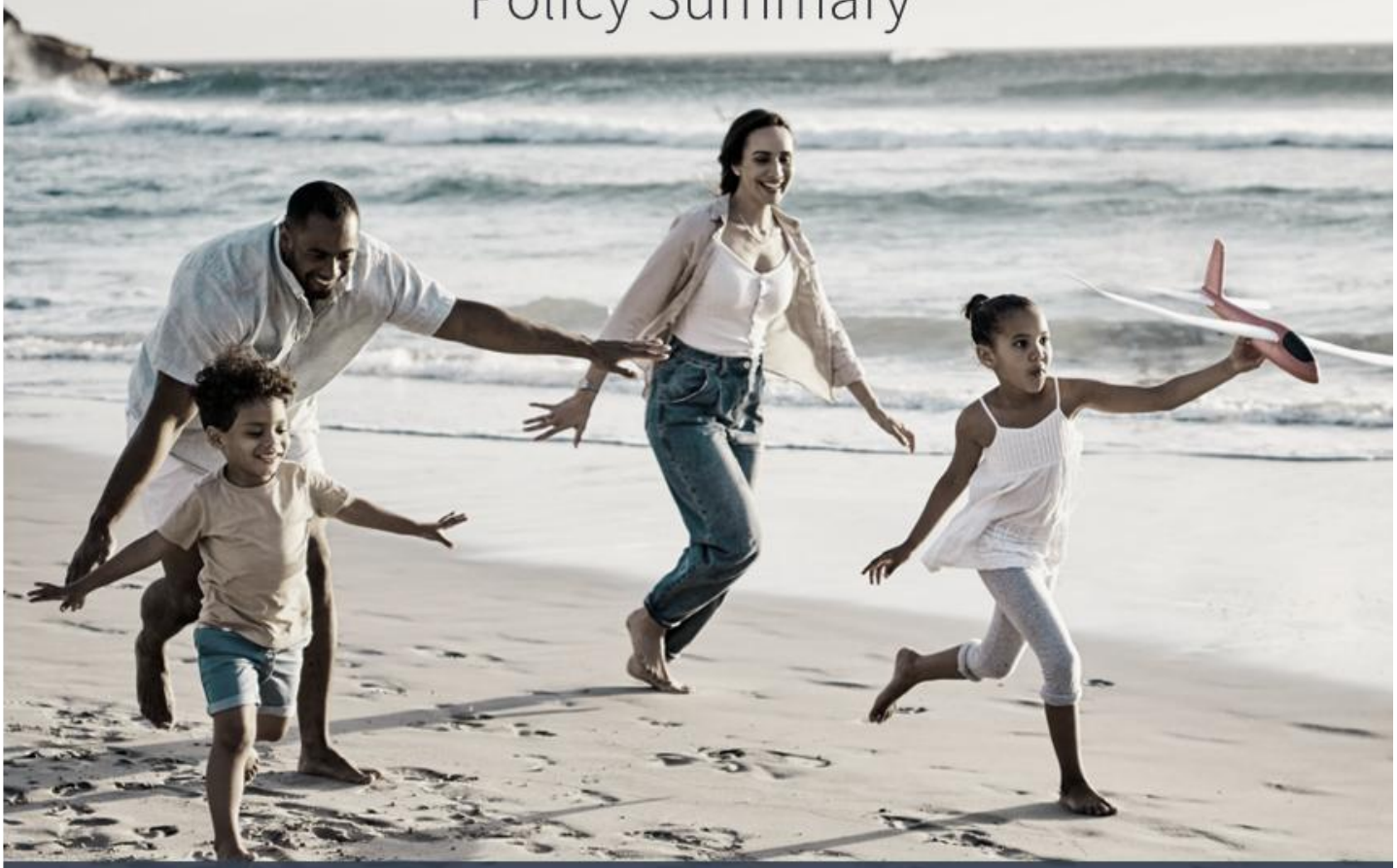
Life Empowered

Dividend Term Life with Multi-Claim Critical Illness Cover

Policy Summary



Assura + Protect

Policy Summary

Dividend Term Life with Multi-Claim Critical Illness Cover Policy Summary

+ This document is a summary of your cover and the significant exclusions and limitations. Full details are provided to you in the Policy Terms and Conditions.
+ This policy is designed to help protect against the financial impact of death, terminal illness and/or critical illness.
+ Total Permanent Disability (TPD) could be used to help pay your outstanding mortgage or to help protect your family's lifestyle and cover everyday living expenses.
+ This policy offers you a selection of cover options, including multiple claims throughout the term of the cover subject to the Policy Terms and Conditions.
+ This policy can cover two people, usually you and a spouse or partner, if you select a dual plan option. Each life insured will receive the same type of cover and sum assured for the same duration.
+ Your Assura policy will be arranged by Assura Financial Ltd, which is entered on the Financial Conduct Authority Financial Services Register under reference number 795982.
+ Your policy will be underwritten and issued by Family Assurance Friendly Society Limited, which is authorised by the Prudential Regulation Authority (PRA) and regulated by the Financial Conduct Authority (FCA), (Financial Services Register reference number 110067), and incorporated under the Friendly Societies Act 1992, registered number 939F.
+ The Financial Conduct Authority is the conduct regulator, and they require us to provide you with the necessary information to enable you to determine if the Assura Dividend Term Life with Multi-Claim Critical Illness Cover policy is right for you.
+ Please store all your policy documents securely. Digital copies can be found in your online Annabel account.
+ Should you cancel within 30 days of receiving your Policy documents, we will refund any premiums paid.

What is covered

Dividend term life and critical illness policy covers you if, during the lifetime of the policy:

i. You die,
ii. Are diagnosed as being terminally ill (as defined in the Policy Terms and Conditions),
iii. Are diagnosed with a total permanent disability, if you have opted in for this cover when you have set up your policy. (Full details and the definition of the Total Permanent Details are provided in the Policy Terms and Conditions),
