

Your policy document

Group Personal Accident and Illness Policy



NFU Mutual

Thank you

for placing your accident and illness insurance with NFU Mutual.

Cancellation Rights

If you do not wish to accept your new cover, you may cancel the cover in writing within 14 days of receiving the policy or amendment to an existing policy. We may charge pro rata for the cover provided.

Complaints

NFU Mutual strives to provide its customers with the highest level of service and would like to know if you are not satisfied with any aspect of this. Should you wish to make comments of any kind about our service please contact the manager of our Regional Office or Call Centre which issued your policy. The address of our Regional Office can be obtained from the Agent or Broker where you purchased your insurance.

We will take any complaint seriously and endeavour to handle it fairly, consistently and promptly. If you are not satisfied with the way in which we have dealt with your complaint please write to the General Manager, NFU Mutual, Tiddington Road, Stratford upon Avon, CV37 7BJ. In the unlikely event that you remain dissatisfied, the Financial Ombudsman Service may be prepared to review your complaint. No charge is made for this service and you should write to:

The Financial Ombudsman Service,
South Quay Plaza,
183 Marsh Wall,
London E14 9SR.
Telephone 0845 080 1800.

Please always quote your policy number as it will enable your complaint to be dealt with promptly.

Language

The contract and other documents are drawn up in the English Language. We will communicate with you in English throughout the duration of this policy.

Financial Services Compensation Scheme

We are covered by the Financial Services Compensation Scheme (FSCS), which means that you may be entitled to compensation from the Scheme if we cannot meet our obligations. This depends on the type of policy you have and the circumstances of the claim. You can find out more at www.fscs.org.uk or by calling 020 7892 7300

Statutory Status

You can check our statutory status on the Financial Services Authority's Register at www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234. Our FSA registration number is 117664.

Data Protection Notice

NFU Mutual is the data controller and will process personal information in accordance with the Data Protection Act 1998. We may check and/or pass some or all of the personal information you have supplied to NFU Mutual in connection with your insurance or claim to other insurance companies in order to administer the policy for underwriting and for claims handling purposes, to suppliers of goods and services, to regulatory or other organisations, databases and fraud prevention agencies. We may also search these agencies and databases to:

- help make decisions about the provision and administration of insurance and credit and related services for you and members of your household;
- trace debtors or beneficiaries, recover debt, prevent fraud and to manage your account and insurance policies;
- check your identity to prevent money laundering, unless you provide us with satisfactory proof of identity;
- in the event of any 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.

We may use your information to carry out research. We can supply on request, further information about the databases we access and supply to.

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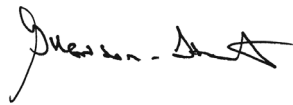
Policy Introduction

We will insure you in line with the terms of your policy for accident or illness, in the territorial limits during the period of insurance.

The proposal or application and declaration you have completed and any other information supplied form the basis of this contract.

Your schedule shows the covers you have chosen, sums insured and any special terms that apply to your policy. Please read the schedule and policy carefully to make sure you have the cover you need.

This contract and the relationship between NFU Mutual and you shall be governed by, and interpreted in accordance with, English Law. The contract shall be subject to the non-exclusive jurisdiction of the English Courts.



T. D. Hewson-Stoate
General Manager General Insurance Services
The National Farmers Union Mutual Insurance Society Limited

Note: The National Farmers Union Mutual Insurance Society Limited is a Mutual Company. The Insured is a member of NFU Mutual and is subject to its Memorandum and Articles by virtue of the acceptance of this or any previous insurance issued by NFU Mutual.

Definitions

The following Definitions apply wherever they appear in the policy.

Accident

Accident bodily injury which results from an external, violent and visible cause, or exposure to the elements, but not any illness, disease or medical disorder.

Act of terrorism

The use, or threatened use, of biological, chemical and/or nuclear force or contamination by any person or group of people whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government and/or put the public or any section of the public in fear.

Illness

An illness contracted in Europe, Australia, Canada, New Zealand, the Republic of South Africa or the United States of America, certified by a doctor as the cause which prevents an **insured person** from engaging in all parts of the **occupation**.

Insured person

The person described in the Table of Benefits.

