

# Group Life Insurance for Police Federation Standalone Excepted Benefits

Policy Wording

GR01192– 07/2021

This Policy is intended for members of the Police Federation

# Welcome to Group Protection from Aviva

## What the policy wording explains

This policy wording tells you:

- what to do if you need to claim
- what is covered
- explanations of some of the terms used in this document.

We've tried to make this document as easy to understand as possible, but if you have any questions or queries about the policy please contact us and we will be pleased to help you.

## How the policy works.

If you provide us with the information we ask for, when we ask for it and pay the premiums when they are due, we will cover the members for their insured benefits, and pay these benefits should a member die.

## Outline of the Policy

The policy insures the benefits payable on the death of a member in a scheme that is set up under trust.

This policy wording, along with the policy schedule, sets out details of the cover we have agreed to provide to you. It is evidence of a legal contract between you and us.

Some terms of the policy depend upon the information provided by you. Failing to disclose information, giving false information or failing to tell us where any facts have changed since they were provided where done deliberately or recklessly gives us the right to cancel the policy. If the information was given carelessly or the failure to disclose the information was careless, then we will have the right to amend the policy to be consistent with what the terms should have been based on the correct information (or cancel the policy if we would not have offered any terms for the policy applied for).

If you fail to comply with all of the policy terms and conditions, we may not pay claims. We may also cease to accept further premiums, meaning cover under the policy will cease.

The policy will not have or accrue any surrender value.

This insurance is provided by Aviva Life & Pensions UK Limited.

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## Please note

Throughout this document certain words are shown in **bold** type. These are defined terms and have specific meanings when used in this policy wording. The meanings of these words are set out in the Definitions section in the back of this booklet.

## 1 What benefits are covered

**We** can cover **members** and **eligible persons** for a lump sum benefit,

**We** can only provide one level of cover in accordance with the **excepted group life policy conditions**, however **we** can write additional **policies** if more than one **member** or **eligible person** has cover at a different level.

The **policy schedule** will show which benefits **you** have chosen to provide for **members** and **eligible persons**. Payment of benefits by **you** must be made in accordance with the **scheme rules**.

**We** will confirm the benefits provided by this **policy** at the **start date**, and at each **anniversary date**.

There is no limit to the level of cover **we** can insure, providing reinsurance can be arranged.

### 1.1 Lump sum benefit

The lump sum will be for a fixed amount, and is payable when a **member** or an **eligible person** dies.

**We** will pay a lump sum as instructed and authorised by **you**.

**We** will confirm the amount payable following the **member's** death. The **scheme rules** will tell **you** how to deal with this payment.

## 2 Who is covered

**Members** and **eligible persons** will be covered under this **policy**:

- on the **start date**; or
- from their **eligibility date** if they joined the **scheme** after the **start date**; or
- from when they are accepted by **us** as a **discretionary entrant**.

**You** do not need to tell **us** about new entrants during the **policy year** who have met the **eligibility** conditions. **You** must advise **us** promptly of any new **members** or **eligible persons** who do not meet these criteria.

### 2.1 When medical information is required

#### For members

If, at the **start date** or date of commencement of cover, the **member** has;

- not fulfilled the **actively at work** conditions; or
- is a **discretionary entrant**,

**medical information** will be required.

#### For eligible persons

Depending on the application process in place for your particular scheme (detailed in your **policy schedule**), the **eligible person** may be required to give **medical information**;

- as part of the standard application form; or
- if they are a **discretionary entrant**

**We** will not apply a **free cover limit** if at any time there are fewer than 5 **members** covered under the **policy**. In such cases **we** will need **medical information** for all new **members**, and **we** will also need it for existing **members** if benefits are increased. **We** may re-apply the **free cover limit** if the number of **members** returns to 5 or more.

**Discretionary entrants**, where cover will be subject to;

- a maximum of £1m of benefit insured.

The cover will not apply to any **member** or **eligible person** who has previously been:

- declined by **us** or another insurer;
- postponed by **us** or another insurer;
- restricted by **us** or another insurer; or
- who has previously declined to provide full **medical information** to **us** or another insurer.

Once underwriting is complete **we** will tell **you** if any additional premiums need to be paid.

### 2.2 Actively at work requirements

**We** will not include any **members** who are not **actively at work** on the working day prior to the start date of the **policy**. Their cover will only start once they have been **actively at work** for eight weeks, or less if acceptable **medical information** is provided to **our** underwriters in accordance with our underwriting practices applicable at that time.

