



**CEDARTREE POLICY WORDING**



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## Useful Information

### CLAIM NOTIFICATION

**To make a claim under all sections (except Gadget cover and Scheduled Airline Failure) please contact:**

Cega Travel Claims, PO BOX 127, Chichester, West Sussex, PO18 8WQ  
Tel: +44 (0)1473921257  
Online Claims Registration [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline)  
(Scheme Code: A00813)

**To make a claim for Gadget Cover please contact:**

Claims Administrators, Davies Group, Unit 8, Fulwood Business Park, Caxton Road, Preston, PR2 9NZ  
Tel: 0345 0744828  
Email: [gadgetclaims@davies-group.com](mailto:gadgetclaims@davies-group.com)  
Online claim portal - <https://bastion.davies-group.com>

**To make a claim for Scheduled Airline Failure please contact:**

IPP Claims at Sedgwick, Oakleigh House, 14-15 Park Place, Cardiff CE10 3DQ,  
Tel: 0345 266 1872,  
Email: [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk),  
Website: [www.ipplondon.co.uk/claims.asp](http://www.ipplondon.co.uk/claims.asp) (a claim form may be downloaded from this site)

### MAKING YOURSELF HEARD

Any complaint **you** may have should in the first instance be addressed to the relevant helpline as outlined within the policy wording. If the complaint is still not resolved, **you** can approach the Financial Ombudsman Service. Referral to the Financial Ombudsman will not affect **your** right to take legal action. Full details of addresses and contact numbers can be found within the 'Complaints procedure' section.

### FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme in the unlikely event **we** cannot meet **our** obligations to **you**. This depends on the type of insurance and the circumstances of the claim. Further information about the compensation scheme arrangements is available from the FSCS ([www.fscs.org.uk](http://www.fscs.org.uk)) or call them on 020 7741 4100.

### CANCELLATION PERIOD

**You** are free to cancel this policy at any time. If **you** wish to cancel within 14 days of receipt of the policy documents, **you** may do so by writing to **us** for a full refund providing **you** have not travelled and no claim has been made. If **you** cancel a Single Trip policy after the first 14 days of receipt of the documents, no premium refund will be made. If **you** cancel an Annual Multi-trip policy after the first 14 days of receipt (or after the renewal date if a renewal policy) **we** will refund 5% (five percent) of the premium paid for each complete month still outstanding at the time of cancellation, so long as **you** are not away on a **trip** at the time of cancellation and no claim has been or will be made since the policy was issued.

## Cedar Tree Travel Insurance

This policy summary does not contain full details and conditions of **your** insurance – these are located in **your** policy wording.

This insurance is underwritten by AXA Insurance UK plc.

Section E1 and E2 is underwritten by Collinson Insurance.

Section M1 is underwritten by Liberty Mutual Insurance Europe SE.

Where a heading is underlined in this policy summary full details can be found in **your** policy wording under the same heading.

### TYPE OF INSURANCE AND COVER

Travel insurance for single, annual multi **trips** or multi trips – Please refer to your policy schedule for your selected cover.

Various optional covers may also be included – your policy schedule will show if you selected these options.

### AGE ELIGIBILITY

#### Annual multi trip and multi trip

This policy is not available to anyone aged 66 or over if annual multi **trip** or multi **trip** cover is selected. If **you** are aged under 18 **you** are only insured when travelling with one or both of the insured adults (or accompanied by another responsible adult).

If **you** reach any of the ages mentioned above during the **period of insurance**, cover will continue until the next renewal date but not after that.

If single **trip** cover is selected, this policy is not available to anyone aged 66 or over.

### ABOUT YOUR POLICY WORDING

If **you** have any queries about **your** cover, **you** can call us on the Customer Sales and Service helpline as detailed on this page.

**We** want **you** to get the most from **your** policy and to do this you should:

- » Read **your** policy wording and make sure **you** are covered for the sort of losses/incidents **you** think might happen
- » Make sure that **you** understand the exclusions and conditions which apply to **your** policy because if **you** do not meet these conditions it may affect any claim **you** make.

Remember, no policy covers everything. **We** do not cover certain things such as, but not limited to:

- » Losses that **we** do not state are specifically covered
- » Circumstances known to **you** before **you** purchased this insurance which could reasonably have been expected to lead to a claim will not be covered
- » It is essential that **you** refer to the important conditions relating to health in the policy wording, as failure to comply with these conditions may jeopardise **your** claim or cover.
- » Claims will only be considered if the cause of the claim falls within the **period of insurance**.

### IMPORTANT TELEPHONE NUMBERS

#### Customer Sales and Service Helpline

0203 137 9369 or [affinitysales@cedartreeinsurance.com](mailto:affinitysales@cedartreeinsurance.com)

#### International Emergency Medical Assistance Service:

+44 (0) 1473 351754

#### Claims (except Gadget cover and Scheduled Airline Failure):

01473 921257 or [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline)

#### Gadget Cover Claims:

0345 0744828, [gadgetclaims@davies-group.com](mailto:gadgetclaims@davies-group.com) or online at <https://bastion.davies-group.com>

#### Scheduled Airline Failure:

0345 266 1872 or [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk)

(Scheme Code: A00813)



## SCHEDULE OF BENEFITS

The table below shows the maximum benefits **you** can claim for each **insured person** per **trip**, per incident (unless otherwise stated).

For section E2 the cover limit applies to each person insured.

Some sections are optional and these are marked \*

**Your policy schedule will show if you selected any of these options.**

Cover Section	Lite	**Excess	Classic	**Excess	Premium	**Excess
Section A - Cancellation or Curtailment						
Cancellation and Curtailment Charges	£1,000	£150	£2,000	£95	£5,000	£50
Section B - Medical Expenses						
Emergency Medical and other expenses	£15,000,000	£150	£15,000,000	£95	£15,000,000	£50
Emergency Dental	£400	£150	£400	£95	£500	£50
Funeral Expenses Abroad	£5,000	£150	£5,000	£95	£5,000	£50
Cost of returning your body or ashes to the <b>United Kingdom</b>	£10,000	£150	£10,000	£95	£10,000	£50
Section C - Hospital Benefit						
Hospital benefit	£50 for each 24 hour period up to £150	£150	£50 for each 24 hour period up to £200	Nil	£50 for each 24 hour period up to £1,000	Nil
Pet Care	£15 for each 24 hour period up to £150	£150	£15 for each 24 hour period up to £150	Nil	£20 for each 24 hour period up to £200	Nil
Section D - Personal Accident						
Permanent Total Disablement	£1,000 (up to 65)	Nil	£1,000 (up to 65)	Nil	£10,000 (up to 65)	Nil
Loss of limb(s)/eye(s)	£1,000 (up to 65)	Nil	£1,000 (up to 65)	Nil	£10,000 (up to 65)	Nil
Death	£1,000 (age 18-60) Nil (under 18 or over 60)	Nil	£1,000 (age 18-60) Nil (Under 18 or over 60)	Nil	£10,000(age 18-60) £1,000 (Under 18 or over 60)	Nil
Section E - Baggage						
<b>Baggage</b>	£1,000	£150	£1,500	£95	£2,500	£50
Single Item/Pair/Set Limit	£200	£150	£200	£95	£200	£50
<b>Valuables</b> Limit	£150	£150	£250	£95	£300	£50
Baggage Delay Over 12 hours	£25 after each 12 hour period up to £250	Nil	£25 after each 12 hour period up to £250	Nil	£50 after each 12 hour period up to £300	Nil
Section E1 <b>Gadget</b> Cover						
<b>Accidental damage</b> , Malicious Damage, Theft and Loss	Nil		Nil	Nil	Nil	Nil
<b>Accessories</b> Limit	£150	Nil	£150	Nil	£150	Nil
*Section E2 <b>Gadget</b> Cover Extension - only available if included on your policy certificate and you pay the required extra premium.						
Option 1 - Single Item Limit	£1,000 £1,000	£150	£1,000 £1,000	£95	£1,000 £1,000	£50
Option 2 - Single Item Limit	£2,000 £1,500	£150	£2,000 £1,500	£95	£2,000 £1,500	£50
Option 3 - Single Item Limit	£3,000 £1,500	£150	£3,000 £1,500	£95	£3,000 £1,500	£50
Unauthorised Usage	£2,500	Nil	£2,500	Nil	£2,500	Nil
<b>Accessories</b> Limit	£150	Nil	£150	Nil	£150	Nil