Loss of Limbs, Sight, Speech or Hearing

Total and permanent

- a) physical separation or loss of use of one or more hands or feet or
- b) loss of sight in one or both eyes or
- c) loss of speech or
- d) loss of hearing in both ears.

Occupation

The **insured person's** occupation as shown in **your schedule** and Table of Benefits.

Partial Disablement

Disablement which prevents an **insured person** from engaging in a substantial part of their **occupation**.

Period of Insurance

The period:

- a) From the commencement of this **policy** until the date **your** first renewal premium is due or
- b) from any date for which **your** renewal premium is due to the next such date for which **we** have agreed to provide insurance under this **policy**.

Policy

The Preamble, definitions, cover, conditions, **schedule**, Table of Benefits and operative endorsements which are to be read together as one contract.

Schedule

The latest schedule issued by **us** as part of **your** policy.

Total Disablement

Disablement which prevents an **Insured person** from engaging in all parts of their **Occupation**. For an **Insured Person** who is not in employment from which an income is received "their **Occupation**" shall mean "employment of any kind."

We, Us, Our

The National Farmers Union Mutual Insurance Society Limited.

You, Your

The person or persons named as the Insured in **your schedule**.

Cover

What is Insured

An **insured person** who sustains an **Accident** or **Illness** during the **Period of Insurance**.

We will pay for:

An **accident** which, within 104 weeks of its occurrence, is the sole and direct cause of:

Item 1 Death

Item 2 **Loss of Limbs, sight, speech or hearing**

Item 3 Permanent **Total Disablement**

Item 4 Temporary **Total Disablement**

Item 5 Temporary **Partial Disablement**

An **Illness** which, within 52 weeks of its occurrence, is the sole, and direct cause of:

Item 6 Temporary **Total Disablement**

What is Not Insured

The first 7 days of disablement.

The first 7 days of disablement.

The first 7 days of disablement.

Illness occurring within 21 days of commencement of this section of **your policy**.

Any **Accident** or **Illness** which occurs before commencement of this **Policy** or at any subsequent renewal of this **Policy** in respect of the **Insured Person**.

Insured person's failing to obtain and follow proper medical advice.

Accident or Illness resulting from:

- pregnancy or childbirth;
- suicide or deliberate self-injury;
- intoxicating liquor or drugs ;
- any HIV (Human Immunodeficiency Virus) related condition;
- wilful exposure except in an attempted to save human life;
- flying or other aerial activities, except as a fare-paying passenger in a power driven aircraft;
- winter sports, (except sledging in the United Kingdom, curling or skating);
- hunting on horseback;

What Is Insured

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- racing, except swimming, running or yachting;
- mountaineering or rock climbing where ropes or guides are used ;
- pot-holing or caving;
- any bungee sport;
- professional sport;
- motor cycling as a driver or passenger except where undertaken for agricultural purposes on the **Insured Person's** own land;
- war, invasion, actions of foreign enemies, hostilities (whether or not war has been declared), civil war, rebellion, revolution, insurrection, military action or coup;
- any cost or expense of whatever nature directly or indirectly caused by or resulting from or in connection with:
 - any **act of terrorism** regardless of any other cause or event contributing at the same time or in any other sequence to the loss;
 - any action taken to control, prevent, suppress, or in any way relating to, an **act of terrorism**.

What Is Insured

HOW WE WILL SETTLE YOUR CLAIM

We will pay only under one of the items 1, 2, or 3 and payment will end cover for that **Insured person**.

If **We** pay under items 1, 2 or 3 **We** will no longer make any payment under item 4 or 5 for the same **Accident**.

We will settle claims under items 4, 5 or 6 by paying in arrears at four-weekly intervals.

The most **We** will pay:

- a) for each item is the amount shown in **Your** Table of Benefits;
- b) for any one **Accident** under items 4 and 5, or a combination of both, is the number of weeks stated in **Your** Table of Benefits;
- c) for any one **Illness** under item 6 is the number of weeks stated in **Your** Table of Benefits.

ADDITIONAL INSURANCES

You are also insured for

1. Disappearance

We will pay benefit under item 1 if an **Insured Person** has been missing for 90 days and **We** are provided with sufficient evidence to satisfy **Us** that death was caused by an **Accident**. The definition of **Accident** includes exposure to the elements.