We will in most circumstances waive our 'actively at work' conditions for **members** if immediately before the start of this **policy**, those **members'** benefits were covered by another insurer and provided there has been no break in cover or increases in benefit level.

However, there may be occasions when we will apply our **actively at work** conditions.

## 2.3 Discretionary Entrants

You must inform **us** promptly of all **discretionary entrants** to be covered under the **policy**.

## 2.4 Temporary Absence

Where a **member** is off work due to illness or injury we will continue cover up to the **cease age**, providing premiums continue and a UK, Channel Islands or Isle of Man contract of employment is maintained.

Where absence is due to any other reason we can continue to provide cover for a maximum of 36 months providing premiums continue and a contract of employment is maintained. We will also cover a career break up to a maximum of 5 years.

Any increases in benefit during this period will be limited to a maximum of 7% per year.

For existing **schemes** temporary absence cover may be limited in line with the **scheme's rules**.

## 2.5 Overseas Cover

You must tell **us** about any **members** or **eligible persons** who are working **overseas** at the **policy** start date or **rate guarantee date**. You must also tell **us** the countries that they will be working in.

We will maintain cover for **members** or **eligible persons** who are travelling outside of the UK, Channel Islands or Isle of Man whilst on holiday, or travelling overseas for work, for example; attending conferences or meetings.

We will cover **members** or **eligible persons** who are working outside of the UK, Channel Islands and the Isle of Man, provided that:

- they are working overseas in one of the listed **standard territories** or any additional locations detailed in **your policy schedule**; and
- they remain a member of the Police Federation; and
- the premium to cover **members** or **eligible persons** based overseas is paid in sterling by **you**; and
- they are still eligible for cover under the **policy**

You must tell **us** immediately about any **members** or **eligible persons** who are working in a country that is not part of the UK, Channel Islands or Isle of Man, in a country not listed in our **standard territories** or any additional locations detailed in **your policy schedule**. In order to consider cover, we will require full details of these individuals including their location and the duration they expect to be located overseas before we can agree cover. There may be circumstances where we are unable to provide cover.

Special terms and conditions may apply for cover to **overseas members**.

You should seek your own independent advice if you wish to continue to provide cover for any **members** who move to another territory.

## 3 Additional Policy Cover

### 3.1 Early Retirement

For all **policies**, if requested and accepted by **us**, we can cover all **members** or a category of **members** for death benefits during early retirement:

- from the day of their early retirement.
- up to the **cease age** of the **policy**/category.

The benefit covered will be as specified on the **policy schedule**.

Members have 30 days (unless otherwise agreed by **us**) to confirm they are continuing in the scheme as a retired officer.

## 4 When cover ceases

We will stop covering **members** when:

- they die; or
- they leave the **scheme**; or
- they leave service unless retirement cover is selected; or
- they reach the **cease age**; or
- When a **member** moves **overseas** to a location not listed in our **standard territories** or any additional locations detailed in **your policy schedule**, unless otherwise agreed; or
- premiums have not been paid within 60 days of the due date; or
- you ask **us** to cancel the **policy**;

whichever happens first.

Where the **member** has elected to provide cover for an **eligible person**, this cover will cease at the earlier of:

- the **member** or **eligible person** dies
- the **member** leaves the **scheme**
- the **member** leaves service (unless retirement cover is selected)
- the **member** or **eligible person** reaches the **cease age**
- When a **member** or **eligible person** moves **overseas** to a location not listed in our **standard territories** or any additional locations detailed in **your policy schedule**, unless otherwise agreed; or
- premiums have not been paid within 60 days of the due date
- you ask **us** to cancel the **policy**

unless otherwise advised by **us**.

## 5 Policy Limitations

### 5.1 Event limits (including sub-event limits and travel limits)

**We** may apply an **event limit** to the **policy**. The benefits payable may be reduced and/or limited, if **event claims** arise directly or indirectly out of or in connection with, an **event**. **Our** maximum liability in respect of all benefits under this **policy** and any **linked policy** for which an **event claim** shall not exceed the **event limit** amount specified on your policy schedule. In some instances, we may also apply a **sub event limit** or **travel limit** to your **policy**. Where these limits apply, they will be shown on **your policy schedule**.

