

# Simple Life Insurance Policy Conditions

## Keep this document safe

These **policy conditions** are written confirmation of your contract with Aviva Life & Pensions UK Limited and should be read together with your **policy schedule** and policy summary.

You may need to refer to these documents in the event of a claim.

The words in **bold** are defined terms with specific meanings. We explain these in the definitions section.

### Any questions?

Call us on:

 **0800 285 1098**

If you're outside the UK, call:

 **+44 1603 603 479**

**Lines are open Monday to Friday 8am to 6pm.**

Calls may be monitored and will be recorded.

### Need to make a claim?

Please read our 'Making a claim' section first then call us on:

**0800 158 3467**

**Lines are open Monday to Friday 8am to 6pm and Saturday 8am to 2pm.**

if you're outside the UK, call: +44 1603 202 500 option 1.  
Calls may be monitored and will be recorded

Calls to 0800 numbers from UK landlines and mobiles are free. The costs of calls to 01 prefixed numbers are charged at national call rates (charges may vary dependent on your network provider) and are usually included in inclusive minute plans from landlines and mobiles.

Please note - our call centre opening hours are correct at the time of publishing this document, but may change in future. Please refer to our website for further information at **Aviva.co.uk**.

# Your cover

Your policy provides cover for death and terminal illness as the **main benefit**. At the start you can choose to have this paid on a level or decreasing basis.

	Level cover	Decreasing cover
How do we pay the <b>cover amount</b> if you make a successful claim?	Cash lump sum	Cash lump sum
Does the <b>cover amount</b> change over the <b>policy term</b> ?	Stays the same	Decreases each month using a fixed interest rate

You can have either a **single policy** for one person or a **joint policy** for two people, usually you and your partner, spouse or civil partner. Your **policy schedule** will show who your policy covers and how you've chosen to receive your **main benefit** if we accept your claim.

# Main benefit

With life cover, we'll only pay the **main benefit** once, even for **joint policies**. This means the policy – whether **single** or **joint** – will end when we accept a claim for one of the following **main benefits**:

## Death benefit

### Our criteria

We'll pay this if the **life covered** dies during the **policy term**.

We won't pay this if the **life covered** dies because of suicide or intentional, self-inflicted injury within 12 months of the policy **start date**. If this happens, the policy will end.

### What do we pay?

We'll pay the **cover amount** shown in the **policy schedule**.

## Terminal illness benefit

### Our criteria

We'll pay this if the **life covered** is diagnosed with a terminal illness that meets our definition (set out below), during the **policy term**.

**Terminal illness** – where death is expected within 12 months

A definite diagnosis by the **attending consultant** of an illness that either has no known cure or has progressed to the point where it cannot be cured, and in the opinion of the **attending consultant** and our Medical Officer, is expected to lead to death within 12 months.

### What do we pay?

We'll pay the **cover amount** shown in the **policy schedule**.

# Making changes to your policy

You can make certain changes to your policy from six months after the **start date**. If you make any changes, they'll apply from the date your next premium is due.

We've set out the changes you can make below. We'll amend your existing policy when you make a change and we won't ask you any more medical questions.

## Type of change

- Reduce the **cover amount**
- Reduce the **policy term**

When we make the change, we'll use the original premium rates based on the **personal circumstances** of the **life covered**.

After you've made any of the above changes, your premium can't be lower than the minimum premium limit which applies at the time we agree to your request.

These **policy conditions** will continue to apply to your amended policy.

# Making a claim

If you need to make a claim, please contact us on **0800 158 3467** (from outside of the UK, please call **+44 1603 202 500**). Our claims line is open Monday to Friday 8am to 6pm and Saturday 8am to 2pm. Calls may be monitored and will be recorded.

## Before we can pay a claim we need to assess it

To do this, we'll ask for some important information. If we ask for information from third parties, we'll pay for it. If you want to, you can provide additional evidence at your own expense.

The kind of information we need includes, but isn't limited to:

- Proof that the event giving rise to the claim has happened.
- Proof of who legally owns the policy.
- Written consent that lets us:
  - access the medical reports of the **life covered**
  - receive the results of any medical examinations or tests of the **life covered**
  - have conversations with, and obtain reports from, third parties such as coroners, **attending consultants** and the police.