iv. Are diagnosed with one of the critical illnesses or undergo one of the surgeries outlined in Section Multi condition group categories on page 5.

Children's critical illness cover overview

+ Children's Critical Illness Cover is also included with Dividend Term Life with Multi-Claim Critical Illness Cover.
+ You will receive a payment if, during the term of the policy, an eligible child is diagnosed with a critical illness as defined in Section Children's critical illness cover on page 6.
+ Eligibility is based on age (30 days old to 18 years old or age 21 in full time education). Full details are provided

on the Policy Terms and Conditions.

+ This benefit is available once per child, to a maximum of two children, or four children for dual plans.

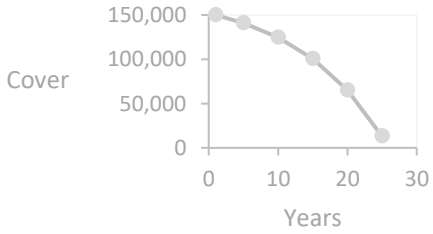
COVER OPTIONS AND CONSIDERATIONS

Option 1. Level term cover

+ If you choose Level Term Insurance, your amount of cover will stay the same unless you change it.

Option 2. Decreasing term cover

+ If you choose Decreasing Term Insurance, the policy benefit (cover amount) will reduce in a similar way to the balance of a repayment mortgage with an 8% interest rate. Your current policy benefit will be updated monthly, and the current level can be checked at any time in your online Annabel account. Below chart illustrates an example of how the policy benefit would reduce for an initial sum assured of £150,000 and 25 years term.



Key cover considerations

+ The benefit amount you select for each policy is detailed in your policy schedule.
+ We can pay for up to three critical illness claims from the major condition groups, or up to two critical illness claims from the major condition groups, and a claim for death, terminal illness or total permanent disability if opted in, up to 200% of the sum assured at the claimable event date.
+ The policy will end after payment of a claim for one of the following:
    i. Terminal Illness
    ii. Death
    iii. Total Permanent Disability (if you have selected this cover)

or after three successful critical illness claims from major conditions groups.

+ Your premiums will remain the same during the length of the policy unless you make any changes to your policy.
+ Please see the Policy Terms and Conditions for full details.