**We** shall determine what is an **event** and **we** will tell **you** why we have reached **our** decision.

**We** shall be discharged from all liability for **event claims** in excess of the **event limit**, **sub event limit** or **travel limit** by payment of an aggregate sum up to a maximum of those specified limits, having considered all of the relevant circumstances. This may involve any form of proportionate or other reduction of any amount, which would otherwise have been made available for payment to any individual **members** or **eligible persons**, or their representatives, but for the effect of these aggregate limits.

In addition to these monetary limits, we may also apply an **event time limit** to the **policy**. The **event time limit** will be declared by **us** as soon as reasonably possible after the **event**, and **we** will tell **you** why **we** have reached **our** decision.

**We** will pay an **event claim** during the **event time limit** up to an aggregate total of the **event limit**. **Event claims** made within the **event time limit**, but after the **event limit** has been exceeded will not be paid.

Once the **event time limit** expires, the **event** and **event limit** it relates to will no longer apply and an **event claim** will be assessed as a claim.

## 6 Calculation of premiums

Premiums are paid by **you** or the **Federation** on behalf of each **member** and must be paid as agreed with Aviva.

The premiums payable are calculated by multiplying the number of **members** and **eligible persons** to be covered under the **policy**, by the individual cost for that level of cover as agreed at the **start date** and subsequent **rate guarantee dates**.

### Minimum premium

The minimum premium **we** will charge is £600.

### 6.1 What information is needed to calculate your premiums

**You** do not need to tell **us** about new entrants during the **policy year** who have met the **eligibility** conditions, provided that the **members** benefits are not above the **policy free cover limit**.

However, each month, along with the premium payment, **we** require **you** to detail the number of **members** and **eligible persons** in each membership category.

## 6.2 When premium rates are reviewed

- a. **We** reserve the right (in line with reasonable underwriting practice) to vary or amend the premium and terms offered or cancel the **policy** at any time in respect of all **members** and **eligible persons** if:
  - the total sum insured covered changes by 25%
  - there is a change to the **benefit** basis of the **policy** and/or **eligibility** of the **policy**.
- b. **We** may change the terms to respond, in a proportionate manner, to changes in taxation, the law or interpretation of the law, decisions or recommendations of an Ombudsman, regulator or similar person, or any code of practice with which **we** intend to comply.
- c. Failing to disclose information, giving false information or failing to tell **us** where any facts have changed since they were provided where done carelessly or where the failure to disclose the information was careless, gives **us** the right to amend the **policy** to be consistent with what the terms should have been based on the correct information (or cancel the **policy** if **we** would not have offered any terms for the **policy** applied for).

## 7 Non payment of premiums

**We** will cancel the **policy** upon non payment of premiums. Payment of premiums must be made within 60 days of the original request date. This will mean **you** will have no cover in place with **us** for future lump sum benefits and may result in an uninsured liability.

Any entitlement to any benefits that have not already been paid will continue to be paid by **us** on the terms already confirmed to **you**.

Subject to **our** reasonable requirements, **we** may reinstate cover if the premium is subsequently paid within a reasonable period, provided there have been no changes which would have altered **our** decision to provide cover.

## 8 Policy changes and cancellation

### 8.1 What we need to know

**You** need to inform **us** immediately if:

- **you** want to change the cover or **eligibility** criteria for the membership,
- there are any material changes to the **Federation** or **trustees**,
- a group employment transfer takes place (either into or out of the **policy**),
- any **member** or **eligible person** moves overseas to a location which is not listed in **our standard territories** or any additional locations detailed in **your policy schedule**;
- **you** want to include any additional cover
- the total sum insured increases/decreases by 25% from the last premium rates review date (or **start date** if rate review not yet happened)

- there is any change to the **scheme rules** that affects future or existing membership/benefits
- **you** want to cancel the **policy**.

However, **we** will reserve the right to cancel the **policy** if;

- **you** do not give **us** the information and documentation that **we** need to administer the **policy**
- the number of **employees** under this **policy**, combined with any **linked policy** covered, drops to 99 or below.

If the provision of cover would cause, or be reasonably likely to cause, **us** to breach any law or regulation in the given territory **we** reserve the right to cease cover within that territory.

## 8.2 When a change can be made by you

Requests to change the **policy** can be made at any time. **We** will need to be informed in writing prior to the date **you** wish to alter the **policy**. **We** will then inform **you** of any information **we** need. **We** will write to inform **you** of **our** agreement (or reason for declining) to the change and the date from which it is effective.

## 8.3 When we can make changes to the policy

**We** reserve the right to change the terms and conditions provided for in this **policy** at any **rate guarantee date**.

