and for
 which medical treatment was provided recommended or prescribed by a Health Care Practitioner
 Defined on pages7 and 8 of your wording
- the use of drugs (see Exclusion relating to the Use of Drugs on page 10 of the policy)
- suicide or self-injury
- military service
- War Nuclear Radiation and Weapons of Mass Destruction Contractually Excluded Practices or Pastimes
- HIV AIDS
- Degenerative Conditions

Sanctions Limitation and Exclusion

The Insurer shall be deemed to provide no cover and shall not be liable to pay any claim or provide any benefit under this Policy to the extent that the provision of such cover payment of such claim or provision of such benefit would expose the Insurer to any sanction prohibition or restriction under United Nations resolutions or the trade or economic sanction laws or regulations of the European Union United Kingdom or United States of America

Complaints Procedure

In the event that you wish to make a formal complaint you should contact the Compliance Officer at Lloyd's Syndicate DTW1991 using one of the following options:

- a) In writing (letter or email) to the address shown below or
- b) By telephone to the telephone number shown below

The Compliance Officer Syndicate DTW1991 R&Q Managing Agency Limited 71 Fenchurch Street London EC3M 4BS

Email: complaints@dtw1991.com

Tel: +44 (0)20 7977 0876 Fax: +44 (0(20 7283 9872

Once your complaint is received Syndicate DTW1991 at Lloyd's will attempt to respond within 10 working days from the date of receipt but in any event no later than the response time stipulated by any instructions received from the relevant UK regulator. In the event that you remain dissatisfied you can refer the matter to Lloyd's. Their address and contact details are as follows:

Complaints Lloyd's Market Services One Lime Street London EC3M 7HA

Email: complaints@lloyds.com

Tel: +44 (0)20 7327 5693 Fax: +44 (0)20 7327 5225

Details of Lloyd's complaints procedure are set out in a leaflet "How We Will Handle Your Complaint" available at www.lloyds.com/complaints and are also available from the above address

Using these services does not affect your right to take legal action

If you remain dissatisfied after Lloyd's has considered your complaint you may have the right to refer your complaint to the Financial Ombudsman Service. The contact details for the Financial Ombudsman Service are:

The Financial Ombudsman Service

Exchange Tower London E14 9SR

Website: www.financial-ombudsman.org.uk Email: complaint.info@financial-ombudsman.org.uk Telephone: 0300 123 9123 (charges apply) or 0800 023 4567 (free from mobile phones and landlines). For callers from abroad: +44(0)20 7964 0500 (charges apply).

The Financial Ombudsman Service offers a free and independent service to you to help settle disputes between businesses providing financial services and their customers

What to do in the event of a Claim

Any circumstances which may give rise to a claim under this Policy must be notified to the Insured's Broker or Insurance Administration Services Limited (IAS) in writing as soon as reasonably practicable but in any event within 30 days of such circumstances arising

Postal Address:

Insurance Administration Services

PO Box 9 Mansfield Notts, NG19 7BL

Telephone 01623 683 585 Email: claims@ias-health.com

Please quote reference DTW1991ProSports2016

Sports Personal Accident Insurance Policy



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Introduction

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Full details are available on the Financial Services Register which is held on the Financial Conduct Authority's (FCA) website www.fca.org.uk or by contacting the FCA on telephone no. 0800 111 6768.

This Policy is intended to provide the protection that has been requested by you (the Insured).

As a legal contract between the Insurer and you the Insured it is important that you take the time to read this Policy document checking all the details stated in the Schedule and Specification (which are attached to and form an integral part of the Policy) to ensure it reflects your understanding of the cover and meets your requirements.

The Insured or the Insured's insurance advisor must notify the Insurer as soon as is reasonably practicable if there is a discrepancy omission or if the Insured's insurance requirements change.

Policy Contract

In consideration of payment of the premium the Insurer agrees to indemnify the Insured or otherwise to pay the Benefits and compensations stated to the extent and in the manner specified in this Policy

provided that

- 1. the Insured shall be subject to all the terms conditions limitations and exclusions contained in this Policy or by additional endorsements.
- 2. the Insurer's liability shall not exceed the Sums Insured or Limits of Liability expressed in this Policy.
- 3. in the absence of any written agreement to the contrary the law applicable to this Policy will be English law and any dispute concerning the interpretation of this Policy shall be subject to the jurisdiction of the courts of England and Wales.