COVER OPTION, ELIGIBILITY, PROTECTION LEVELS AND BENEFIT AMOUNTS

+ For both Level and Decreasing Term Life with Multi-Claim Critical Illness policies you may purchase up to £1,000,000 worth of cover, if you are aged between 18 and 64. You are eligible to apply for a policy if you reside in the UK (except for residents of the Channel Islands or Isle of Man) and have a UK bank account.
+ Children's Critical Illness pays a one-off lump sum of the lower of £25,000 or 50% of the sum assured at the claimable event date. Any payment made under Children's Critical Illness cover does not affect the Life Assured' s maximum payout.
+ Support cover is also available (please refer to the Additional Benefits section on page 6).
+ We may need to ask your doctor for information to support or check the answers you provide us in your

application. If we do, we will obtain this information on the legal basis of 'substantial public interest' (Part 2 of Schedule 1 of the Data Protection Act 2018). We will also require your consent under the Medical Reports Act 1988 (AMRA), and we may cancel your policy if you will not provide this information to us. We may request this information up to 6 months after your policy is issued. If this information demonstrates anything that no longer makes you eligible, we retain the right to amend or even cancel the policy.

Policy age and term limits

Dividend Term Life with Critical Illness	
Minimum entry age	18 years old
Maximum entry age	64 years old
Minimum term	5 years
Maximum term	40 years
Minimum policy end age	23 years old
Maximum policy end age	70 years old

Policy Premiums

+ Your premiums will depend on several factors such as: age, health status, the type of cover you choose and the term you select.
+ You will be provided complete premium details on your quote summary and policy schedule.
+ We guarantee that your premiums will not increase during the term of your policy, unless you choose to make changes to your cover.
+ Premiums are to be paid monthly by direct debit from a UK bank account.
+ If you stop paying policy premiums your cover will lapse and you will no longer be insured. More details concerning what happens if you stop paying your premiums is provided in the Premiums section of the Policy Terms and Conditions.
+ If you want to cancel your policy, you can do so at any time by contacting us.

DUAL PLAN POLICIES

+ Your policy can cover two people, usually you and a spouse or partner, if you select the dual life option.
+ Each life insured will receive the same type of cover and sum assured for the same amount of time.
+ Dual plan polices, while reported and documented in combination with one another, are separate and independent of the other.
+ Full details about dual plans are provided in the Dual Plans section in the Policy Terms and Conditions.

MULTI CONDITION LIFE COVER

In this section below, we will detail how multi-condition and multi-claim work. Full details and benefit payout examples are provided in the Policy Terms and Conditions.

If your first claim is a Death, Terminal Illness or Total and Permanent Disability Claim

+ We will pay out 100% of the sum assured with effect from the claimable event date if any of the following occurs within the policy term:
    i. You are diagnosed with a terminal illness (as defined in the Terms and Conditions).
    ii. You are diagnosed as being Totally and Permanently Disabled (as defined in the Terms and Conditions).

iii. You die.

+ All cover under this policy would then cease and no further claims would be payable.

If your first claim is a Critical Illness Claim

+ If, during your policy term, you make a successful claim under one of the Critical Illness conditions in a Major Condition Group Category listed in your policy, we will pay out 75% of your sum assured at the time of the claimable event.
+ The conditions in the Major Condition Group Category you have claimed under will thereafter be considered Pre-paid Conditions.
+ You will not be able to make another Critical Illness claim for any condition labelled as a Pre-paid Condition for the remaining term of the policy.
+ The Critical Illness conditions under the remaining four Major Condition Group Categories are labelled as your Available Conditions. (There are full details regarding Pre-paid and Available conditions on page Policy Terms and Conditions). For example, if you suffer a Heart attack (which is in the Cardiovascular group category) no further Critical Illness claims for any condition listed in the Cardiovascular group category will be paid.
+ After our payment to you, your premiums will continue at the same level as before.

If you have made one successful Critical Illness claim, you can then submit a second Critical Illness OR one of the following claims:

i. Terminal Illness
ii. Total and Permanent Disability
iii. or a Death Claim

If your second claim is a Death, Terminal Illness or Total and Permanent Disability Claim

+ If the cause(s) of your illness, disability or death is related to the condition or surgery from your first Critical Illness claim, in the event of a successful claim, you will receive 25% of your sum assured as at the claimable event date.
+ If the cause(s) of your illness, disability or death is not related to the condition or surgery from your first Critical Illness claim, in the event of a successful claim, you will receive 100% of your sum assured as at the claimable event date.
+ All cover under this policy would then cease and no further claims would be payable.