Cover Section	Lite	**Excess	Classic	**Excess	Premium	**Excess
Section F - Personal Money						
<b>Personal money</b>	£200	£150	£200	£95	£300	£50
Cash Limit	£300 £30(U18)	£150	£400 £50 (U18)	£95	£500 £75 (U18)	£50
Replacement Passport and Travel Documents	£100	£150	£100	£95	£300	£50
Section G - Personal Liability						
Personal Liability	£1,000,000	£150	£2,000,000	£95	£2,000,000	£50
Section H - Delayed Departure						
Delayed Departure	£50 for each 12 hour delay up to £100	Nil	£50 for each 12 hour delay up to £150	Nil	£50 for each 12 hour delay, up to £250	Nil
Holiday Abandonment	£1,000	£150	£2,000	£95	£5,000	£50
Section I - Missed Departure						
Missed Departure To enable <b>you</b> to continue your <b>trip</b> » Missed departure connections within the <b>UK</b> to an international departure point » Missed departure connections whilst outside of the <b>UK</b> » Missed departure Inbound and Outbound from an international departure point	£200	£150	£500	£95	£500	£50
Section J - Legal Expenses						
Legal Expenses	£5,000 (max £10,000 for 2 or more insured's)	Nil	£5,000 (max £10,000 for 2 or more insured's)	Nil	£20,000 (max £40,000 for 2 or more insured's)	Nil
Section K - Hijacking Cover						
Hijacking	Nil	Nil	Nil	Nil	£25 for each 24 hour period up to £250	Nil
Section L - Mugging Cover						
Mugging	£15 for each 24 hour period up to £150	Nil	£15 for each 24 hour period up to £150	Nil	£25 for each 24 hour period up to £250	Nil
Section M1 - Scheduled Airline Failure						
Insolvency of Scheduled Airline (prior to or after departure)	Nil		£2,500	Nil	£2,500	Nil
*Section N,O,P,Q,R and S Winter Sports Cover - only available if included on your policy certificate and you pay the required extra premium.						
<b>N</b>						
<b>Ski equipment</b> Owned	£500	£150	£500	£95	£750	£50
<b>Ski equipment</b> Hired	£150	£150	£150	£95	£250	£50
Single Item/Pair/Set Limit	£250	£150	£250	£95	£375	£50
<b>O</b> Ski Hire	£15 per day up to £250	Nil	£15 per day to £250	Nil	£20 per day to £400	Nil
<b>P</b> Ski Pack	£250	Nil	£250	Nil	£400	Nil
<b>Q</b> Piste Closure	£15 per day up to £250	Nil	£15 per day to £250	Nil	£20 per day to £400	Nil
<b>R</b> Avalanche Closure	£15 per day up to £250	Nil	£15 per day to £250	Nil	£20 per day to £400	Nil
<b>S</b> Physiotherapy in the United Kingdom	Nil	Nil	Nil	Nil	£200	Nil

Cover Section	Lite	**Excess	Classic	**Excess	Premium	**Excess
<b>*Section T - Golf Cover - only available if included on your policy certificate and you pay the required extra premium.</b>						
<b>Golf equipment</b>	£1,000	£150	£1,000	£95	£1,500	£50
Single Item/Pair/Set Limit	£250		£250		£375	
<b>Golf equipment Hire</b>	£25 per day up to £250	Nil	£25 per day up to £250	Nil	£35 per day up to £350	Nil
Non Refundable Golf Fees	£25 per day up to £250	Nil	£25 per day up to £250	Nil	£35 per day up to £350	Nil
<b>*Section U - Wedding Cover - only available if included on your policy certificate and you pay the required extra premium.</b>						
Wedding rings	£300 per person	£150	£300 per person	£95	£500 per person	£50
Wedding gifts	£500 (£150 cash) per couple	£150	£500 (£150 cash) per couple	£95	£750 (£150 cash) per couple	£50
Wedding attire	£1,000 per couple	£150	£1,000 per couple	£95	£1,500 per couple	£50
Photographs/video recordings	£500 per couple	£150	£500 per couple	£95	£750 per couple	£50
<b>*Section V - Cruise Cover - only available if included on your policy certificate and you pay the required extra premium.-</b>						
<b>Baggage</b>	£2,500	£150	£2,500	£95	£3,000	£50
Single Item/Pair/Set Limit	£400	£150	£400	£95	£500	£50
<b>Valuables Limit</b>	£500	£150	£500	£95	£500	£50
Unused Excursions	£300	£150	£300	£95	£500	£50
Missed Port	£25 'per port' up to a maximum limit payable of £125	Nil	£25 'Per port' Up to a maximum limit payable of £125	Nil	£50 'Per port' Up to a maximum limit payable of £250	Nil
Cabin Confinement	50 for each complete 24 hours up to a maximum of £200	Nil	£50 for each complete 24 hours Up to a maximum of £200	Nil	£50 for each complete 24 hours Up to a maximum of £1,000	Nil
<b>*Section W - Business Travel - only available if included on your policy certificate and you pay the required extra premium.</b>						
<b>Business equipment</b>	£750	£150	£750	£95	£1,000	£50
Single Article Limit	£350	£150	£350	£95	£500	£50
<b>Valuables Limit</b>	£350	£150	£350	£95	£500	£50
Replacement Business Associate	£1,500	£150	£1,500	£95	£5,000	£50

**\*\* Excess** amount stated in the schedule of benefits above that **you** will be responsible for paying under each section, by each **insured person**, per incident in the event of a claim.

Unless **you** have paid the additional premium to waive the **excess** as stated in **your** policy schedule.

## DURATION

### Annual multi trip and multi trip

This provides **you** with cover to travel as many times as **you** like within the **period of insurance** as detailed in **your** policy schedule for **your** selected cover provided no single **trip** lasts longer than the following durations:

18 days if **you** have bought Lite cover;  
32 days if **you** have bought Classic cover;  
32 days if **you** have bought Premium cover; or

If **you** have purchased a Winter Sports Annual multi-**trip** policy or multi **trip** policy, cover is also provided for up to 28 days in total for winter sports within the **period of insurance**.

### Single Trip

This provides **you** with cover to travel on one **trip** within the period of **insurance**.

## AMENDING YOUR POLICY

The terms of **your** policy can only be changed if **we** agree. **We** may require **you** to pay an additional premium before making a change to **your** policy

## CANCELLATION PERIOD

**You** are free to cancel this policy at any time. If **you** wish to cancel within 14 days of receipt of the policy documents, **you** may do so by writing to **us** for a full refund providing **you** have not travelled and no claim has been made. If **you** cancel a Single Trip policy after the first 14 days of receipt of the documents, no premium refund will be made. If **you** cancel an Annual Multi-trip policy after the first 14 days of receipt (or after the renewal date if a renewal policy) **we** will refund 5% (five percent) of the premium paid for each complete month still outstanding at the time of cancellation, so long as **you** are not away on a **trip** at the time of cancellation and no claim has been or will be made since the policy was issued. See General conditions applicable to the whole policy in the policy wording for full details.

## CLAIM NOTIFICATION

To make a claim under all sections (except **Gadget** cover and Scheduled Airline Failure) please contact:

**Cega Travel Claims,**  
**PO BOX 127,**  
**Chichester,**  
**West Sussex,**  
**PO18 8WQ**  
**Tel: +44 (0)1473921257**  
**Online Claims Registration**  
**[www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

To make a claim for **Gadget** Cover please contact:

**Claims Administrators:**  
**Davies Group,**  
**Unit 8**  
**Fulwood Business Park**  
**Caxton Road**  
**Preston**  
**PR2 9NZ**  
**Tel: 0345 0744828**  
**[gadgetclaims@davies-group.com](mailto:gadgetclaims@davies-group.com)**  
**Online claim portal - <https://bastion.davies-group.com>**

To make a claim for Scheduled Airline Failure please contact:

**IPP Claims at Sedgwick**  
**Oakleigh House**  
**14-15 Park Place**  
**Cardiff CE10 3DQ**  
**Phone: 0345 266 1872**  
**Email: [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk)**  
**Website: [www.ipplondon.co.uk/claims.asp](http://www.ipplondon.co.uk/claims.asp) (a claim form may be downloaded from this site)**

## Making a complaint

If **your** complaint relates to a claim on **your** policy, **you** should contact the department dealing with **your** claim.

If **your** complaint relates to **your** policy, please contact **0203 137 9479** or by emailing **[complaints@cedartreeinsurance.com](mailto:complaints@cedartreeinsurance.com)**

If the complaint is still not resolved, **you** can approach The Financial Ombudsman Service. Referral to the Financial Ombudsman Service will not affect **your** right to take legal action.

Full details of addresses and contact numbers can be found within the **Making a complaint** section of the policy wording.

## Financial Services Compensation Scheme (FSCS)

**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme in the unlikely event **we** cannot meet **our** obligations to **you**. This depends on the type of insurance and the circumstances of the claim. Further information about the compensation scheme arrangements is available from the FSCS ([www.fscs.org.uk](http://www.fscs.org.uk)).



## INTRODUCTION

This is **your travel insurance policy**. It contains details of what is covered, special conditions and what is not covered, for each **insured person** and is the basis on which all claims will be settled. It is validated by the issue of the schedule which **we** recommend be attached to the policy.

In return for having accepted **your** premium **we** will in the event of **bodily injury**, death, illness, disease, loss, theft, damage, legal liability or other specified events happening within the **period of insurance** provide insurance in accordance with the operative sections of **your** policy as referred to in **your** schedule.

The schedule and any endorsements are all part of the policy. **Your** policy is evidence of the contract of insurance.

### United Kingdom residents

This policy is only available to **you** if **you** are permanently resident in the **United Kingdom** and registered with a **medical practitioner** in the **United Kingdom**.

### The law applicable to this policy

**You** and **we** can choose the law which applies to this policy. **We** propose that the law of England and Wales applies. Unless **we** and **you** agree otherwise the law of England and Wales will apply to this policy.