Signed on behalf of the Insurer:

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The Financial Ombudsman Service Exchange Tower London E14 9SR

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The Financial Ombudsman Service offers a free and independent service to you to help settle disputes between businesses providing financial services and their customers.

Data Protection Notice

The Insurer may collect hold and process certain types of information regarding the Insured Person ("data subjects") for particular purposes as allowed by law in the course of conducting our relationship with you. This information will be processed for the purpose of underwriting your insurance coverage managing the policy and administering claims. The Insurer may pass this information to third parties such as loss adjuster's legal advisers and other of its agents for these purposes. This may involve its transfer to countries which do not have data protection laws. Some of the information we collect may be classified as "sensitive" – that is information about disciplinary proceedings convictions alleged criminal activities or medical conditions.

Data subjects have a right of access to and correction of information that we hold about them. If they would like to exercise either of these rights they should contact the Data Protection Compliance Officer at:

The Data Protection Compliance Officer Syndicate DTW1991 R&Q Managing Agency Limited 71 Fenchurch Street London EC3M 4BS

Financial Services Compensation Scheme (FSCS)

RQMA and DTW 1991 Underwriting Limited are covered by the Financial Services Compensation Scheme (FSCS). This means that you may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim. Further information about compensation is available from the FSCS at www.fscs.org.uk or telephone 0800 678 1100 or 0207 741 4100.

Cooling Off Period

Where the Insured is classified as a consumer or as a micro-enterprise as defined by the Financial Conduct Authority then the Insured may cancel this insurance within 14 days of the start of the Period of Insurance by returning all documentation to the broker from whom the insurance was purchased and provided that no claim has been made the premium will be refunded in full.

Right to Cancel

The Insured may cancel this insurance at any time by writing to the broker from whom the insurance was purchased. Any return premium due to the Insured will depend on how long this insurance has been in force and whether the Insured has made a claim.

The Insurer may cancel this Policy by giving 30 days' notice by registered letter to the Insured at their last known address. Any return premium due to the Insured will depend on how long this insurance has been in force and whether the Insured has made a claim.

Sanction Limitation and Exclusion

The Insurer shall be deemed to provide no cover and shall not be liable to pay any claim or provide any Benefit under this Policy to the extent that the provision of such cover payment of such claim or provision of such Benefit would expose the Insurer to any sanction prohibition or restriction under United Nations resolutions or the trade or economic sanction laws or regulations of the European Union United Kingdom or United States of America.

Several Liability Clause LMA 5096 (Combined Certificate)

The liability of an insurer under this contract is several and not joint with other insurers party to this contract. An insurer is liable only for the proportion of liability it has underwritten. An insurer is not jointly liable for the proportion of liability underwritten by any other insurer. Nor is an insurer otherwise responsible for any liability of any other insurer that may underwrite this contract. The proportion of liability under this contract underwritten by an 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 in this contract. In the case of a Lloyd's syndicate each member of the syndicate (rather than the syndicate itself) is an 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 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. 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.

The Cover

If during the Period of Insurance and the Operative Time of Cover an Insured Person suffers Bodily Injury or Illness the Insurer will pay the Benefit up to the amount stated in the Schedule and Specification

A(i): Death due to Bodily Injury

Should the Insured Person suffer Bodily Injury caused by an Accident which occurs during the Period of Insurance and the Operative Time of Cover which solely and independently of any other cause results in the Death of the Insured Person within twenty-four months from the date of such Accident the Insurer agrees to pay the Benefit stated in the Schedule and Specification.

A(ii): Permanent Total Disablement due to Bodily Injury or Illness

Should the Insured Person suffer Permanent Total Disablement then the Insurer agrees to pay the Benefit up to the amount stated in the Schedule and Specification.