If your second claim is a Critical Illness Claim

+ Following the first successful Critical Illness claim, if you are diagnosed with or undergo surgery for an Available Condition within the remaining term of the policy (subject to the waiting period detailed in the Claims waiting periods section) you can make a second Critical Illness claim. In the event of a successful claim, you will receive a second payment equal to 75% of your sum assured as at the claimable event date.
+ The conditions in the second Major Condition Group Category you have claimed under will thereafter be labelled as Pre-paid Conditions.
+ You will not be able to make another Critical Illness claim for any condition labelled as a Pre-paid Condition for the remaining term of the policy. For example, if you are diagnosed and make a successful claim for

  Cancer after a successful claim for Heart Attack, no further Critical Illness claims for any condition listed in the Cardiovascular group category or any condition in the Cancer and HIV group category will be paid.
+ After this payment, your premiums will continue at the same level as before.

If you have made two previous successful Critical Illness claims, you can then submit a third Critical Illness claim OR one of the following claims:

i. Terminal Illness
ii. Total and Permanent Disability
iii. or a Death Claim

If your third claim is a Terminal Illness, a Total and Permanent Disability, or a Death Claim

+ If the cause(s) of your illness, disability or death is related to the condition or surgery from your first or second Critical Illness claim, in the event of a successful claim, you will receive 25% of your sum assured as at the claimable event date.
+ If the cause(s) of your illness, disability or death is not related to the condition or surgery from your first Critical Illness claim, in the event of a successful claim, you will receive 50% of your sum assured as at the claimable event date.
+ All cover under this policy would then cease and no further claims would be payable.

If your third claim is a Critical Illness Claim

+ If you submit a third Critical Illness claim, you are only eligible to do so for the Available conditions (subject to the waiting period detailed in the Claims waiting periods section) under the remaining three Major condition group categories.
+ The maximum payment for a third successful Critical Illness claim would be the 50% of the sum assured as at the claimable event date.
+ At this point, both your plan and the premiums you pay will end and no further claims can be made.

MAJOR CONDITION GROUP CATEGORIES

+ Our product covers the major types of critical illnesses that could affect you, summarised below. Full definitions of the available critical illnesses are provided in the Policy Terms and Conditions.







Cancer and HIV	Cardiovascular Conditions	Organ Failure	Neurological Conditions	Disability
Aplastic anaemia: Categorised as very severe **Benign brain tumour:** Resulting in either specified treatment or permanent symptoms **Cancer:** excluding less advanced/low grade cases (see partial covers) **HIV Infection:** caught from a blood transfusion, physical assault or accident at work	**Cardiac Arrest**: with insertion of a defibrillator **Cardiomyopathy:** of specified severity or resulting in specified treatment **Coronary artery bypass grafts:** with surgery to divide the breastbone or thoracotomy **Aorta graft surgery:** requiring surgical replacement **Heart Attack:** of specified severity **Heart valve replacement or repair:** with surgery **Open heart surgery:** with surgery to divide the breastbone or thoracotomy **Primary pulmonary hypertension:** of specified severity	**Kidney Failure**: requiring permanent dialysis **Liver failure:** of advance stage **Major organ transplant:** from another donor **Respiratory failure:** of advance stage	**Bacterial Meningitis**: resulting in permanent symptoms **Creutzfeldt-Jakob Disease (CJD):** Resulting in permanent symptoms **Dementia including Alzheimer's disease:** resulting in permanent symptoms **Encephalitis:** resulting in permanent symptoms **Motor neurone disease:** resulting in permanent symptoms **Multiple sclerosis:** where there have been symptoms **Parkinson's disease:** resulting in permanent symptoms **Spinal stroke:** resulting in symptoms lasting at least 24 hours **Stroke:** resulting in symptoms lasting at 24 hours **Systemic lupus erythematosus:** with severe complications **Kennedy's disease:** resulting in permanent symptoms	**Blindness**: permanent and irreversible **Coma**: with associated permanent symptoms **Deadness**: permanent and irreversible **Loss of hand and foot**: permanent physical severance **Loss of Speech**: total permanent & irreversible **Paralysis of limb**: total and irreversible **Third degree burns**: covering 20% of the surface area of the body or 20% of the face **Traumatic brain injury**: resulting in permanent symptoms

+ In addition to the above covered Critical Illness conditions, your policy also includes death and/or terminal illness cover and/or, if opted in, one of the following (subject to any specific exclusions detailed in your policy schedule)
  - Total and permanent disability (own occupation) or
  - Total and permanent disability (specific work tasks)
+ Full details and definition of the total permanent disability are provided in the Policy Terms and Conditions.