### Age eligibility

#### Annual multi trip and multi trip

This policy is not available to anyone aged 66 or over if annual multi trip or multi trip cover is selected. If **you** are aged under 18 **you** are only insured when travelling with one or both of the insured adults (or accompanied by another responsible adult).

If **you** reach any of the ages mentioned above during the **period of insurance**, cover will continue until the next renewal date but not after that.

#### Single trip

If single trip cover is selected, this policy is not available to anyone aged 66 or over.

### Policy excess

Under most sections of the policy, claims will be subject to an **excess**. This means that **you** will be responsible for paying the first part of each and every claim per incident, per trip, claimed for, under each section by each **insured person**, unless **you** have paid the additional premium to waive the **excess** as stated in **your** policy schedule.

Under section E1 – **Gadget** cover and E2 – **Gadget** cover extension the **excess** is the amount detailed in **your** insurance schedule **you** must contribute towards each and every claim **you** make on **your** policy, except for group policies where this applies per claim per **insured person**.

### Helplines

Please carry this policy with **you** in case of an emergency.

### Policy information or advice

If **you** would like more information or if **you** feel the insurance may not meet **your** needs, please contact the Cedar Tree customer helpline on **0203 137 9369** or by emailing [affinitysales@cedartreeinsurance.com](mailto:affinitysales@cedartreeinsurance.com)

### General Insurance Information

This insurance is arranged by Worldwide Internet Insurance Services Limited (trading as Cedar Tree), an insurance intermediary licenced and regulated in Gibraltar by the Financial Services Commission under Permission Number 5570 and passported into the Financial Conduct Authority in the UK under Register Number 429383.

### Providers under this policy

#### AXA Insurance

Sections A-D, F-L and N-X of this policy are insured by AXA Insurance UK plc who are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority under registration number 202312. This can be checked on the Financial

Services Register by visiting the FCA's website at [www.fca.org.uk](http://www.fca.org.uk) or by contacting them on 0800 111 6768.

### Data Protection Notice

Axa Insurance UK plc is part of the AXA Group of companies which takes **your** privacy very seriously. For details of how **we** use the personal information **we** collect from **you** and **your** rights please view **our** privacy policy at [www.axa.co.uk/privacy-policy](http://www.axa.co.uk/privacy-policy)

If **you** do not have access to the internet please contact **us** and **we** will send **you** a printed copy.

### Bastion Insurance Services Limited

Sections E1 and E2 of this policy are insured by Collinson Insurance (a trading name of Astrenska Insurance Limited) is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority in the United Kingdom, under Firm Reference Number 202846.

Registered office: Cutlers Exchange, 123 Houndsditch, London, EC3A 7BU United Kingdom. Registered in England number 01708613. These details can be checked on the Financial Services Register by visiting: [www.fca.org.uk](http://www.fca.org.uk)

Details on how **your** information will be used by Bastion Insurance Services Ltd can be found under section E1 and E2 of **your** policy wording

### International Passenger Protection Limited

Section M1 is provided by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR, United Kingdom and is underwritten by Liberty Mutual Insurance Europe SE (**The Insurer**). The Insurer is authorised and regulated by the Luxembourg Minister of Finance and the Commissariat aux Assurances. Deemed authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority (registered number 829959). Details of the Temporary Permissions Regime, which allows EEA-based firms to operate in the UK for a limited period while seeking full authorisation, are available on the Financial Conduct Authority's website.

Details on how **you** can contact International Passenger Protection Limited to understand how **your** data will be used can be found under section M1 of **your** policy wording.

### Fraud prevention

To keep premiums low **we** do participate in a number of industry initiatives to prevent and detect fraud. To help prevent crime **we** may:

1. Share information about **you** with other organisation's and public bodies including the police.
2. Share information about **you** within the AXA Group and with other insurers.
3. Pass **your** details to recognised centralised insurance industry applications and claims review systems (for example the Travel Claims Database) where **your** details may be checked and updated.
4. Check **your** details with fraud prevention agencies and databases. If **you** give **us** false or inaccurate information and **we** suspect fraud, **we** may record this with fraud prevention agencies.
5. Search records held by fraud prevention and credit agencies to:
  - a) Help make decisions about credit services for **you** and members of **your** household.
  - b) Help make decisions on insurance policies and claims for **you** and members of **your** household.
  - c) Trace debtors, recover debt, prevent fraud and to manage **your** insurance policies.
  - d) Check **your** identity to prevent money laundering.
6. Undertake credit searches and additional fraud searches.

## DEFINITIONS

These definitions apply throughout **your** policy booklet. Where **we** explain what a word means, that word will appear highlighted in bold print and have the same meaning wherever it is used in the policy. **We** have listed the definitions alphabetically.

### Baggage

- means luggage, clothing, personal effects and other articles (but excluding **valuables**, **ski equipment**, **golf equipment**, **business equipment**, **gadgets**, **personal money** and documents of any kind) which belong to **you** (or for which **you** are legally responsible) which are worn, used or carried by **you** during any **trip**.

See definition of **ski equipment**, **golf equipment**, **business equipment**, **gadgets** and **personal money** for articles covered under either Section N **Ski equipment**, Section T **Golf Cover**, Section X **Business Cover**, Section E1 and E2 **gadget Cover** or Section F **Personal money**, Passport and documents when the appropriate premium has been paid as detailed in **your** policy schedule.

### Bodily injury

- means an identifiable physical injury caused by sudden, unexpected, external and visible means including injury as a result of unavoidable exposure to the elements.

### Business equipment

- means items used by **you** and which belong to **you** in support of **your** business activity including office equipment which is portable by design (excluding **Gadgets**)

### Business trip

- means a **trip** taken wholly or in part for business purposes but excluding manual work.

### Close business associate

- means any person whose absence from business for one or more complete days at the same time as **your** absence prevents the proper continuation of that business.

### Close relative

- means mother, father, sister, brother, wife, husband, civil partner, daughter, son, grandparent, grandchild, parent-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step parent, step child, step sister, step brother, foster child, legal guardian, domestic partner or fiancé/fiancée.

### Couple

- means **you** and **your close relative** who lives with **you** in a domestic relationship at the same address as **you** for at least six months at the time of purchasing this policy.

### Curtailment /curtail/curtailed

means either:

**a) You** abandoning or cutting short the **trip** after **you** leave **your home** by direct early return to **your home**, in which case claims will be calculated from the day **you** returned to **your home** and based on the number of complete days of **your trip** **you** have not used,

Or

**b) You** attending a hospital outside **your home area** as an in-patient or being confined to **your** accommodation abroad due to **personal quarantine**, in either case for a period in excess of 48 hours. Claims will be calculated from the day **you** were admitted to hospital or confined to **your** accommodation and based on the number of complete days for which **you** were hospitalised, quarantined or confined to **your** accommodation.

Curtailment claims under paragraph b) will only be paid for the ill/injured/quarantined/confined **insured person**, but where **we** or the Emergency Medical Assistance Service agree for another **insured person** (including any children travelling with them) to stay with **you**, **we** will also pay for that **insured person's** proportion only of any travel and accommodation costs and expenses they have incurred, but not used by remaining with **you**.

### Excess

- means that **you** will be responsible for paying the first part of each and every claim per incident claimed for, under each section by each **insured person**, per **trip**, unless **you** have paid the additional premium to waive the **excess** as stated in **your** policy schedule.

### Family cover

- means up to two adults and up to 9 of their children, step children or foster children aged under 18 accompanying the parents or legal guardian insured on the same policy travelling on any **trip** to the same destination. The children are only insured when travelling with one or both of the insured adults, (or accompanied by another responsible adult) but under annual multi **trip** and multi **trip** cover either adult is also insured to travel on their own.

### Gadget

- *Mobile Phone, iphones, ipads, Tablets, Camera's, Camera Lenses, MP3 Players, Games Consoles, Video Camera's, Go Pro's, Smartwatches, Bluetooth Headsets, Satellite Navigation Devices, PDA's E-Readers, Head/ Ear Phones/ Ear Buds and Laptops. Please note we do not provide cover for drones.*

See definition of **gadget** under Section E1 and E2 Gadget Cover.

### Golf equipment

- means golf clubs, golf balls, golf bag, golf trolley and golf shoes.

### Home

- means **your** normal place of residence in the **United Kingdom**.

### Home area

For residents of the **United Kingdom** excluding Channel Islands and the Isle of Man, **your home area** means the **United Kingdom** excluding Channel Islands and the Isle of Man. For residents of the Channel Islands and the Isle of Man, **your home area** means either the particular Channel Island on which **you** live or the Isle of Man depending on where **your home** is.

### Insured person

See definition of **You/Your/Yourself/Insured person**.

### Medical condition

- means any disease, illness or injury.

### Medical practitioner

- means a registered practising member of the medical profession recognised by the law of the country where they are practising, who is not related to **you** or any person who **you** are travelling with.

### Mugging

- means a violent, threatening attack by a third party causing actual bodily harm.