If, at any time **We** have paid benefit, the **Insured Person** is found alive the payment must be refunded to **Us**.

2. Professional Counselling

We will pay for professional counselling where an **Insured Person** is suffering from emotional stress as a result of an **Accident** which qualifies for benefit under item 2 or 3.

The most **We** will pay is £1,000 any one **Period of Insurance**.

3. Medical Treatment

We may, at **Our** option, pay for any medical treatment where in **Our** opinion such treatment will aid the recovery of an **Insured Person**.

4. Rehabilitation

If **We** have paid a claim under item 6, **We** will also pay for up to 8 weeks, 40% of the amount shown in **Your Schedule** for item 6 for any continuing temporary **Partial Disablement** from the same **Illness**.

What Is Not Insured

What Is Insured

The most **We** will pay for **We** will pay for any one **Illness** under combination of item 6 and **Rehabilitation** is 104 weeks benefit in total.

5. Hospital Benefit

We will pay £25 for each 24 hour period of treatment received as in-patient in a hospital or nursing home arising out of any **Accident** or **Illness** which qualifies for benefit under this section.

The most **We** will pay is £1,000 for any one claim for each **Insured Person**.

What Is Not Insured

Policy Conditions

Your Rights to Policy Benefit

You or any **Insured Person** seeking the benefit under this **Policy** must observe its terms and conditions.

Reasonable Care

You must:

- a) take reasonable care to prevent any accidents or injury;
- b) keep the cost of any claims as low as possible.

Change to the Risk

You must tell **Us** of any change of circumstances which will affect this insurance.

You must tell **Us**:

- a) if any **Insured Person** changes **Occupation** or arranges any other Personal Accident or Illness insurance (other than as part of a motor or travel policy);
- b) before each renewal of **Your Policy**, of any injury, disease, physical defect or infirmity which any **Insured person** has been affected by since the previous premium was paid.

How to claim

If anything happens which might result in a claim **You** must:

- a) tell **Us** as soon as possible about the event;
- b) provided all written details and supporting documentation that **We** may reasonably require;
- c) give all evidence, information and assistance required at **Your** own expense;
- d) permit **Us** to arrange a medical examination.

If an **Insured Person** dies **We** must be given reasonable notice before interment or cremation, so **We** may be represented at the post-mortem or inquest.

Arbitration

If **we** admit liability for a claim, but there is a disagreement over the amount to be paid, the dispute will be referred to an arbitrator to be agreed jointly between **you** and **us** in accordance with current law.

Where this happens **you** may not commence legal proceedings against **us** until the arbitrator has reached a decision.

Fraud

If **you** make a false or dishonest claim, **we** will not pay the claim and may cancel **your policy**.

Cancellation of Your Policy

We may cancel **Your Policy** by giving **You** 14 days written notice to **your** last known address. **We** will then refund part of **your** premium.

You may cancel **Your Policy** by sending **Us** written notice. **We** will then refund part of **your** premium unless **you** have made a claim in the current **period of insurance**.

If **You** default under **our** credit agreement to pay the premium, cover under **Your Policy** will cease in accordance with the conditions of the credit agreement unless **we** agree otherwise in writing.

Assignment Condition

Definitions

Schedule means the latest schedule issued by **Us** part of **Your** policy

the Trust means NFU Mutual Charitable Trust

We, Us, Our means NFU Mutual Insurance Society Limited

You, Your means the person or persons named in your **Schedule** as the Insured

This policy has been issued to **You** on the condition that **You**

(1) have agreed with **Us** and the **Trust** that if at any time **You** become entitled to any rights, as one of **Our** members, as a result of

- the transfer of part or all of **Our** business to any other person, firm or company, or
- any change to **Our** corporate status, or
- any distribution of any assets or benefits

You will pass over all of these rights under this policy to the trustees of **the Trust**.