ADDITIONAL BENEFITS: Partial Built – In Covers

+ Dividend life cover also provides further benefits detailed below. These do not count towards your maximum payout or impact on your available conditions.

Accidental hospitalisation benefit

+ Provides for a one-off payment of £5,000 (paid once over the term of your policy)
+ If you are hospitalised, for at least 28 days, with visible physical injuries sustained due to an unforeseen, external and violent accident during your policy term.
+ We will only pay one claim in respect of each life insured. This benefit is not payable if a valid claim has been paid for:
  i. A related terminal illness OR
  ii. A related Critical Illness OR
  iii. A related total permanent disability.

Support cover (for partial conditions)

+ If you have a successful claim under the listed partial conditions below, we will pay you 25% of your sum assured at the claimable event date or £25000, whichever is the lower.
+ After a claim has been paid under this benefit, the benefit will cease.
+ Partial conditions are:
  i. Carcinoma in situ of the breast – treated by surgery.
  ii. Low grade prostate cancer – requiring treatment.
  iii. Low grade thyroid cancer.
+ Detailed definitions of the Partial conditions are provided in the Policy Terms and Conditions.

Children's critical illness cover

+ Children's Critical Illness cover pays a one-off lump sum of the lower of £25,000 or 50% of your sum assured as at the claimable event date, should any of your children be diagnosed by a medical professional with any of the Critical Illness conditions covered under your policy. Any payment made under Children's Critical Illness cover does not affect the life insured (s) benefit amount.
+ Children must be aged 30 days old to 18 years old or age 21 in full time education at the claimable event date. Cover stops on the day before the eligible child's 18th birthday or 21st if in full time education.
+ Children's Critical Illness Cover protects any natural child or adopted child of you or your spouse or civil partner or any child for which either you or your spouse, partner or civil partner are the legal guardian of, as well as any children the life assured may have in the future. The benefit can be claimed for up to 2 eligible children, or 4 eligible children for dual plans, two for each life insured.
+ Children must survive for 10 days after the claimable event date.

+ The benefit can only be claimed once for an eligible child and is payable only once per child, regardless of how many policies are held with Assura. This includes the dual plans where two lives insured can only claim once for the same child.
+ There is no impact on the other policy benefits should a successful claim be paid under Children's Critical Illness.

RISKS TO YOUR POLICY COVER AND BENEFIT

+ It is important that the information you provide us in your application is accurate, truthful and complete.
+ If any information is not accurate, truthful or complete, we may reduce the amount we pay on a claim you make or not make any payment at all. We may cancel your policy completely – and if we do so, we may not refund the premiums you have paid.
+ If you become aware that information you have given us is inaccurate, you must let us know as soon as you can. If this alters the policy terms, we reserve the right to make any changes which may result in a higher premium, a lower sum assured, or your policy being cancelled.
+ If you stop paying your premiums for any reason, your policy will stop, and protection will cease. This means you will no longer be insured – and all benefits covered under the policy will also stop.
+ This policy has no cash-in value and there is no savings element built into this policy. Due to inflation, any amount paid out may not buy as much in the future as it would now.

Life insurance benefit will not be paid

+ If within the first year of the policy, your death is caused by suicide, or intentional and serious self-injury, or an event where, in our reasonable opinion, you took your own life.
+ If some elements of cover are restricted based on the information you provided, we will detail any exclusions applied to your policy within the Policy Schedule.
+ For a terminal illness which:
    i. Does not meet our definition(s)
    ii. Is claimed after the covered persons' death.

Critical illness benefit will not be paid if,

+ You are diagnosed with or undergo a medical procedure for one of the Critical Illnesses we cover which does not meet our definition(s), or
+ You die within 14 days of diagnosis of one of the Critical Illnesses we cover, or
+ You die before being diagnosed with one of the Critical Illnesses we cover, or

If some elements of cover are restricted based on the information you give us. If we do this, we will tell you what we have excluded in your policy Schedule.