**We** may, at each **rate guarantee date**, or at any time if required, make reasonable changes to the terms and conditions provided for in this **policy** and any **linked policy** which, are needed to:

- respond in an appropriate manner to changes in the way **we** administer policies of this type;
- respond in an appropriate manner to changes in general practice in the insurance industry;
- respond in an appropriate manner to changes in taxation, the law or interpretation of the law, decisions or recommendations of a Court, Ombudsman, Regulator or similar person, or any code of practice with which **we** intend to comply; or
- correct errors that need correcting and it is reasonable to do so.

If **we** consider any change is to **your** advantage or is needed to meet regulatory or legal requirements, **we** may make the change immediately and tell **you** at a later date.

**We** will tell **you** in writing of any change **we** consider is to **your** disadvantage (other than any change needed to meet any legal or regulatory requirements) at least 30 days before the change becomes effective, unless it is not possible for **us** to do this, in which case **we** will give **you** as much notice as **we** can.

## Sanction Checking

In order for **us** to help manage **our** exposure to the risk of financial crime, **we** will, from time to time, undertake a sanction check of the company, its directors and its ultimate parent company as well as the country in which the company/ultimate parent company is

based. If, as a result of **our** investigations **we** believe that providing a group protection contract would place Aviva at a high risk to exposure of financial crime, **we** reserve the right to cancel or amend the **policy** as appropriate.

## 8.4 How to cancel the policy

There is no cooling off period. **You** may cancel this **policy** at any time in accordance with the **scheme rules**.

If the **policy** is cancelled for any reason, a final account will be provided based on the cover that **we** have actually provided. **We** will either pay a refund to **you**, or **you** will need to pay any outstanding premiums to **us**.

All cover under this **policy** will stop on the date agreed with **us**.

Any lump sum benefit payments, to which entitlement has arisen, that has not been made, will still be paid.

There will be no surrender value under this **policy** if it is cancelled at any time.

**We** will not backdate any cancellation.

# 9 Claims

## 9.1 What information is needed to make a claim

If **you** need to make a claim **you** must give **us** written notice as soon as possible after a **member's** or **eligible person's** death. **You** must provide **us** with any documents and information that **we** may reasonably need to process **your** claim.

There are two ways **you** can submit a claim;

- by fully completing an on-line claim form at [www.aviva.co.uk/grouplifeclaim](http://www.aviva.co.uk/grouplifeclaim); or
- by fully completing a paper claim form.

**We** may be able to validate deaths electronically in some circumstances. However, where this is not possible **we** will require the **member's** or **eligible person's** original death certificate or coroner's interim certificate.

**We** may also ask for:

- medical records of the **member** or **eligible person**;
- any necessary employment records;
- a copy of any relevant authorisation showing who is empowered to sign for and act on behalf of the **trustees**;
- evidence of membership and earnings;
- the **member's** or **eligible person's** birth certificate.

### Please note

**We** will not pay any claims made more than 2 years after the earlier of:

- the day the **scheme administrator** first knew of the **member's** or **eligible person's** death; or

- the day on which the **scheme administrator** could reasonably have known of the **member's** or **eligible person's** death.

Lump sum benefits are payable to the **trustees**. **We** will consider, where requested, payments elsewhere to a UK bank account. All payments will be made in pounds sterling and will be in line with the **excepted group life policy conditions**.

## 10 Further policy conditions

### 10.1 Accurate information

**We** rely on the information given to **us**.

If any of the information **you** give **us** is untrue or incomplete, and might have reasonably affected **our** decision to provide **you** with this **policy** or the terms **we** offered for the **policy**, then **we** may:

- change the terms of this **policy**; or
- restrict the benefits payable under this **policy**; or
- cancel this **policy**.

Where **we** do any of these, **we** will refund any overpayment of premium less **our** reasonable expenses.

### 10.2 Currency and jurisdiction

This **policy** is issued in England and is subject to English Law. All payments to or by **us** under this **policy** will be made in pounds sterling.

### 10.3 Contacting us

If **you** need to contact **us** about this **policy**, please contact **us** at the address shown in the **policy schedule**, quoting **your policy** number. Alternatively call **us** on 0800 0513472.

**We** may refuse to take action until **you** have met all of **our** reasonable requirements. **We** may ask **you** to send **us** any relevant forms or other documents, completed by the appropriate person(s).