### Package

- means the pre-arranged combination of at least two of the following components when sold or offered for sale at an inclusive price and when the service covers a period of more than 24 hours or includes overnight accommodation:

**a)** transport

**b)** accommodation

**c)** other tourist services not ancillary to transport or accommodation (such as car hire or airport parking) and accounting for a significant proportion of the package as more fully described under The Package Travel and Linked Travel Arrangements Regulations 2018.

### Period of insurance

- means if annual multi **trip** cover is selected: the period of 12 months for which **we** have accepted the premium as stated in the schedule. During this period any **trip** not exceeding the maximum **trip** duration as detailed in **your** policy schedule, but limited to 28 days in total in each **period of insurance** for winter sports (provided **you** have paid the appropriate winter sports premium to include this cover). Under these policies Section A - Cancellation cover will be operative from the date stated in the schedule or the time of booking any **trip** (whichever is the later date) and terminates on commencement of any **trip**.

- means if multi **trip** cover is selected: the period as stated in the schedule.

During this period any **trip** not exceeding the maximum **trip** duration as detailed in **your** policy schedule, but limited to 28 days in total in each **period of insurance** for winter sports (provided **you** have paid the appropriate winter sports premium to include this cover). Under these policies Section A - Cancellation cover will be operative from the date stated in the schedule or the time of booking any **trip** (whichever is the later date) and terminates on commencement of any **trip**.

- means if single **trip** cover is selected: the period of the **trip** and terminating upon its completion, but not in any case exceeding the period shown in the schedule. Under these policies Section A - Cancellation cover will be operative from the time **you** pay the premium.

For all other sections of the policy including Section A – Curtailment cover, whichever cover is selected, the insurance starts when **you** leave **your home** to start the **trip** and ends at the time of **your** return to **your home** on completion of the **trip**.

However any **trip** that had already begun when **you** purchased this insurance will not be covered, except where this policy replaces or **you** renew an existing annual multi **trip** policy which fell due for renewal during the **trip**.

The **period of insurance** is automatically extended for the period of the delay in the event that **your** return to **your home area** is unavoidably delayed due to an event insured by this policy.

#### Personal money

- means bank notes, currency notes and coins in current use, travellers' and other cheques, postal or money orders, pre-paid coupons or vouchers, travel tickets, event and entertainment tickets, phone cards, money cards and credit/debit or pre-pay charge cards all held for private purposes.

#### Personal quarantine

A period of time where **you** are suspected of carrying an infection or have been exposed to an infection and as a result are confined or isolated on the orders of a medical professional or public health board in an effort to prevent disease from spreading.

#### Pre-existing medical conditions

1. Any of the following **medical conditions** which **you** have ever been diagnosed with or treated for:

- » Any heart or respiratory condition (including but not limited to asthma, bronchitis and chronic obstructive pulmonary disease)
- » Any circulatory condition (problems with blood flow, including strokes, high blood pressure and cholesterol).
- » Any liver condition.
- » Any cancerous condition.
- » Any psychological conditions such as stress, anxiety, depression, or psychiatric condition such as eating disorders.

2. Any other **medical conditions** for which **you** have been prescribed medication, received treatment or had a consultation with a doctor or hospital specialist for any **medical condition** in the past 2 years.

#### Pregnancy complication

- » Toxaemia
- » Gestational hypertension
- » Gestational diabetes
- » Pre-eclampsia
- » Ectopic pregnancy
- » Molar pregnancy
- » Post-partum haemorrhage
- » Retained placenta membrane
- » Placental abruption
- » Hyperemesis gravidarum
- » Placenta praevia
- » Stillbirths
- » Miscarriage
- » Termination for medical reasons
- » Any premature births more than eight weeks (or 16 weeks in the case of a known multiple pregnancy) before the expected delivery date.

#### Pre-paid charges

- means charges **you** have paid before **you** travel, or are contracted to pay for, including but not limited to the following: car hire, car parking, airport accommodation, airport lounge access, kennel and cattery fees, excursions, (where cover under Section U – Golf cover is operative) green fees and (where the appropriate winter sports premium has been paid) ski school fees, lift passes and hired **ski equipment**.

#### Public transport

- means any publicly licensed aircraft, sea vessel, train, coach or bus on which **you** are booked or had planned to travel.

#### Regional quarantine

Any period of restricted movement or isolation, including national lockdowns, within **your home area** or destination country imposed on a community or geographic location, such as a county or region, by a government or public authority.

#### Secure baggage area

- means any of the following, as and where appropriate:

- a) The locked dashboard, boot or luggage compartment of a motor vehicle
- b) The locked luggage compartment of a hatchback vehicle fitted with a lid closing off the luggage area, or of an estate car with a fitted and engaged tray or roller blind cover behind the rear seats.
- c) The fixed storage units of a locked motorised or towed caravan
- d) A locked luggage box, locked to a roof rack which is itself locked to the vehicle roof.

#### Single parent cover

- means one adult and up to 9 of his or her children, step children or foster children aged under 18 accompanying the parent insured on the same policy, travelling on any **trip** to the same destination. The children are only insured when travelling with the insured adult, (or accompanied by another responsible adult) but under annual multi **trip** cover or multi **trip** cover the adult is also insured to travel on their own.

#### Ski equipment

- means skis (including bindings), ski boots, ski poles and snowboards.

#### Terrorism

- means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or governments, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

#### Travelling Companion

Any person with whom **you** are travelling/staying or have arranged to travel/stay with. This person does not have to be insured by **your** policy.

#### Trip

- means any holiday, pleasure **trip** or journey made by **you** within the area of travel shown in the schedule which begins and ends in **your home area** during the **period of insurance**, but excluding one way **trips** or journeys.

However any **trip** that had already begun when **you** purchased this insurance will not be covered, except where this policy replaces or **you** renew an existing annual multi **trip** policy which fell due for renewal during the **trip**.

If annual multi **trip** cover or multi **trip** cover is selected any **trip** not exceeding the maximum **trip** length as confirmed in **your** policy schedule is covered, but limited to 28 days in total in each **period of insurance** for winter sports (provided **you** have paid the appropriate winter sports premium to include this cover). If any **trip** exceeds the maximum **trip** length as confirmed in **your** policy schedule days (or 28 days in the case of winter sports) there is no cover under this policy for any additional days over the maximum **trip** length as confirmed in **your** policy schedule (or 28 day period in respect of winter sports trips), unless **you** have contacted **us** and **we** have agreed in writing to provide cover.

In addition, any **trip** solely within **your home area** is only covered where **you** have pre-booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee. Each **trip** under annual multi **trip** cover or multi **trip** cover is considered to be a separate insurance, with the terms, definitions, What is

not covered and conditions contained in this policy applying to each **trip**. Where **we** have agreed to cover **your** medical condition, this applies to each trip during the **period of insurance**.

#### Unattended

- means when **you** are not in full view of and not in a position to prevent unauthorised interference with **your** property or vehicle.

#### United Kingdom / UK

- means England, Scotland, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

#### Valuables

- means jewellery, gold, silver, precious metal or precious or semiprecious stone articles, watches (excluding smart watches and fitness trackers), furs, CD's, DVD's, tapes, films, cassettes, cartridges, computer games, telescopes and binoculars.

#### Violent and forcible entry

- means entry evidenced by visible damage to the fabric of the building, room, or vehicle at the point of entry.

#### We/Us/Our

- means AXA Insurance UK plc. Registered in England No. 78950. Registered Office: 20 Gracechurch Street, London EC3V 0BG.

Except for cover provided under sections E1 and E2 Gadget cover and sections M1 Scheduled airline failure and M2 End supplier failure. Under sections E1 and E2 of this policy – Bastion Insurance Services Ltd on behalf of Astrenska Insurance Limited, Cutlers Exchange, 123 Houndsditch, London, EC3A 7BU. Astrenska Insurance Limited are authorised by the Prudential Regulation and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm reference number 202846.

Under section M1 of this policy – means certain underwriters at Liberty Mutual Insurance Europe.

#### You/Your/Yourself/Insured person

- means each person travelling on a **trip** whose name appears in the policy schedule.

### GENERAL CONDITIONS APPLICABLE TO THE WHOLE POLICY

**You** must comply with the following conditions to have the full protection of **your** policy. If **you** do not comply with them **we** may at **our** option take one or more of the following actions:

- » cancel the policy as detailed under this section;
- » declare **your** policy void (treating **your** policy as if it never existed);
- » refuse to deal with any relevant claims or reduce the amount of any relevant claim payments.

## 1. Providing accurate and complete information

When taking out, renewing or making changes to this policy, **you** must take reasonable care to provide accurate and complete answers to all questions. **We** may ask **you** to provide further information and/or documentation to ensure that the information **you** provided when taking out, making changes to or renewing **your** policy was accurate and complete. Failure to do this may impact or invalidate any claim **you** make.

## 2. Changes in your circumstances

**You** must tell **us** as soon as reasonably possible if **your** circumstances change or if any of the information shown in **your** policy schedule changes during the **period of insurance**.

## 3. Dual insurance

If at the time of any incident which results in a claim under this policy, there is another insurance covering the same loss, damage, expense or liability **we** will not pay more than **our** proportional share (not applicable to Section D – Personal accident). **You** must give **us** details of other such insurance.