If a claim is made, all medical certificates and results of medical examinations must be provided by medical practitioners. These practitioners must be resident and practising in one of these places: Andorra, Australia, Canada, the Channel Islands, the European Union, the Faroe Islands, Gibraltar, the Isle of Man, Liechtenstein, Monaco, New Zealand, Norway, San Marino, Switzerland, the UK, USA or the Vatican City.

# Making a claim

## Before we can pay a claim we need to assess it continued

When we assess a claim, we rely on the information we're given. If any of the information is untrue or incomplete, it could affect whether we pay a claim or not, and may mean we won't pay a claim. It may also mean we can reclaim the money if we've already paid a claim. If this happens, we won't make any further payments. We may also cancel the policy without refunding any premiums.

This doesn't affect any other legal rights we have.

If we accept a claim, we'll make any relevant payment to the person who is legally entitled to receive it.

## We won't be able to pay anything if:

- your policy has ended because you haven't paid your premiums
- you've cancelled your policy
- you're diagnosed with a terminal illness and you're expected to live longer than 12 months
- you die in the first 12 months of the **policy term** because of suicide or intentional, self-inflicted injury
- you die or are diagnosed with a terminal illness outside the **policy term**

This isn't the kind of policy that you can 'cash in' – so you don't get any money if you cancel it.

# Your premiums

You need to pay your premiums to keep your policy in force.

You can pay premiums yearly or monthly by direct debit. All direct debits need to come from a bank or building society in the UK, the Channel Islands, the Isle of Man or Gibraltar, in the currency of the UK.

Your **policy schedule** will show the premium you'll pay, together with the date it and subsequent premiums are due. You have 60 days from each due date to pay your premium. If you have to make a claim during this period, we'll deduct the unpaid premium from any benefit we pay.

If you have an unpaid premium and we ask you to pay that unpaid premium, we'll only accept payment from a debit card. We'll also need you to provide new bank account details to ensure that your regular premium payments can continue.

If you don't pay your premiums within the 60 day period, we'll cancel your policy. If this happens, you won't be able to make a claim.

Your premiums are guaranteed and won't increase over the **policy term**.

# General

## Changing your details

You need to let us know if your contact details, or those of any **life covered**, change.

## Acceptance of instructions

We can't accept any instruction, request or notice from you until we receive all the information we need. We'll tell you what kind of information or documentation we need.

## Cancelling your policy

You have a 30 day cooling off period to change your mind. If you cancel within this period, we'll refund any premiums you've paid.

The cooling off period begins on the later of:

- the day we tell you when your policy will start, and
- the day you receive your policy documents.

You can still cancel the policy after the cooling off period ends, but we won't refund your premiums. If you do this, you won't be able to make a claim.

## Eligibility

The eligibility criteria applies to both you as the policyholder and the **life covered**, if different.

The policyholder and the **life covered** must be at least 18 years old to apply for this policy.

At the time you complete the application, both you and the **life covered** must:

- be in the UK, the Channel Islands, the Isle of Man or Gibraltar, with a legal right to live in that jurisdiction, and
- consider your main home as being in the UK, the Channel Islands, the Isle of Man or Gibraltar and have no current intention of moving anywhere else permanently.

You need to tell us if you move outside of the UK, the Channel Islands, Isle of Man or Gibraltar, and your main residence is in another territory. Laws in the territory you become resident in may affect your ability to continue to benefit fully from the features of your policy. We may need to change, reduce or remove any of your policy terms. We'll give you details once you've told us. You should seek your own independent advice to consider your options if you move to another territory.

Regardless of what is set out elsewhere in these terms we will not be obliged to exercise any of our rights and/or comply with any of our obligations under this policy, if to do so would cause, or be reasonably likely to cause, us to breach any law or regulation in any territory.

# General

## General conditions

### Policy amendments

We may alter these **policy conditions** for any of the following reasons:

- To respond, in a proportionate manner, to changes in:
  - the way we administer these type of policies
  - technology or general practice in the life and pensions industry
  - taxation, law or the interpretation of the law, decisions or recommendations of an ombudsman, regulator or similar body, or any code of practice with which we intend to comply.
- To correct errors if it is fair and reasonable to do so.