### 10.4 Third party rights

No person other than Aviva Life & Pensions UK Ltd and **you** will have any rights under this **policy**. Any person who is not a party to this **policy** shall have no rights under the Contracts (Rights of Third Parties) Act 1999 to enforce any terms under this **policy**. Reference to, or the consent of, any person who is not a party to the **policy** is not required for any changes to it or its termination.

## 10.5 Data Protection

**We** and **you** will act as a separate and independent **Data Controller** in relation to the **Personal Data** which is processed for the administration of the **policy**.

**We** and **you** will each comply with their respective obligations under the **Data Protection Laws** in respect of the **processing** of **Personal Data**.

Where **Personal Data** is disclosed by **us** or **you** to the other party, the party disclosing the data will:

- only disclose the **Personal Data** for one or more defined purposes which are consistent with the terms of the **policy** (other than to comply with a requirement of applicable law to which a party is subject)
- take all reasonable steps appropriate to provide a fair processing notice to those **Data Subject(s)** whose **Personal Data** are to be disclosed under the **policy**, informing them that their **Personal Data** will be disclosed for the defined purposes;
- obtain the necessary consents or authorisations required to permit the disclosure of such **Personal Data**.

Where data is received by **you** or **us**, the recipient will notify the other without undue delay following any **Personal Data Breach** involving the **Personal Data** and each of us will co-operate with the other, to the extent reasonably requested, in relation to any notifications to **Supervisory Authority** or to **Data Subjects** which are required following a **Personal Data Breach** involving the **Personal Data**.

Each party shall co-operate with the other, to the extent reasonably requested, in relation to:

- any other communication from a **Data Subject** concerning the **Processing** of their **Personal Data** including requests to exercise their rights; and
- any communication from a **Supervisory Authority** concerning the **Processing** of **Personal Data**, or compliance with the **Data Protection Laws**.



## 11 If you have cause for complaint

Our aim is to provide a first class standard of service to our customers, and to do everything we can to ensure you are satisfied. However, if you ever feel we have fallen short of this standard and you have cause to make a complaint, please let us know. Our contact details are:

Group Protection Complaints  
Aviva Life & Pensions UK Ltd  
PO Box 3240  
Norwich  
NR1 3ZF

Telephone: [0800 1582714](tel:08001582714)  
E-mail: [gpcomplaints@aviva.com](mailto:gpcomplaints@aviva.com)

We have every reason to believe that you will be totally satisfied with your Aviva policy, and with our service. It is very rare that matters cannot be resolved amicably. However, if you are still unhappy with the outcome after we have investigated it for you and you feel that there is additional information that should be considered, you should let us have that information as soon as possible so that we can review it. If you disagree with our response or if we have not replied within eight weeks, you may be able to take your case to the Financial Ombudsman Service to investigate. Their contact details are:

The Financial Ombudsman Service  
Exchange Tower  
London  
E14 9SR

Telephone: [0800 023 4567](tel:08000234567)  
Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)  
Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

Please note that the Financial Ombudsman Service will only consider your complaint if you have given us the opportunity to resolve the matter first. Making a complaint to the Ombudsman will not affect your legal rights.

### **Financial services compensation scheme (FSCS)**

The Financial Services Compensation Scheme (FSCS) may cover your policy. It'll cover you if Aviva becomes insolvent and we are unable to meet our obligations under the policy. For this type of policy, the FSCS will cover you for 100% of the total amount of an existing claim. The FSCS will also provide a refund of 100% of the premiums that have not been used to pay for cover whether you are making a claim under the policy or not.

For further information, see [www.fscs.org.uk](http://www.fscs.org.uk) or telephone 0800 678 1100.

# Definitions

## Actively at work

Means a **member** is actively at work and not working against medical advice. The **member** must be:

- following their normal occupation;
- working their normal number of contracted hours; and
- working at their normal place of business or at a location where the business needs them to travel.

for a continuous period of 8 weeks.

## Anniversary date

An anniversary of the **start date**, unless **you** have agreed another date with **us**. This date is stated in the **policy schedule**.

## Cease age

Midnight on the day before the age at which cover for a **member** or **eligible person** ceases, as set out in the relevant **policy schedule** applicable to that **member** or **eligible person**. The maximum age can't exceed midnight on the day before a **member's** or **eligible person's** 75th birthday.

## Data Controller, Data Subject, Personal Data Breach, Process/Processing and Supervisory Authority

Will be the same meaning as in the **Data Protection Laws**.