## 4. Reasonable precautions

At all times **you** must take all reasonable precautions to avoid injury, illness, disease, loss, theft or damage and take all reasonable steps to safeguard **your** property from loss or damage and to recover property lost or stolen.

## 5. Cancellation

#### Statutory cancellation rights

**You** may cancel this policy within 14 days of receipt of the policy documents (new business) and for annual policies the renewal date (the cancellation period) by writing to the address shown in **your** policy schedule during the cancellation period. Any premium already paid will be refunded to **you** providing **you** have not travelled, no claim has been made or is intended to be made.

If **you** have already travelled, a claim has been made under this policy or is intended to be made there will be no refund of premium.

#### Cancellation outside the statutory period

**You** may cancel this policy at any time after the cancellation period by writing to the address above/shown in **your** schedule. If **you** cancel **your** Single Trip policy after the cancellation period no premium refund will be made. If **you** cancel **your** Annual Multi-trip policy after the cancellation period (or after renewal date if a renewal policy), **we** will refund 5% (five percent) of the premium paid for each complete month still outstanding at the date of cancellation notification, so long as **you** are not away on a **trip** at the time of cancellation and no claim has been or will be made since the policy was issued.

**We** reserve the right to cancel the policy by providing 21 days' notice by registered post to **your** last known address on the following grounds:

- a) If **you** make a fraudulent claim as set out in paragraph 6. Fraudulent claims below.
- b) If **you** are or have been engaged in criminal or unlawful activities.
- c) If any policy in **your** name is added to the Insurance Fraud Register.

In each case no refund of premium will be made.

## 6. Fraudulent claims

Throughout **your** dealings with **us** **we** expect **you** to act honestly. If **you** or anyone acting for **you**:

- a) knowingly provides information to **us** as part of **your** application for **your** policy that is not true and complete to the best of **your** knowledge and belief; or
  - b) knowingly makes a fraudulent or exaggerated claim under **your** policy; or
  - c) knowingly makes a false statement in support of a claim; or
  - d) submits a knowingly false or forged document in support of a claim; or
- General conditions applicable to the whole policy continued
- e) makes a claim for any loss or damage caused by **your** wilful act or caused with **your** agreement, knowledge or collusion.

Then

- a) **We** may prosecute fraudulent claimants;
- b) **We** may make the policy void from the date of the fraudulent act;
- c) **We** will not pay any fraudulent claims;
- d) **We** will be entitled to recover from **you** the amount of any fraudulent claim already paid under **your** policy since the start date;
- e) **We** may inform the Police of the circumstances.

## 7. Sanctions

**We** will not provide cover, be liable to pay any claim or provide any benefit where doing so would expose **us** to:

- » Any sanctions, prohibitions or restrictions under United Nations resolutions;

or

- » The trade or economic sanctions, laws or regulations of the European Union, United Kingdom, or United States of America.

## 8. Automatic renewals on annual multi trip and multi trip policies

If **you** are an Annual Multi-**trip** or multi **trip** policyholder, **we** will automat-



ically renew **your** policy each year unless **you** have advised **us** that **you** do not want **your** policy to be automatically renewed or **you** no longer meet the eligibility criteria to be a Cedar Tree policyholder. **We** will write to **you** prior to the renewal date of **your** policy to remind **you** that **your** policy is due to be renewed.

Unless **you** have previously advised **us** that **you** do not want **your** policy to be renewed or at renewal **you** have advised **us** that **you** no longer wish to renew **your** policy or **you** are no longer eligible for cover, the renewal premiums will again be collected from **your** specified credit or debit card to make sure that **you** are always covered.

**We** will notify **you** of **your** renewal terms at least 21 days prior to **your** renewal date. **We** are entitled to assume at renewal that **your** details have not changed and **you** have the consent of the credit or debit card holder, unless **you** inform **us** otherwise.

By purchasing this policy **you** have provide **us** with the consent to set up a continuous payment authority. This means **we** are authorised to automatically renew **your** policy and apply for renewal payments from **your** account every year, even if **your** card has expired, until **you** instruct **us** to stop.

#### How to opt-out

Please contact the Cedar Tree customer helpline on **0203 137 9369** or by emailing [affinitysales@cedartreeinsurance.com](mailto:affinitysales@cedartreeinsurance.com)

## NON-PAYMENT OF PREMIUMS

Where **we** have been unable to collect a premium payment **we** will contact **you** in writing to request payment within seven days. If **we** do not receive payment by this date **we** will write to **you** again notifying **you** that payment has not been received and give **you** a further seven days to pay the outstanding amount. If payment is not received by that date **we** will seek to recover all monies and may:

- » cancel **your** policy with immediate effect;
- » refuse to pay any pending claims on **your** policy/policies;
- » refer details of **your** policy to our debt collection agencies that will seek to recover all monies on **our** behalf and may record this outstanding debt.

## CLAIMS CONDITIONS

**You** must comply with the following conditions to have the full protection of **your** policy.

If **you** do not comply **we** may void the policy and refuse to deal with any relevant claims or reduce the amount of any relevant claim payment. **You** may contact **us** by phone or online if **you** want to make a claim using the relevant details given below, depending on the type of claim:

### 1. Claims

All claims except (**Gadget** Cover, Scheduled Airline Failure) Tel: +44 (0)1473921257

Cega Travel Claims,  
PO BOX 127,  
Chichester,  
West Sussex,  
PO18 8WQ  
Online claims registration: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline)  
(Scheme Code: A00813)

#### Gadget Cover

For all claims (including theft, loss and **malicious damage**) please contact:

Claims Administrators:  
Davies Group  
Unit 8, Fulwood Business Park  
Caxton Road  
Preston, PR2 9NZ  
0345 0744828  
<https://bastion.davies-group.com>

### Scheduled Airline Failure

IPP Claims at Sedgwick  
Oakleigh House  
14-15 Park Place  
Cardiff CE10 3DQ  
Phone: 0345 266 1872  
Email: [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk)  
Website: [www.ipplondon.co.uk/claims.asp](http://www.ipplondon.co.uk/claims.asp) (a claim form may be downloaded from this site)

The claim notification must be made within 31 days or as soon as possible after that following any **bodily injury**, illness, disease, incident, event, redundancy or the discovery of any loss, theft or damage which may lead to a claim under this policy.

**You** must also tell **us** if **you** are aware of any court claim form, summons or impending prosecution. Every communication relating to a claim must be sent to **us** as soon as possible. **You** or anyone acting on **your** behalf must not negotiate, admit or refuse any claim without **our** permission in writing and cooperate fully with **us** in **our** investigations into the circumstance of **your** claim.

Each section of this policy contains special conditions relating to claims. **You** should refer to the particular section under which **you** are claiming for further details of what **you** must do following the incident or event which has caused the claim.

**You** or **your** legal representatives must supply at **your** own expense, all information relevant to the claim detailed under claims evidence at the end of each section. **You** should refer to the particular section under which **you** are claiming for further details of the evidence that **we** need to deal with **your** claim.

**We** reserve the right to require **you** to undergo an independent medical examination at **our** expense.

**We** may also request and will pay for a post mortem examination.

**You** must retain any property which is damaged, and if requested, send it to **us** at **your** own expense. If **we** pay a claim for the full value of the property and it is then recovered it will then become **our** property.

**We** may refuse to reimburse **you** for any property which **you** cannot provide proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements.

### 2. Transferring of rights

**We** are entitled to take over any rights in the defence or settlement of any claim and to take proceedings in **your** name for **our** benefit against any other party.

## IMPORTANT CONDITIONS RELATING TO HEALTH

**You** must comply with the following conditions to have the full protection of **your** policy.

**You** must tell **us** of all **your pre-existing medical conditions**. If **you** fail to declare all **pre-existing medical conditions** **we** may refuse to deal with or reduce the amount of any relevant claims, even if a claim is not related to an undisclosed pre-existing **medical condition**.

It is a condition of this policy that **you** will not be covered under Section A – Cancellation or Curtailment charges, Section B – Emergency medical and other expenses, Section C – Hospital benefit and Section D – Personal accident for any claims arising:

#### Throughout the duration of the policy

##### 1.

- I. From any **medical condition** or **pregnancy complication** **you** have in respect of which a **medical practitioner** has advised **you** not to travel (or



would have done so had **you** sought their advice), but despite which **you** still travel.

II. From any surgery, treatment or investigations for which **you** intend to travel outside of **your home area** to receive (including expenses incurred due to the discovery of other medical conditions during and/or complications arising from these procedures).

III. From any **medical condition** for which **you** are not taking the recommended treatment or prescribed medication as directed by a **medical practitioner**.

IV. If **you** travel against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider

At the time of purchasing **your** policy **you** will not be covered for any claim arising directly or indirectly:

**2.**

I. From any **medical condition** for which **you** or a **travelling companion** have received a terminal prognosis.

II. From any **medical condition** for which **you** or a **travelling companion** are on a waiting list for or have knowledge of the need for surgery, treatment or investigation.

III. From any **medical condition** for which **you** or a **travelling companion** are currently showing symptoms, but have yet to receive a diagnosis.