(2) have agreed to execute and deliver to **Us** or **the Trust** any

- documents or certificates of title, or
- any payment, reward or compensation, whether in money or any other form which are needed so that **You** can do as **You** have agreed in paragraph (1),

(3) have appointed any of **Us, the Trust, Our** officers or officers of **the Trust** to act on **Your** behalf in executing any document which are needed so that **You** can do as **You** have agreed in paragraph (1),

(4) have agreed to authorise and approve any actions taken by **Us, the Trust, Our** officers or officers of **the Trust** as a result of the above appointment and that **You** cannot cancel this appointment

This condition does not apply to

- the declaration of the usual annual, reversionary or terminal bonus for a policy life, annuity or capital redemption assurance, or
- any other benefit which **Our** board of directors decides to exclude from this agreement.

If there is any conflict between the terms of

- this condition, and
- any agreement to assign rights as one of **Our** members signed by **You** before the issue of this policy

the terms of this second shall be overriding.

You shall not be entitled, as one of **Our** members, to participate in any distribution of surplus assets by reference to this policy if **We** are dissolved.

Thank you

for placing your accident and illness insurance with NFU Mutual.

Cancellation Rights

If you do not wish to accept your new cover, you may cancel the cover in writing within 14 days of receiving the policy or amendment to an existing policy. We may charge pro rata for the cover provided.

Complaints

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We will take any complaint seriously and endeavour to handle it fairly, consistently and promptly. If you are not satisfied with the way in which we have dealt with your complaint please write to the General Manager, NFU Mutual, Tiddington Road, Stratford upon Avon, CV37 7BJ. In the unlikely event that you remain dissatisfied, the Financial Ombudsman Service may be prepared to review your complaint. No charge is made for this service and you should write to:

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You can check our statutory status on the Financial Services Authority's Register at www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234. Our FSA registration number is 117664.

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- help make decisions about the provision and administration of insurance and credit and related services for you and members of your household;
- trace debtors or beneficiaries, recover debt, prevent fraud and to manage your account and insurance policies;
- check your identity to prevent money laundering, unless you provide us with satisfactory proof of identity;
- in the event of any 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.

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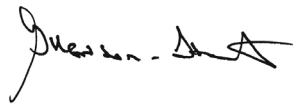
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This contract and the relationship between NFU Mutual and you shall be governed by, and interpreted in accordance with, English Law. The contract shall be subject to the non-exclusive jurisdiction of the English Courts.



T. D. Hewson-Stoate
General Manager General Insurance Services
The National Farmers Union Mutual Insurance Society Limited

Note: The National Farmers Union Mutual Insurance Society Limited is a Mutual Company. The Insured is a member of NFU Mutual and is subject to its Memorandum and Articles by virtue of the acceptance of this or any previous insurance issued by NFU Mutual.

Definitions

The following Definitions apply wherever they appear in the policy.

Accident

Accident bodily injury which results from an external, violent and visible cause, or exposure to the elements, but not any illness, disease or medical disorder.

Act of terrorism

The use, or threatened use, of biological, chemical and/or nuclear force or contamination by any person or group of people whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious, ideological or similar purposes including the intention to influence any government and/or put the public or any section of the public in fear.

Illness

An illness contracted in Europe, Australia, Canada, New Zealand, the Republic of South Africa or the United States of America, certified by a doctor as the cause which prevents an **insured person** from engaging in all parts of the **occupation**.

Insured person

The person described in the Table of Benefits.

Loss of Limbs, Sight, Speech or Hearing

Total and permanent

- a) physical separation or loss of use of one or more hands or feet or
- b) loss of sight in one or both eyes or
- c) loss of speech or
- d) loss of hearing in both ears.

Occupation

The **insured person's** occupation as shown in **your schedule** and Table of Benefits.

Partial Disablement

Disablement which prevents an **insured person** from engaging in a substantial part of their **occupation**.

Period of Insurance

The period:

- a) From the commencement of this **policy** until the date **your** first renewal premium is due or
- b) from any date for which **your** renewal premium is due to the next such date for which **we** have agreed to provide insurance under this **policy**.

Policy

The Preamble, definitions, cover, conditions, **schedule**, Table of Benefits and operative endorsements which are to be read together as one contract.

Schedule

The latest schedule issued by **us** as part of **your** policy.

Total Disablement

Disablement which prevents an **Insured person** from engaging in all parts of their **Occupation**. For an **Insured Person** who is not in employment from which an income is received "their **Occupation**" shall mean "employment of any kind."