## Data Protection Laws

Means the General Data Protection Regulation (EU) 2016/679 (**GDPR**) (together with laws implementing or supplementing the GDPR in Member States, in each case as amended and superseded from time to time), and/or all applicable laws, rules, regulations, regulatory guidance, regulatory requirements from time to time.

## Discretionary entrant

Any officer applying to join the **scheme** who does not meet our **actively at work** criteria.

Also, any **eligible person** who:

- is not joining at the same time as the officer; or
- is not joining within 3 months of marriage/civil partnership to a **member** of the policy; or
- is a co-habitee of the officer and joining more than 3 months after their first opportunity (co-habitees can only join the **scheme** once they have lived with the officer for a period of 6 months)

## Eligible person

The spouse, civil partner or nominated partner for whom the **member** has elected to provide cover under this **policy** or, the natural or adopted child of the **member** or any other child who was, in the **trustees** opinion, financially dependent on the **member**.

## Eligible/Eligibility

The factor(s) **we** consider when assessing whether or not a person can be automatically covered by the **policy**. This will be detailed in the **policy schedule**.

## Event Limit

A monetary limit that applies to the total value of claims that can be made following an event. Where an event limit is applied it will be shown in **your policy schedule**.

## Excepted group life policy conditions

The conditions for being an excepted group life policy set out in section 480(3) of the Income Tax (Trading and Other Income) Act 2005.

## Federation

The Police Federation that is participating in the **scheme**.

## Free cover limit

The level of benefit (as stated in the **policy schedule**) under which **medical information** is not needed.

## Linked policies

Any Aviva registered group life, excepted group life or supplementary relevant life insurance policy taken out by the **Federation** covering different categories of **members** and **eligible persons** and/or benefits.

## Location(s)

Specified location(s) as detailed in your **policy schedule**

## Medical Information

Information including but not limited to medical history and lifestyle factors, required to fully assess the **member** and enable **us** to apply an underwriting decision.

## Member

The new recruit, serving officer or retired officer of the Police **Federation**, covered under the **scheme**.

## Overseas

Any country that is not part of the United Kingdom, Channel Islands or Isle of Man.

## Personal Data

Means any personal data, as defined in the **Data Protection Laws**, disclosed by **you** or **us** to the other in the performance of that party's rights or obligations under the policy.

## Policy

The Aviva group life insurance policy (including the **policy schedule** together with any endorsements), which covers the policy benefits and forms the contract between **you** and **us**.

## Policy schedule

The current schedule (as issued by **us** from time to time) stating details of the **Federation**, cover provided by this **policy** and any endorsements (if applicable).

## Policy year

The period between:

- the **anniversary date** and rate guarantee date; or
- the **start date** and the first **anniversary date**.
- an **anniversary date** and the date of termination of the **policy** (if termination occurs before the next **anniversary date**)

## Premium Rate

The rate of premium specified in the **policy schedule** as the premium rate as changed from time to time being the amount payable for the specified lump sum benefit covered under the **policy**.

## Rate guarantee date

The date until which rates are guaranteed to apply as shown on the **policy schedule**.

## Scheme

The scheme named as the scheme in the **policy schedule**.

## Scheme administrator

The person(s) appointed in accordance with the **scheme rules** to be responsible for the day to day running of the **scheme** as detailed under Part 4 of Finance Act 2004.

## Scheme rules

The rules of the **scheme**.

## Standard Territories

All European Union (EU) countries, Andorra, Australia, Canada, Gibraltar, Hong Kong, Iceland, Liechtenstein, Monaco, New Zealand, Norway, San Marino, Singapore, Switzerland, UAE, USA and the Vatican City.

## Start date

The date the **policy** starts, as stated in the **policy schedule**.

## Sub Event Limit

A monetary limit that applies to the total value of claims that can be made following an **event**, for claims relating to **members** located at the **location(s)** including travelling to and from the **location(s)** for work purposes. The **location(s)** will be shown and detailed in your **policy schedule**. The **sub event limit** is included within the overall **event limit** and is not in addition to it. Where a **sub event limit** is applied it will be detailed in **your policy schedule**.

## Travel Limit

A monetary limit that applies to the total value of claims that can be made following an **event**, which applies when **members** are travelling together for work purposes. The **travel limit** is included within the overall **event limit** and is not in addition to it. Where a **travel limit** is applied it will be detailed in **your policy schedule**.

## Trustees/you/your

The current trustees of the **scheme** as stated in the **policy schedule**.

## We/our/us

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