**3.**

I. From any of the following **medical** conditions which **you** have ever been diagnosed with or treated for:

- » Any heart or respiratory condition (including but not limited to asthma, bronchitis and chronic obstructive pulmonary disease)
- » Any circulatory condition (problems with blood flow, including strokes, high blood pressure and cholesterol)
- » Any liver condition
- » Any cancerous condition
- » Any psychological conditions such as stress, anxiety, depression, or psychiatric condition such as eating disorders

II. Any other **medical conditions** for which **you** have been prescribed medication, received treatment or had a consultation with a doctor or hospital specialist for any **medical condition** in the past 2 years.

Unless **you** contact **us** on Tel: **0203 137 9369** or complete an online Medical Screening at Website [www.cedartreeinsurance.com](http://www.cedartreeinsurance.com) and **we** have agreed, in writing, to cover **your medical condition(s)**.

## WHAT IS NOT COVERED

### - APPLICABLE TO ALL SECTIONS OF THE POLICY

**We** will not pay for claims arising directly or indirectly from:

**1. Circumstances known to you**

Circumstances known to **you** before **you** purchased **your** policy or at the time of booking any **trip** which could reasonably have been expected to lead to cancellation or **curtailment** of the **trip**.

**2. War risks, civil commotion and terrorism**

War, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, **terrorism**, revolution, insurrection, civil commotion and/or civil unrest assuming the proportions of or amounting to an uprising, military or usurped power but this exclusion shall not apply to losses under Section B – Emergency medical and other expenses, Section C – Hospital benefit and Section D – Personal accident unless such losses are caused by nuclear, chemical or biological attack, or the disturbances were already taking place at the beginning of any **trip**.

**3. Radioactive contamination**

Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste, from combustion of nuclear fuel, the radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.

**4. Sonic bangs**

Loss, destruction or damage directly caused by pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.

**5. Winter sports**

**Your** participation in winter sports unless the appropriate winter sports premium has been paid, then cover will apply under those sections shown as covered for winter sports in **your** schedule for:

a) the winter sports specified in the list on page 17 and

b) any other winter sports shown as covered in **your** schedule for a period of no more than 28 days in total in each **period of insurance** under annual multi **trip** policies and multi **trip** policies or for the period of the **trip** under single **trip** policies.

**6. Professional sports or entertaining**

**Your** participation in or practice of any professional sports or professional entertaining.

**7. Other sports or activities**

**Your** participation in or practice of any other sport or activity, manual work, driving any motorised vehicle or racing unless:

a) specified in the list on pages 16 and 17 or

b) shown as covered in **your** schedule.

**8. Suicide, drug use or solvent abuse**

**Your** wilfully self-inflicted injury or illness, suicide or attempted suicide, sexually transmitted diseases, solvent abuse, drug use (other than drugs taken in accordance with treatment prescribed and directed by a **medical practitioner**, but not for the treatment of drug addiction) and putting **yourself** at needless risk (except in an attempt to save human life).

**9. Alcohol abuse/misuse**

**You** drinking too much alcohol or alcohol abuse where it is reasonably foreseeable that such consumption could result in an impairment of **your** physical ability and/or judgement resulting in a claim. **We** do not expect **you** to avoid alcohol on **your trips** or holidays, but **we** will not cover any claims arising because **you** have drunk so much alcohol that **your** judgement is seriously affected or **you** are suffering from alcohol dependence or directly or indirectly from the symptoms of alcohol withdrawal and/or **you** need to make a claim as a result.

**10. Jumping from vehicles, buildings, bridges, scaffolding or balconies**

**You** climbing on or jumping from a vehicle, building, bridge, scaffolding, balcony or climbing or moving from any external part of any building to another (apart from stairs, ramps or walkways) and falling regardless of the height, unless **your** life is in danger or **you** are attempting to save human life.

**11. Unlawful action**

**Your** own unlawful action or any criminal proceedings against **you**.

**12. Additional loss or expense**

Any other loss, damage or additional expense following on from the event for which **you** are claiming, unless **we** provide cover under this insurance. *Examples of such loss, damage or additional expense would be the cost of replacing locks after losing keys, costs incurred in preparing a claim or loss of earnings following bodily injury, illness or disease, or not being able to enjoy the trip due to bad weather.*

**13. Armed Forces**

Operational duties of a member of the Armed Forces (other than claims arising from authorised leave being cancelled due to operational reasons, as provided for under sub section 4. of Section A – Cancellation or Curtailment charges).

**14. Travelling against FCDO advice**

**You** travelling to a country, specific area or event when the Travel Advice Unit of the Foreign, Commonwealth and Development Office (FCDO) or regulatory authority in a country to/from which **you** are travelling has advised against either all but essential travel (unless **your trip** is essential) or all travel (for any reason).

**15. Unauthorised access to controlled or restricted areas or the unauthorised use of swimming pools**

**You** gaining access to controlled or restricted areas and/or the unauthorised use of swimming pools outside of the specified opening times. When travelling you must adhere to the guidelines issued for controlled areas, swimming pools, etc.

#### **16. Travelling against medical advice**

**We** will not pay any claim you have for any **trip** where a **medical practitioner** has advised **you** not to travel (or would have done so had **you** sought their advice), but despite which **you** still travel.

#### **17. Travel documentation**

**Your** inability to travel due to **your** failure to hold, obtain or produce valid important documents in time for the booked **trip**.

#### **18. Costs for others not named on the policy**

Any person not insured or named on this policy. This policy is not intended to cover any costs which relate to anybody not insured on this policy; please ensure that all persons travelling have sufficient insurance to cover their needs. This applies even where **you** have paid for the additional costs for example, if **you** have paid for another person's travel or accommodation costs. The only exception to this is if the Medical Assistance team agree for another person to remain with **you**.

**19.** Any virtual currency including but not limited to crypto-currency, including fluctuations in value.

**20. Pre-existing medical conditions** as described in the Important Conditions Relating to Health section unless **we** have agreed in writing to cover **you**.

**21.** Any unused or additional costs incurred by **you** which are recoverable from:

- a) The providers of the accommodation, their booking agents, travel agent or other compensation scheme.
- b) The providers of the transportation, their booking agents, travel agent, compensation scheme or Air Travel Organisers' Licensing (ATOL).
- c) **Your** credit or debit card provider or Paypal.

**22. Your** failure to obtain any recommended vaccines, inoculations or medications prior to **your trip**.

**23.** Any costs for **your Package** holiday if it was cancelled by **your** travel provider or **you** were unable to travel due to a change in FCDO travel advice.

## SPORTS AND ACTIVITIES COVERED

The following lists detail the sports and activities that this policy will cover without charge when **you** are participating on a recreational and non-professional basis during any **trip**. Any involvement in these sports and/or activities is subject to **your** compliance with local laws and regulations and the use of recommended safety equipment (such as helmet, harness, knee and/or elbow pads and eye protection).

If **you** are participating in any other sports or activities not mentioned, please telephone **our** customer helpline on **0203 137 9369** as **we** may be able to offer cover for an additional premium. Details of those sports and activities which **you** have purchased cover for will be added to **your** policy schedule.

There is no cover under Section B – Emergency medical and other expenses, Section C - Hospital benefit or Section D - Personal accident unless the activity is either covered as standard without charge or the appropriate additional premium has been paid.

No cover under Section G – Personal liability for those sports or activities marked with \*

\*\* A piste is a recognised and marked ski run within the resort boundaries.

## COVERED AS STANDARD WITHOUT CHARGE:

abseiling (within organisers guidelines)	*administrative, clerical or professional occupations
aerobics	airboarding
archaeological digging	archery
athletics	badminton
banana boating (within organisers guidelines)	baseball
basketball	*battle re-enactment
beach games	billiards/snooker/pool
body boarding (boogie boarding)	bowls
breathing observation bubble (bob)	*camel riding (no personal liability cover)
*camp america - counsellor	canoeing (up to grade 2 rivers)
*Catamaran sailing (if qualified and no racing or liability cover)	*clay pigeon shooting (no liability cover)
climbing (on climbing wall only)	cricket
croquet	cross country running (non-competitive)
curling	Cycling (no racing or competition's). All protective clothing (e.g. helmet) must be worn. No cover for Mountain Biking - see separately listed activity
dancing (including instruction)	*dinghy sailing (no liability cover)
*Driving motorised vehicles (excluding Quad bikes) for which you are licensed to drive in the United Kingdom (other than in motor rallies or competitions) and wearing a helmet if driving a motorbike, moped or scooter and no liability cover	elephant riding/trekking
falconry	fell walking/running (up to 2,500 metres above sea level)
fencing	fishing / deep sea fishing
fives	flying (as a fare paying passenger in a fully licensed passenger carrying aircraft)
flying fox (cable car)	football (American) - not main purpose of the trip