If we think any change to these **policy conditions** is to your advantage, we'll make it immediately and tell you afterwards. We'll also do this if we have to make the change due to regulatory requirements.

If any change is to your disadvantage, we'll aim to tell you in writing at least 60 days before we make it. However, external factors beyond our control may mean we have to give you less notice.

If you're not happy with any change we make to your policy, you can cancel it.

### Incorrect information

If the date of birth of any **life covered** is wrong, we'll base the payment we make for any successful claim on the correct date of birth. We'll tell you if this happens.

If the correct date of birth of any **life covered** when you took out your policy would put them outside our age and cover amount limits, we'll cancel your policy.

We rely on the information provided to us. If any of it is untrue or incomplete and would have affected our decision to provide your policy, we may:

- change the terms of your policy
- change your premiums
- cancel your policy and refund the premiums you've paid (without interest).

If we cancel your policy, you won't be able to make a claim.

### Third party rights

This policy does not give any rights to anyone except you and us.

With your agreement, we may change or cancel this policy without reference to, or consent from, any other person.

### Fairness of terms

We'll always act reasonably and treat you and all of our customers fairly.

These **policy conditions** will apply to your policy so long as they are not held by a relevant court, or viewed by the Financial Conduct Authority or by us, to be unfair contract terms. If a term is unfair it will still apply as far as possible, but without any part which makes it unfair.

### General

If you want to transfer ('assign') the policy to someone else, you must tell us in writing before we can pay a claim.

Where appropriate, words in the singular include the plural and vice versa.

### Law

This policy is issued in England and is governed by the law of England. Your contract will be in English and we will always write and speak to you in English.

# Definitions

Throughout these **policy conditions** we have highlighted defined terms in **bold** type (except for personal terms like “we” and “you”) so you know when they apply. We’ve set out the meanings of these words below.

“You” or “your” refers to the **policyholder(s)** named in the **policy schedule**, or anyone else who becomes the legal owner of the policy.

“We”, “us” or “our” means Aviva Life & Pensions UK Limited.

## Attending consultant

A surgeon, anaesthetist or physician who is legally entitled to practice medicine or surgery. They must have attended a recognised medical school and be recognised by the relevant authorities in the country in which any treatment takes place as having a specialised qualification in the particular field.

## Cover amount

The amount we pay for the **main benefits** under this policy. The **cover amount** is shown in your **policy schedule** together with your chosen basis for receiving the amount upon a successful claim (that is, level or decreasing cover).

## End date

The date that cover under this policy will end. This is shown in your **policy schedule** either as a specific date, or an expiry age.

## Joint policy

The policy can cover up to two people. A **joint policy** will only pay out once following a successful claim for the **main benefit**.

## Life covered (or lives covered)

The person whose life is being covered. There can be more than one if you have a **joint policy**.

## Main benefits

The **main benefits** are death benefit and terminal illness benefit.

## Policy conditions

This document forms our contract of insurance with you. The application you made (and which we have accepted) and the **policy schedule** also form part of the contract. You should read these documents together with these **policy conditions**.

## Policy schedule

This shows the specific detail of your policy, such as:

- the life or **lives covered**
- the **cover amount**
- whether we’ll pay the **main benefits** on a level, or decreasing basis, and
- how much your policy will cost.

“**Policy schedule**” also includes any subsequent changes to your policy, which we’ll confirm to you in writing at the time.

## Policy term

This is the period your policy is in force, from the **start date** until the **end date**.

## Single policy

A policy which covers the life of just one person.

## Start date

The date on which cover under this policy starts. It’s shown in the **policy schedule**.

# Braille, large font, audio material

You can order this document in braille, large font or audio. Just call **0800 285 1098** (**44 1603 603 479** from outside the UK) or email [protection@aviva.com](mailto:protection@aviva.com) and tell us:

- the format you want
- your name and address
- the code of this document, **AL20002**.

Calls may be monitored and will be recorded.