Rehabilitation Clause in respect of Permanent Total Disablement

Where the Insured Person is a professional sportsperson who suffers Bodily Injury or Illness and subsequently Participates in the number of Games or Tournaments stated in the Schedule and Specification they shall be deemed to have sufficiently rehabilitated and no Benefit shall be payable

B: Temporary Total Disablement due to Bodily Injury or Illness

Should the Insured Person suffer Temporary Total Disablement then provided that the Insured Person is under the regular care of a Health Care Practitioner throughout the duration of such Temporary Total Disablement the Insurer agrees to pay up to the amount of Benefit stated in the Schedule and Specification

Payment of the Temporary Total Disablement Benefit will cease when any one of the following occurs

- a) the Insured Person no longer has a Temporary Total Disablement; or
- b) Permanent Total Disablement of the Insured Person has been determined by a suitably qualified Health Care Practitioner; or
- c) the total maximum Benefit Period is exhausted; or
- d) the Insured Person dies; or
- e) the Insured Person's contract of employment expires

Recurrent Disablement Clause in respect of Temporary Total Disablement

If after a period of Temporary Total Disablement the Insured Person returns to Participate in their Occupation but within 60 consecutive days the same Bodily Injury or Illness results in a further period of Temporary Total Disablement then no new Excess Period will apply.

If any subsequent period of Temporary Total Disablement is medically determined by a Health Care Practitioner to be the result of a different Bodily Injury or Illness then a new Excess Period will apply.

If after a period of Temporary Total Disablement the Insured Person returns to the stated Occupation for a period of 60 consecutive days or more then any subsequent Temporary Total Disablement will be considered a new Temporary Total Disablement and a new Excess Period will apply.

Policy Definitions

(Each time the following words appear within the Policy starting with a capital letter they shall bear the same meaning as stated below and throughout this Policy)

Accident

A sudden violent external unforeseen and identifiable event which occurs during the Period of Insurance and Operative Time of Cover and the word 'Accidental' shall be construed accordingly

Accumulation Limit

The maximum amount stated in the Schedule and Specification that the Insurer will pay in respect of all Benefits insured under this Policy in the aggregate in respect of all Insured Persons for all claims arising from the same event source or original cause

Appointed Representative

A solicitor or other suitably qualified person or executors or personal legal representatives appointed to act for the Insured Person or for the Insured Person's beneficiary or estate

Benefit

The monetary amount of compensation payable by the Insurer as stated in the Schedule and Specification

Benefit Period

The total maximum period stated in the Schedule and Specification for which Temporary Total Disablement Benefit shall be payable

Bodily Injury

Injury which is caused solely by an Accident and within 24 months from the date of such Accident and independently of Illness or any other cause shall result in the death or disablement of the Insured Person

Broker

The person partnership firm or company who has provided independent advice and/or arranged this insurance on behalf of the Insured

Excess Period

The consecutive number of days or weeks or months as stated in the Schedule and Specification from the date that the Insured Person suffers Temporary Total Disablement during which no Benefit is payable

Games or Tournaments

- (a) Game means a full match
- (b) Tournament means a tournament that comprises of a number of matches
- (c) Game or Tournament includes any match where the Insured Person has been selected as a replacement whether or not he gets on the field of play during the match
- (d) where a combination of Games or Tournaments have been engaged in by the Insured Person in order to satisfy whether this clause has operated or not then in such cases one Game will be regarded as equivalent to one Tournament and vice versa

Health Care Practitioner

A qualified licensed member of the medical profession approved by the governing medical association of the country in which the Health Care Practitioner resides and who is neither a member of the Insured Person's family nor works for the same employer as the Insured Person

Illness

A sickness or disease as diagnosed by a Health Care Practitioner first manifesting itself during the Period of Insurance which results in Permanent Total Disablement or Temporary Total Disablement within twenty-four months from the date of such first manifestation

Insured

The legal entity taking out this insurance on behalf of the Insured Person(s) as stated in the Schedule and Specification

Insured Person

The person(s) identified in the Schedule and Specification

Insurer

DTW 1991 Underwriting Limited on behalf of Syndicate DTW1991 at Lloyd's

Maximum Benefit Any One Person

The maximum Benefit in respect of any one Insured Person for all claims arising from one event source or original cause

Maximum Benefit Period

The overall maximum number of days or weeks or months as stated in the Schedule and Specification for which the daily or weekly or monthly Temporary Total Disablement Benefit is payable

National Governing Body

The independent organisation that governs the sport in which the Insured Person Participates

Occupation

The Insured Person's usual occupation as stated in the Schedule and Specification

Operative Time of Cover

The period of time during which the Insured Person is covered by this Policy as stated in the Schedule and Specification

Participate(s) Participation or Participating

The Insured Person is on the active roster of a professional or semi-professional sports team or is a member of a professional or semi-professional association for which they are contractually obliged to play and/or is available and/or is physically able to practice or play for any such team or association or engage in any part of their Occupation regardless of whether or not they do in fact play or practice

Period of Insurance

As stated in the Schedule

Permanent Total Disablement

Total and absolute disablement arising from Bodily Injury or Illness which has been medically determined by a Health Care Practitioner to entirely prevent the Insured Person from engaging in their usual Occupation for the remainder of their life.