football (Association) - not main purpose of the trip	frisbee/ultimate frisbee including competitions
gaelic football - not main purpose of the trip	*glass bottom boats/bubbles (no liability cover)
*go karting (within organisers guidelines and no liability cover)	golf
handball	*hobie catting (if qualified and no liability cover)
horse riding (excluding competitions, racing, jumping and hunting)	hot air ballooning (organised pleasure rides only)
*hovercraft driving/passenger (no liability cover)	hurling - not main purpose of the trip
hydro zorbing	ice skating
in-line skating/roller blading (wearing pads and helmets)	indoor skating/skateboarding (wearing pads and helmets)
javelin throwing	*jet boating (no racing or liability cover)
jogging	kayaking (up to grade 2 rivers)
korfball	netball
octopush	orienteering
*paint balling/war games (wearing eye protection and no liability cover)	parasailing/parascending - over water
passenger sledge	pedalos
Pilates	pony trekking
*power boating (no racing, non-competitive and no liability cover)	racket ball
refereeing	*rifle range shooting
ringos	roller skating/blading/in line skating (wearing pads and helmets)
rounders	rowing (except racing)
running	safari trekking/tracking in the bush (must be organised tour)
*sailing (if qualified or accompanied by a qualified person and no liability cover or racing)	sand boarding/surfing/skiing
sand dune surfing/skiing	*sand yachting (no liability cover)
scuba diving to 18 metres (if qualified scuba diver or accompanied by qualified instructor and not diving alone or involved in cave diving)	*Segway riding (organised tours only, wearing correct safety equipment including a helmet)
skateboarding (wearing pads & helmets)	sledging/tobogganing (not on snow)
snorkelling	soccer- not main purpose of the trip
softball	spear fishing (without tanks)
*speed sailing (no liability)	sphering/ Zorbing
squash	surfing
swimming	swimming with dolphins
swimming/bathing with elephants	Sydney harbour bridge (walking across clipped onto safety line)
table tennis	*tall ship crewing (no racing and no liability cover)
ten pin bowling	tennis
trampoline	tree canopy walking
trekking/ walking /rambling up to 2,500 metres above sea level	*Trikke riding (organised tours only, wearing correct safety equipment including a helmet)
tubing	tug of war
volleyball	wake boarding
water polo	water ski jumping
water skiing	whale watching
wicker basket tobogganing	wind surfing/sailboarding

wind tunnel flying (pads and helmets to be worn)	*yachting (if qualified and no liability cover)
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Yoga	
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## LEVEL 1 SPORTS AND ACTIVITIES COVERED IF THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID:

*blokartering (no liability cover)	body building
field hockey	Fruit or vegetable picking
gorilla trekking	gymnastics
high diving	lacrosse
marathon running (not professional)	minjin swinging
* Mountain biking (no racing, competition's or extreme downhill mountain biking - e.g. a very steep course which was specifically designed to be used by professional cyclists only). All protective clothing (e.g. helmet) must be worn. Height restriction of 2,500 Metres above sea level.	mud buggying
rap jumping/running (within organisers guidelines)	*restaurant/bar work
*retail trade including manual work (but not including the use of power tools and machinery)	rhino trekking
river tubing	roller hockey
shinty	street hockey (wearing pads and helmets)
street luge	superintendence of manual work
wadi/dune/dune buggying/bashing	

## LEVEL 2 SPORTS AND ACTIVITIES COVERED IF THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID:

bamboo rafting	canoeing (up to grade 3 rivers)
dune sliding	grass skiing
heptathlon	kayaking (up to grade 3 rivers or coastal waters)
manual work (but not including the use of power tools and machinery)	occasional light manual work (but not including the use of tools and machinery)
polo	polo cross
scuba diving to 30 metres (if qualified scuba diver or accompanied by qualified instructor and not diving alone or involved in cave diving)	sea canoeing/kayaking (within sight of land)
trekking/walking/rambling between 2,501 to 3,500 metres above sea level	via ferrata
weightlifting	

## LEVEL 3 SPORTS AND ACTIVITIES COVERED IF THE APPROPRIATE ADDITIONAL PREMIUM HAS BEEN PAID:

bungee jumping (within organiser's guidelines)	bungee slingshot
bungee swoop (within organiser's guidelines)	bungee trampolining

canoeing (grade 4 and above rivers)	capoeira - no contact - dance movement only
elephant polo	hang gliding
*jet skiing (no racing)	judo
karate	kayaking (grade 4 and above rivers)
kite boarding	land skiing
ostrich riding or racing	paragliding
*paramotoring	parapenting/paraponting
parasailing/parascending - over land	pot holing/caving
*quad biking (subject to compliance with local laws and regulations and the use of the organisers recommended safety equipment)	rugby - not main purpose of the trip
scuba diving to 40 metres (if qualified scuba diver or accompanied by qualified instructor and not diving alone or involved in cave diving)	sky jumping (from Sky Tower in Auckland, New Zealand only)
tai chi	white water canoeing/kayaking/ touring up to grade 4
white water rafting (within organisers guidelines) up to grade 4	

## COVERED IF THE APPROPRIATE WINTER SPORTS PREMIUM HAS BEEN PAID:

blade skating	cross country skiing/nordic skiing
dry slope skiing	glacier skiing/walking up to 3,500 metres above sea level
husky dog sledding (organised, non-competitive and with experienced local driver)	ice cricket
ice go karting (within organisers guidelines and no liability cover)	ice windsurfing (no liability cover)
kick sledging	ski - blading
*ski - dooing/snow mobiling	ski biking
ski boarding	ski run walking
skiing on piste	skiing - big foot
skiing - cross country	skiing - mono
skiing - nordic	skiing - off piste** with a guide
skiing alpine	*sledding/sleigh riding (pulled by horse or reindeer as a passenger)
sledding/tobogganing on snow	snow biking
snow blading	snow boarding on piste**
snow boarding - off piste** with a guide	snow bobbing
snow carving (using non powered hand tools only and not working above 3 metres from the ground)	*snow go karting (no liability cover)
*snow mobiling/skidooing (no liability cover)	*snow scooting
*snowcat driving	snow shoe walking up to 3,500 metres above sea level
snow tubing	telemarking
winter walking up to 3,500 metres above sea level (using crampons and ice picks only)	

## HOW TO CONTACT US IN AN EMERGENCY

### International Emergency Medical Assistance Service

Available to you 24 hours a day, 365 days a year

Telephone number : +44 (0)1473 351754

### AXA Medical Assistance

CEGA Group

Funtington Park

Cheesmans Lane

Funtington

Chichester

PO18 8UE

You should contact the Emergency Medical Assistance Service when **you** are abroad:

- a) if **you** are ill or have an accident which means that **you** need to be admitted to hospital as an in-patient; or
- b) to arrange transport **home** if this is considered medically necessary; or
- c) to arrange transport **home** if **you** are told about the illness or death of a **close relative** or a **close business associate** at **home**.

It is very important that **you** call the Emergency Medical Assistance Service as soon as possible. If **you** cannot make the call **yourself**, because the condition requires emergency treatment, **you** or someone on **your** behalf should contact the Emergency Medical Assistance Service within 24 hours of hospitalisation or as soon as possible after that.

## Reciprocal Health Agreements

If **you** are travelling to a country which has a reciprocal health agreement with **your home area** **you** are entitled to benefit from the health care arrangements which exists between the country **you** are visiting and **your home area**.

If **we** agree to pay for a medical expense which has been reduced because **you** have used a reciprocal health agreement or private health insurance, **we** will not deduct the **excess** under Section B – Medical emergency and other expenses.

If travelling within the EU **you** can apply for a GHIC either online at [www.ghic.org.uk](http://www.ghic.org.uk) or by telephoning 0300 330 1350.

If travelling outside of the EU visit [UK reciprocal healthcare agreements with non-EU countries - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

### Private treatment – Worldwide

If **you** are admitted to a private hospital or clinic and no medically suitable state facility is available, **you** or someone on **your** behalf should contact the Emergency Medical Assistance Service as soon as possible before knowingly incurring any expenses over £500. The Emergency Medical Assistance Service will then arrange for the medical expenses covered by the policy to be paid direct to the hospital/clinic.



## What is covered

We will pay **you** up to the amount shown in the schedule of benefits for **your** proportion only of any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay, together with **your** proportion only of any reasonable additional travel expenses incurred if

- a) cancellation of the **trip** is necessary and unavoidable or
- b) the **trip** is curtailed before completion

as a result of any of the following events:

### 1. The death, **bodily injury**, illness, disease, or **pregnancy complication** of:

- a) **you**
- b) any person who **you** are travelling or have arranged to travel with
- c) any person who **you** have arranged to stay with
- d) **your close relative**
- e) **your close business associate**.

### 2. Compulsory **personal quarantine**, jury service attendance or being called as a witness at a Court of Law (other than in an advisory or professional capacity) of **you** or **your travelling companions**.

### 3. Redundancy of **you** or any person who **you** are travelling or have arranged to travel with which qualifies for payment under current **United Kingdom** redundancy payment legislation, and at the time of booking the **trip** there was no reason to believe anyone would be made redundant.

### 4. **You** or any person who **you** are travelling or have arranged to travel with, are a member of the Armed Forces, Territorial Army, Police, Fire, Nursing or Ambulance Services or employees of a Government Department and have **your**/their authorised leave cancelled or are called up for operational reasons, provided that the cancellation or curtailment could not reasonably have been expected at the time when **you** purchased this insurance or at the time of booking any **trip**.