Children's Critical Illness benefit will not be paid if,

+ Prior to the policy start date, the eligible child was already suffering from symptoms of, or had been diagnosed with, the condition being claimed for
+ Prior to the eligible child reaching 30 days of age, they were suffering from symptoms of, or had been diagnosed with, the condition being claimed for.
+ The child dies within 10 days of the claimable event date.

+ Prior to the policy start date or the child's age of 30 days, either parent was aware of an increased risk of the child being affected by the condition being claimed for.

FURTHER OPTIONS

Changing covers

+ You can reduce the amount you are covered for at any time before you make your first claim, subject to policy minimums. You are not able to reduce your cover after your first claim.
+ Please contact us and we will adjust your premiums and issue a new policy schedule showing your new cover. Previous premiums paid will not be returned.
+ While you may not increase your benefit directly on an existing policy, you can increase your cover if you qualify under Guaranteed insurability options (below).
+ New applications may be subject to underwriting and/or additional disclosure requirements.
+ New premiums will be applied to any new policies.

Guaranteed insurability option

+ You can increase the amount of cover without answering any further medical information if any one of the following occurs within the lifetime of the product.
    i. You get married or enter a registered civil partnership.
    ii. Birth of your child.
    iii. Your legal adoption of a child.
    iv. Your earnings increase due to a new job or promotion.
    v. You increase your mortgage because you are moving home or undertaking major home improvements.
+ This option may be used up to a maximum of three times over the policy term, within six months of the event, and, if we request relevant documents in relation to the events, you must provide them to us.
+ For all events, the amount of cover may only be increased up to 50% of the original sum assured, up to a maximum of £150,000.
+ In the event of an increase in your earnings, you can increase your sum assured with the amount equal to the original sum assured multiplied by the percentage increase in earnings.
+ In the event you increase your mortgage because you are moving home or undertaking major home improvements, you can increase your sum assured with the amount of the increase in the mortgage.
+ Your premiums will be adjusted accordingly.
+ If you have more than one policy with Assura, these limits apply across all these policies and not separately to each of them.
+ This option will not be available to you:
    i. If either you or your partner, in the case of a dual life plan, is aged 55 or older.
    ii. In the last five years of the policy term.
    iii. If either you or your partner, in the case of a dual life plan, have been diagnosed with or are receiving or have received medical treatment for a terminal illness.
    iv. If you or your partner, in the case of a dual life plan, have been diagnosed with a Critical Illness that meets our major condition definition or we have paid any Critical Illness claim. that meets our major condition definition.

CLAIM WAITING PERIODS

+ There is no waiting period for an initial claim on the policy.
+ However, if you are making a second or third Critical Illness claim on the policy, you are subject to a 90 day waiting period as follows:
+ Where an eligible Critical Illness claim has been paid under this policy no further Critical Illness claim will be paid unless there is at least 90 days between the previous claimable event date and the earlier of:
    i. The onset of symptoms of the subsequent claimable event, or
    ii. The diagnosis of the subsequent claimable event or the undergoing of a listed surgery.

MAKING A CLAIM

+ If either you or a nominated beneficiary – which could be one or more of the assignees (the person buying the product), the policy owner, the estate of the life assured, a policy trustee or as directed by the legal claimant – need to make a claim please contact Family Assurance Friendly Society's Claims Team directly by:
    i. Phone: 0808 196 5861
    ii. Email: claims@assuraprotect.com
    iii. Post: Dividend Life Claims, 16-17 West Street, Brighton BN1 2RL

What would prevent a benefit being paid?

+ Your policy has been cancelled.
+ Your policy has lapsed, as per the definition in the Policy Terms and Conditions.
+ Your claim does not meet the policy definitions (for example, type of illness) shown in your policy.
+ Your claim is subject to any exclusions, or any eligibility requirements shown on your cover summary.
+ You have not answered the questions in your application honestly, accurately, and completely.

Are policy benefit payouts subject to tax?