We, Us, Our

The National Farmers Union Mutual Insurance Society Limited.

You, Your

The person or persons named as the Insured in **your schedule**.

Cover

What is Insured

An **insured person** who sustains an **Accident** or **Illness** during the **Period of Insurance**.

We will pay for:

An **accident** which, within 104 weeks of its occurrence, is the sole and direct cause of:

Item 1 Death

Item 2 **Loss of Limbs, sight, speech or hearing**

Item 3 Permanent **Total Disablement**

Item 4 Temporary **Total Disablement**

Item 5 Temporary **Partial Disablement**

An **Illness** which, within 52 weeks of its occurrence, is the sole, and direct cause of:

Item 6 Temporary **Total Disablement**

What is Not Insured

The first 7 days of disablement.

The first 7 days of disablement.

The first 7 days of disablement.

Illness occurring within 21 days of commencement of this section of **your policy**.

Any **Accident** or **Illness** which occurs before commencement of this **Policy** or at any subsequent renewal of this **Policy** in respect of the **Insured Person**.

Insured person's failing to obtain and follow proper medical advice.

Accident or Illness resulting from:

- pregnancy or childbirth;
- suicide or deliberate self-injury;
- intoxicating liquor or drugs ;
- any HIV (Human Immunodeficiency Virus) related condition;
- wilful exposure except in an attempted to save human life;
- flying or other aerial activities, except as a fare-paying passenger in a power driven aircraft;
- winter sports, (except sledging in the United Kingdom, curling or skating);
- hunting on horseback;

What Is Insured

What Is Not Insured

- racing, except swimming, running or yachting;
- mountaineering or rock climbing where ropes or guides are used ;
- pot-holing or caving;
- any bungee sport;
- professional sport;
- motor cycling as a driver or passenger except where undertaken for agricultural purposes on the **Insured Person's** own land;
- war, invasion, actions of foreign enemies, hostilities (whether or not war has been declared), civil war, rebellion, revolution, insurrection, military action or coup;
- any cost or expense of whatever nature directly or indirectly caused by or resulting from or in connection with:
 - any **act of terrorism** regardless of any other cause or event contributing at the same time or in any other sequence to the loss;
 - any action taken to control, prevent, suppress, or in any way relating to, an **act of terrorism**.

What Is Insured

HOW WE WILL SETTLE YOUR CLAIM

We will pay only under one of the items 1, 2, or 3 and payment will end cover for that **Insured person**.

If **We** pay under items 1, 2 or 3 **We** will no longer make any payment under item 4 or 5 for the same **Accident**.

We will settle claims under items 4, 5 or 6 by paying in arrears at four-weekly intervals.

The most **We** will pay:

- a) for each item is the amount shown in **Your** Table of Benefits;
- b) for any one **Accident** under items 4 and 5, or a combination of both, is the number of weeks stated in **Your** Table of Benefits;
- c) for any one **Illness** under item 6 is the number of weeks stated in **Your** Table of Benefits.

ADDITIONAL INSURANCES

You are also insured for

1. Disappearance

We will pay benefit under item 1 if an **Insured Person** has been missing for 90 days and **We** are provided with sufficient evidence to satisfy **Us** that death was caused by an **Accident**. The definition of **Accident** includes exposure to the elements.

If, at any time **We** have paid benefit, the **Insured Person** is found alive the payment must be refunded to **Us**.

2. Professional Counselling

We will pay for professional counselling where an **Insured Person** is suffering from emotional stress as a result of an **Accident** which qualifies for benefit under item 2 or 3.

The most **We** will pay is £1,000 any one **Period of Insurance**.

3. Medical Treatment

We may, at **Our** option, pay for any medical treatment where in **Our** opinion such treatment will aid the recovery of an **Insured Person**.

4. Rehabilitation

If **We** have paid a claim under item 6, **We** will also pay for up to 8 weeks, 40% of the amount shown in **Your Schedule** for item 6 for any continuing temporary **Partial Disablement** from the same **Illness**.

What Is Not Insured

What Is Insured

The most **We** will pay for **We** will pay for any one **Illness** under combination of item 6 and **Rehabilitation** is 104 weeks benefit in total.