Policy

The policy wording consisting of all those parts listed under Policy Content on page 1 of this document and any other items attached by endorsement

Pre-Existing Condition

Physical and/or psychological impairment defect infirmity or degenerative process which existed and was diagnosed up to thirty-six months prior to the commencement of the Period of Insurance and for which medical treatment was provided recommended or prescribed by a Health Care Practitioner

Premium

The amount payable by the Insured to the Insurer for the provision of this insurance

Proposal

Any signed proposal form or declaration or any information provided in connection with the arrangement of this Policy supplied by or on behalf of the Insured or the Insured Person(s)

Salary

The Insured Person's annual salary including image rights and any contractually agreed payments (prior to any deductions) that the individual has agreed with their employer and which is applicable immediately preceding the date of Accident or Illness

Schedule and Specification(s)

The parts of this Policy that detail the information provided to the Insurer that forms the basis of this insurance contract and that show(s) the insurance cover insured Benefit(s) and limits

Temporary Total Disablement

Total and absolute disablement arising from Bodily Injury or Illness which has been medically determined by a Health Care Practitioner to prevent the Insured Person from engaging in their usual Occupation

Policy Conditions

- 1. Any inaccurate statement or withholding of information by the Insured or the Insured Person may lead to the total or partial loss of the right to compensation or to the termination of the insurance
- 2. Any levies taxes or stamp duties arising from the arrangement of this insurance that are charged in addition to the overall Premium as stated in the Schedule and Specification are to be borne by the Insured and are to be paid to the Insurer or the Insurer's fiscal representative(s)
- 3. The Insurer will cease paying Benefit under B Temporary Total Disablement due to Bodily Injury or Illness immediately the Insured Person becomes entitled to Benefit under A(i) Death due to Bodily Injury or A(ii) Permanent Total Disablement due to Bodily Injury or Illness.
- 4. Any Benefit for B Temporary Total Disablement due to Bodily Injury or Illness already paid to the Insured will be deducted from the Benefit payable for A(i) Death due to Bodily Injury or A(ii) Permanent Total Disablement due to the same Bodily Injury or Illness.
- 5. The Insurer will only pay Benefit under either A(i) Death due to Bodily Injury or A(ii) Permanent Total Disablement due to Bodily Injury or Illness in respect of all Bodily Injury sustained by an Insured Person arising from any one event source or original cause
- 6. If A(i) Death due to Bodily Injury is stated on the Specification as not covered the Insurer will not pay any Benefits under A(ii) Permanent Total Disablement due to Bodily Injury or Illness or B Temporary Total Disablement due to Bodily Injury or Illness as stated on the Specification should the Insured Person die within 13 weeks of the Accident causing Bodily Injury

Policy Exclusions

This insurance does not cover Bodily Injury or Illness arising from:

War Nuclear Radiation and Weapons of Mass Destruction

- a) war riot invasion revolution rebellion or civil commotion
- b) transmutation of the nucleus of the atom; radiations caused by the artificial acceleration of atomic particles exposure to ionising radiations and in any case internal or external effects of radioactive emanations
- discharge explosion or use of a weapon of mass destruction whether or not employing nuclear fission or fusion or chemical biological radioactive or similar agents by any party at any time for any reason

Suicide

suicide self-destruction self-harm attempted suicide or intentionally self-inflicted Injury

Criminal Act

the Insured Person's own criminal or felonious act

Death by Illness

the death of the Insured Person if caused by Illness

Use of Drugs

the Insured Person

- (a) being under the influence of drugs and/or narcotics that are not lawfully available unless specifically prescribed for the Insured Person by a Health Care Practitioner
- (b) using any drugs or substances in violation of the rules or regulations of the applicable National Governing Body
- (c) using any performance enhancing drugs or substances that are not recognised and/or accepted by the National Governing Body or the Insured Person's club or team management including but not limited to anabolic steroids stimulants and corticosteroids regardless of whether or not prescribed by a Health Care Practitioner