+ Any payouts we make should be free from UK Income Tax and Capital Gains Tax.
+ Any payment we make to you will be treated as part of your estate for Inheritance Tax (IHT) purposes when you die. Please note that:
    i. If you are diagnosed with, or undergo a medical procedure for, one of the specified critical illnesses we cover and you die *up to and including* 14 days later, you will be eligible for death benefit only.
    ii. If you are diagnosed with, or undergo a medical procedure for, one of the specified critical illnesses we cover, and you die *after* 14 days you will be eligible for a payment for your Critical Illness claim and death benefit.
    iii. If the policy is absolutely assigned, in other words if the benefits transferred from one party to another, such as from a parent to a child, the amount of cover payable should not form part of the estate for IHT purposes.
+ This is based on our current understanding of UK legislation, which may change in the future. If you are in any doubt about your own tax position, please speak to a financial adviser or your solicitor. There may be a charge for any advice given.

COMPLAINTS AND CANCELLATIONS

How to complain

+ To find out how to make a complaint please follow our step-by-step process at www.assuraprotect.com.
+ Alternatively, you can contact us directly by:
    i. Phone: 0330 010 0210
    ii. Email: complaints@assuraprotect.com
    iii. Post: Assura Protect Ltd. 86 Gloucester Place, First Floor London W1U 6HP
+ Complaints relating to sales or administration will be handled by Assura. Those relating to the product, pricing, underwriting or claims will be passed to the product provider, Family Assurance Friendly Society.
+ If we have not been able to resolve your complaint or if we have not sent you a final response within 8 weeks, you can ask for help from the Financial Ombudsman. They can be contacted by:
    i. Phone: 0800 0234 567 (free from UK landlines and mobiles) or 03300100210
    ii. Email: complaint.info@financial-ombudsman.org.uk
    iii. Post: Financial Ombudsman Service, Exchange Tower, London E14 9SR
+ If you contact us or the Ombudsman to complain, it will not affect your right to take legal action.

How to cancel your policy

+ Within 30 days from the date you receive your policy or the policy start date, whichever is later, you have the right to change your mind and cancel your policy.
+ If you tell us within that time that you want to cancel, we will refund any premiums you have paid and terminate your cover (unless you have submitted a claim). Please also refer to the RISKS TO YOUR POLICY COVER AND BENEFIT section above.
+ After 30 days, you can cancel your policy at any time by letting us know or cancelling your direct debit mandate. If you cancel after 30 days, you will not receive any money back.
+ Your policy has no investment or cash value.

Permitted information usage

+ Your information and personal data will be used for providing insurance and/or handling claims or complaints.
+ Your information will be held by Family Assurance Friendly Society Limited, Assura Financial Limited, and our reinsurers in accordance with the requirements of the Data Protection Act 2018.
+ We are required to disclose policyholder personal data to our reinsurer, Swiss Re Europe S.A., UK branch, in order for them to underwrite the insurance contract, and to assess and pay any claims. We will only disclose special categories of data such as health data to them with your explicit consent. Swiss Re Europe S.A., UK branch is the data controller of the personal data that we send to them and they may use and process it in the manner and for the purpose described in their Privacy Notice which can be found at https://www.swissre.com/privacy-policy.html.
+ You can find more information about this and the privacy policy at www.assuraprotect.com/privacy-policy.

The Financial Services Compensation Scheme (FSCS)

+ This policy is covered by the Financial Services Compensation Scheme (FSCS).
+ The FSCS is designed to pay compensation if a firm is unable to pay claims because it has stopped trading or been declared in default.

+ The FSCS will pay 100% of the value of the claim. The payment amount has no upper limit. You can find out more about the FSCS, including eligibility to claim, by visiting its website.
+ You may be entitled to compensation from the scheme if Family Assurance Friendly Society Limited cannot meet their obligations.
+ Whether or not you are able to claim and how much you may be entitled to will depend on the specific circumstances at the time.
+ For further information about the scheme please contact the FSCS by:
    i. Telephone: 0800 678 1100
    ii. Email: through their website at www.fscs.org.uk/contact-us/
    iii. Post: Financial Services Compensation Scheme, PO Box 300, Mitcheldean GL17 1DY.

Applicable law

+ This policy is governed by the laws of England and Wales and are based on current law and precedent, which may change in the future.