5. Hospital Benefit

We will pay £25 for each 24 hour period of treatment received as in-patient in a hospital or nursing home arising out of any **Accident** or **Illness** which qualifies for benefit under this section.

The most **We** will pay is £1,000 for any one claim for each **Insured Person**.

What Is Not Insured

Policy Conditions

Your Rights to Policy Benefit

You or any **Insured Person** seeking the benefit under this **Policy** must observe its terms and conditions.

Reasonable Care

You must:

- a) take reasonable care to prevent any accidents or injury;
- b) keep the cost of any claims as low as possible.

Change to the Risk

You must tell **Us** of any change of circumstances which will affect this insurance.

You must tell **Us**:

- a) if any **Insured Person** changes **Occupation** or arranges any other Personal Accident or Illness insurance (other than as part of a motor or travel policy);
- b) before each renewal of **Your Policy**, of any injury, disease, physical defect or infirmity which any **Insured person** has been affected by since the previous premium was paid.

How to claim

If anything happens which might result in a claim **You** must:

- a) tell **Us** as soon as possible about the event;
- b) provided all written details and supporting documentation that **We** may reasonably require;
- c) give all evidence, information and assistance required at **Your** own expense;
- d) permit **Us** to arrange a medical examination.

If an **Insured Person** dies **We** must be given reasonable notice before interment or cremation, so **We** may be represented at the post-mortem or inquest.

Arbitration

If **we** admit liability for a claim, but there is a disagreement over the amount to be paid, the dispute will be referred to an arbitrator to be agreed jointly between **you** and **us** in accordance with current law.

Where this happens **you** may not commence legal proceedings against **us** until the arbitrator has reached a decision.

Fraud

If **you** make a false or dishonest claim, **we** will not pay the claim and may cancel **your policy**.

Cancellation of Your Policy

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If **You** default under **our** credit agreement to pay the premium, cover under **Your Policy** will cease in accordance with the conditions of the credit agreement unless **we** agree otherwise in writing.

Assignment Condition

Definitions

Schedule means the latest schedule issued by **Us** part of **Your** policy

the Trust means NFU Mutual Charitable Trust

We, Us, Our means NFU Mutual Insurance Society Limited

You, Your means the person or persons named in your **Schedule** as the Insured

This policy has been issued to **You** on the condition that **You**

(1) have agreed with **Us** and the **Trust** that if at any time **You** become entitled to any rights, as one of **Our** members, as a result of

- the transfer of part or all of **Our** business to any other person, firm or company, or
- any change to **Our** corporate status, or
- any distribution of any assets or benefits

You will pass over all of these rights under this policy to the trustees of **the Trust**.

(2) have agreed to execute and deliver to **Us** or **the Trust** any

- documents or certificates of title, or
- any payment, reward or compensation, whether in money or any other form which are needed so that **You** can do as **You** have agreed in paragraph (1),

(3) have appointed any of **Us, the Trust, Our** officers or officers of **the Trust** to act on **Your** behalf in executing any document which are needed so that **You** can do as **You** have agreed in paragraph (1),

(4) have agreed to authorise and approve any actions taken by **Us, the Trust, Our** officers or officers of **the Trust** as a result of the above appointment and that **You** cannot cancel this appointment

This condition does not apply to

- the declaration of the usual annual, reversionary or terminal bonus for a policy life, annuity or capital redemption assurance, or
- any other benefit which **Our** board of directors decides to exclude from this agreement.

If there is any conflict between the terms of

- this condition, and
- any agreement to assign rights as one of **Our** members signed by **You** before the issue of this policy

the terms of this second shall be overriding.

You shall not be entitled, as one of **Our** members, to participate in any distribution of surplus assets by reference to this policy if **We** are dissolved.

www.nfumutual.co.uk

NFU Mutual is The National Farmers Union Mutual Insurance Society Limited (No. 111982).
Registered in England. Registered Office: Tiddington Road, Stratford upon Avon, Warwickshire CV37 7BJ.
Authorised and regulated by the Financial Services Authority.
A member of the Association of British Insurers.

For security and training purposes, telephone calls may be recorded and monitored.

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