Contractually Excluded Practices or Pastimes

any practices or activities from time to time excluded by the Insured Person's contract of employment or service in connection with their Occupation

HIV AIDS

Human Immunodeficiency Virus (HIV) Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) whensoever and howsoever arising or acquired

Degenerative Conditions

osteoarthritis arthritis or any other degenerative process affecting the joints bones tendons or ligaments

Pre-Existing Condition

any Pre-Existing Condition as defined under the relevant Policy Definition

Military Service

The Insured Person engaging in military naval or air services or operations (other than reserve or volunteer training as a member of one of the officially recognised volunteer reserve forces)

Claims Conditions

Notification of Bodily Injury or Illness

Any circumstances which may give rise to a claim under this Policy must be notified to the Insured's Broker or Insurance Administration Services Limited (IAS) in writing as soon as practicable but in any event within 30 days of such circumstances arising

Notice shall be given as soon as practicable before interment or cremation or the holding of any inquest enquiry or proceeding concerning the death or disappearance of an Insured Person

Insurance Administration Services PO Box 9 Mansfield Notts NG19 7BL

Telephone 01623 683 585

Email: claims@ias-health.com

Please quote reference DTW1991ProSports2016

Duty of the Insured Person in the event of Bodily Injury or Illness

It is the duty of the Insured and any Insured Person to use due diligence and carry out all reasonable measures to mitigate a claim. As soon as practicable after suffering Bodily Injury or Illness the Insured Person shall place themselves under the care of a Health Care Practitioner whose advice they must follow As soon as practicable after the occurrence of an incident which may give rise to a claim under this Policy the Insured shall supply without cost to the Insurer all certificates receipts and other evidence which may be required by the Insurer and the Insured shall at all times provide all information and assistance as the Insurer or any person authorised by the Insurer may require

Right to Medical Examination

After initial notice or submission of a claim any Health Care Practitioner appointed by the Insurer shall be allowed so often as may be reasonably necessary to conduct an examination of the Insured Person and in the event of Death by Accident of the Insured Person to conduct an autopsy if legally permitted

Fraudulent Claims by the Insured or the Insured Person

- 1. If the Insured makes a fraudulent claim under this Policy the Insurer
 - (a) is not liable to pay the claim
 - (b) may recover from the Insured any sums paid to the Insured in respect of the claim and
 - (c) may by notice to the Insured treat the Policy as having terminated with effect from the time of the fraudulent act
- 2. If the Insurer exercises its right under clause 1 (c) above
 - (a) The Insurer shall not be liable to the Insured in respect of a relevant event occurring after the time of the fraudulent act. A relevant event is whatever gives rise to the Insurer's liability under this Policy (such as the occurrence of Bodily Injury or Illness the making of a claim or the notification of a potential claim) and
 - (b) The Insurer need not return any of the premiums paid by the Insured to the Insurer

Discharge of Liability

The receipt of final payment by the Insured or Insured Person or their Appointed Representative shall discharge the Insurer

Independent Confirmation of Insured Person's Salary

Written confirmation of the Insured Person's Salary is required in the event of any Temporary Total Disablement claim or any Permanent Total Disablement claim where such insured Benefit is linked to a multiple or percentage of Salary. The written confirmation of the Insured Person's Salary should be advised by the Insured Person's employer or club.

Refund of Benefits

In the event that the Insurer pays a claim under this insurance in respect of Permanent Total Disablement Benefit and the Insured Person subsequently recovers sufficiently to resume their Occupation the Insurer will be entitled to recover any amount that has been paid to the Insured or the Insured Person and the Insured or Insured Person agrees to immediately refund all monies paid to them hereunder by the Insurer



TRACEY BYRNE CONSULTING LTD DEMANDS AND NEEDS STATEMENT

- 1. The Financial Conduct Authority (FCA): The FCA is the independent watchdog that regulates financial services. It requires us to give you this document. Use this information to decide if our services are right for you.
- **2. Whose products do we offer?** We only offer products as a broker from a single insurer or when advised specifically from a limited number of insurers.
- **3. Which service will we provide you with?** You will not receive advice or a recommendation from us. We may ask some questions to narrow down the selection of products that we will provide details on. You will then need to make your own choice about how to proceed.
- **4. What will you have to pay us for our services?** No fee will be charged. You will receive a quotation which will tell you about any other fees in relation to any particular insurance policy.

5. Who regulates us?

Tracey Byrne Consulting Limited is an appointed representative of Feast Noble & Co LLP. FCA Registration 490071.

Feast Noble & Co LLP is registered in England and Wales (company number OC339240) and whose registered office is Suite 1, Clockhouse Court, 5-7 London Road, St Albans, Hertfordshire, AL1 1LA.

- **6. Ownership:** Tracey Byrne Consulting Limited is a wholly independent Company and an appointed representative of Feast Noble & Co LLP.
- 7. What to do if you have a complaint: If you wish to register a complaint, please contact us ...in writing: Write to Feast Noble & Co LLP, Suite 1, Clockhouse Court, 5-7 London Road, St Albans, Hertfordshire, AL1 1LA

... by phone: 01727 834 222

If we cannot settle your complaint with us, you may be entitled to refer it to the Financial Ombudsman Service.

8. Are we covered by the Financial Services Compensation Scheme (FSCS)?

We are covered by the Financial Services Compensation Scheme (FSCS). You may be able to get money from the scheme if we cannot meet our financial responsibilities. Further information about compensation scheme arrangements is available from the FSCS website at www.fscs.org.uk.

6. Cooling Off Period/ Cancellation by the insured person: You may cancel this policy by returning it to Tracey Byrne Consulting Ltd with written instructions at any time within 14 days of the date of issue of the policy provided that no claim has been made and we will refund your premium in full. Cancellation by you at any other time will mean you are not entitled to a refund of premium.

Key Cover Features & Benefits

The policy can provide benefits for:

- Death as a result of Bodily injury only
- Permanent Total Disablement as a result of Bodily Injury or Illness
- Temporary Total Disablement as a result of Bodily Injury or Illness

The Schedule and Specification will show which of these Benefits apply and the amount of such Benefits

The policy is in force for the Period of Insurance and Operative Time stated in the Schedule

Significant Exclusions & Limitations

The policy does not cover accidental bodily injury arising from:

- physical and/or psychological impairment, defect, infirmity or degenerative process which existed and was diagnosed up to thirty-six months prior to the commencement of the Period of Insurance and for which medical treatment was provided recommended or prescribed by a Health Care Practitioner Defined on pages7 and 8 of your wording
- the use of drugs (see Exclusion relating to the Use of Drugs on page 10 of the policy)
- suicide or self-injury
- military service
- War Nuclear Radiation and Weapons of Mass Destruction Contractually Excluded Practices or Pastimes
- HIV AIDS
- Degenerative Conditions

This Personal Accident Policy is underwritten by DTW 1991 Underwriting Limited on behalf of Syndicate DTW1991 at Lloyd's

Your insurance is provided by DTW 1991 Underwriting Limited on behalf of Syndicate DTW1991 at Lloyd's Registered in England and Wales No. 008330551. Registered Office: 71 Fenchurch Street London EC3M 4BS. DTW 1991 Underwriting Limited is an Appointed Representative of R&Q Managing Agency Limited which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority

Syndicate DTW1991 at Lloyd's is managed by R&Q Managing Agency Limited. Registered in England and Wales No.: 04690709 Registered Office: 71 Fenchurch Street London EC3M 4BS.

Full details are available on the Financial Services Register which is held on the Financial Conduct Authority's (FCA) website www.fca.org.uk or by contacting the FCA on telephone no. 0800 111 6768

This Policy is intended to cover the Business and provide the protection that has been requested by you (the Insured)

Sanctions, Limitations and Exclusions

The Insurer shall be deemed to provide no cover and shall not be liable to pay any claim or provide any benefit under this Policy to the extent that the provision of such cover payment of such claim or provision of such benefit would expose the Insurer to any sanction prohibition or restriction under United Nations resolutions or the trade or economic sanction laws or regulations of the European Union United Kingdom or United States of America

What to do in the event of a Claim

Any circumstances which may give rise to a claim under this Policy must be notified to the Insured's Broker or Insurance Administration Services Limited (IAS) in writing as soon as reasonably practicable but in any event within 30 days of such circumstances arising

Postal Address: Feast Noble & Co LLP, Suite 1, 5-7 London Road, St Albans, Hertfordshire, AL1 1LA

Telephone: 01727 834 222

Email: tracey@traceybyrneconsulting.com