### 5. The Police or other authorities requesting **you** to stay at or return to **your home** due to serious damage to **your home** caused by fire, aircraft, explosion, storm, flood, subsidence, fallen trees, collision by road vehicles, malicious people or theft.

## CANCELLATION ONLY

The Travel Advice Unit of the Foreign, Commonwealth & Development Office (FCDO) or other regulatory authority in a country which **you** are travelling to advising against all travel or all but essential travel within 21 days of **your** departure date, but not including where advice is issued due to a pandemic

## CURTAILMENT ONLY

The Travel Advice Unit of the Foreign, Commonwealth & Development Office (FCDO) or other regulatory authority in a country in which **you** are travelling in advising **you** to evacuate or return to **your home area**, providing the advice came into force during **your trip**.

If the same costs, charges or expenses are also covered under Section T – Golf cover **you** can only claim for these under one section for the same event.

## Special conditions relating to claims

### 1. **You** must get the prior approval of the Emergency Medical Assistance Service to confirm the necessity to return **home**, prior to curtailment of the **trip** due to death, **bodily injury**, illness, disease or **pregnancy complication**.

### 2. If **you** fail to notify the travel agent, tour operator or provider of transport or accommodation as soon as **you** find out it is necessary to cancel the **trip**, the amount **we** will pay will be limited to the cancellation charges that

would have otherwise applied.

### 3. If **you** cancel the **trip** due to a **bodily injury**, illness, disease or **pregnancy complication**, you must provide (at your own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented you from travelling.

We need the medical certificate completed as soon as **you** find out it is necessary to cancel the **trip**, as any delay in seeing a **medical practitioner** could mean that **your** symptoms are no longer present. If **you** cannot get an immediate appointment, please make one for as early as possible and keep all details of this to help substantiate **your** claim.

## What is not covered

### 1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

### 2. We will only consider the unused pre-paid expenses of a person who is insured under this policy. For example, if **you** are travelling with someone who is not insured under this policy **we** will only pay **your** proportion of the costs not theirs, regardless who has paid for the booking.

### 3. The cost of **your** unused original tickets where:

- a) the Emergency Medical Assistance Service or **we** have arranged and/or paid for **you** to come **home** following curtailment of the **trip**, or
- b) **we** have paid **you** for any reasonable alternative and/or additional travel costs incurred by **you** to come **home** following curtailment of the **trip**.

If however **you** have not purchased a return ticket, **we** reserve the right to deduct the cost of an economy flight (based on the cost applicable on the date **you** come **home**) from any additional costs **we** have incurred which are medically necessary to repatriate **you** to **your home**.

### 4. The cost of Air Passenger Duty (APD) whether irrecoverable or not.

### 5. Any claims arising directly or indirectly from:

- a) **Your** misconduct or misconduct by any person who **you** are travelling with or have arranged to travel with leading to dismissal, **your**/their resignation, voluntary redundancy, **you**/them entering into a compromise agreement, or where **you**/they had received a warning or notification of redundancy before **you** purchased this insurance or at the time of booking any **trip**.
- b) Circumstances known to **you** before **you** purchased **your** policy or at the time of booking any **trip** which could reasonably have been expected to lead to cancellation or curtailment of the **trip**.

### 6. Travel tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.

### 7. Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. In addition any property maintenance costs, fees or charges incurred by **you**, as part of **your** involvement in such schemes is not covered.

### 8. Any claim where **you** cannot travel or choose not to travel because the Foreign, Commonwealth and Development Office (FCDO) (or any other equivalent government body in another country) advises against travel due to a pandemic.

### 9. Any claim arising from a reason not listed in the 'what is covered' section

### 10. Any claim from **you** not wanting to travel due to the need to quarantine on return to **your home area**.

### 11. Any claim due to a **regional quarantine**.

### 12. Any additional costs for tests/documentation the government or other regulatory authority introduce and are needed in order for **you** to travel to/from/in **your** destination or to return to **your home area** regardless of whether **you** knew when booking or not.

**13. Your** inability to travel due to **you** not producing vaccine certificates, medical tests/documents which are needed to travel.

**14.** Anything mentioned in 'what is not covered' applicable to all sections of the policy.

**You** should also refer to the Important conditions relating to health.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A medical certificate from the treating **medical practitioner** explaining why it was necessary for **you** to cancel or curtail the **trip**.
- » In the case of death causing cancellation or curtailment of the **trip**, the original death certificate.
- » Booking confirmation together with a cancellation invoice from **your** travel agent, tour operator or provider of transport/accommodation.
- » In the case of curtailment claims, written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation and other pre-paid costs or charges that made up the total cost of the **trip**.
- » Written confirmation that no refund is available in respect of privately booked accommodation and evidence of payment for that accommodation.
- » **Your** unused travel tickets.
- » Receipts or bills for any costs, charges or expenses claimed for.
- » In the case of compulsory quarantine, a letter from the relevant authority or the treating **medical practitioner**.
- » In the case of jury service or witness attendance, the court summons.
- » The letter of redundancy for redundancy claims.
- » A letter from the commanding officer concerned, confirming cancellation of authorised leave or call up for operational reasons.
- » In the case of serious damage to **your home** a report from the Police or relevant authority. Where flooding or other damage is so widespread that the Police or other authorities could not be present, then a report from **your** household insurers or the contractor engaged to carry out repairs to **your home**.
- » Details of any travel, private medical or other insurance under which **you** could also claim.
- » A copy of the advice against all travel or all but essential travel issued by the Foreign, Commonwealth and Development Office (FCDO) or other regulatory authority.

**To make a claim under this section please call: +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## B

## SECTION B EMERGENCY MEDICAL AND OTHER EXPENSES

### What is covered

**We** will pay **you** up to the amount shown in the schedule of benefits for the following expenses which are necessarily incurred during a **trip** but not covered by any reciprocal health agreement, as a result of **you** suffering unforeseen **bodily injury**, illness, disease and/or compulsory quarantine:

**1.** Emergency medical, surgical, hospital, ambulance and nursing fees and charges incurred outside of **your home area**.

**2.** Emergency dental treatment for the immediate relief of pain (to natural teeth only) up to the amount shown in the schedule of benefits incurred outside of **your home area**.

**3.** Costs of telephone calls:

a) to the Emergency Medical Assistance Service notifying and dealing with the problem for which **you** are able to provide receipts or other reasonable evidence to show the cost of the calls and the numbers **you** telephoned

b) incurred by **you** when **you** receive calls on **your** mobile phone from the Emergency Medical Assistance Service for which **you** are able to provide

receipts or other reasonable evidence to show the cost of the calls.

**4.** The cost of taxi fares for **your** travel to or from hospital relating to **your** admission, discharge or attendance for outpatient treatment or appointments and/or for collection of medication prescribed for **you** by the hospital.

**5.** If **you** die:

a) outside **your home area** the reasonable additional cost of funeral expenses abroad up to the amount shown in the schedule of benefits plus the reasonable cost of returning **your** ashes to **your home**, or the additional costs of returning **your** body to **your home**

b) within **your home area** the reasonable additional cost of returning **your** ashes or body to **your home** up to the amount shown in the schedule of benefits.

**6.** Reasonable additional transport and/or accommodation expenses incurred, up to the standard of **your** original booking (for example full or half board, all inclusive, bed and breakfast, self-catering or room only), if it is medically necessary for **you** to stay beyond **your** scheduled return date.

This includes, with the prior authorisation of the Emergency Medical Assistance Service, reasonable additional transport and/or accommodation expenses for a **travelling companion**, friend or **close relative** to stay with **you** or travel to **you** from the **United Kingdom** or escort **you**. Also additional travel expenses to return **you** to **your home** or a suitable hospital nearby if **you** cannot use the return ticket.

**7.** With the prior authorisation of the Emergency Medical Assistance Service, the additional costs incurred in the use of air transport or other suitable means, including qualified attendants, to repatriate **you** to **your home** if it is medically necessary. These expenses will be for the identical class of travel utilised on the outward journey unless the Emergency Medical Assistance Service agree otherwise.

### Special conditions relating to claims

**1.** To enable **us** to direct **you** to the most appropriate medical facility **you** must obtain the prior authorisation of the Emergency Medical Assistance Service or **us** before knowingly incurring any expenses (including any out-patient treatment) over £500. If this is not possible because the condition requires emergency treatment **you** or someone on **your** behalf must contact the Emergency Medical Assistance Service as soon as possible.

**2.** **You** must tell the Emergency Medical Assistance Service as soon as possible of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient or before any arrangements are made for **your** repatriation.

**3.** If **you** suffer **bodily injury**, illness or disease **we** reserve the right to move **you** from one hospital to another and/or arrange for **your** repatriation to the **United Kingdom** at any time during the **trip**. **We** will do this, if in the opinion of the Emergency Medical Assistance Service or **us** (based on information provided by the **medical practitioner** in attendance), **you** can be moved safely and / or travel safely to **your home area** or a suitable hospital nearby to continue treatment.

**4.** The intention of this section is to pay for emergency medical/surgical/dental treatment only and not for treatment or surgery that can be reasonably delayed until **your** return to **your home area**. **Our** decisions regarding the treatment or surgery that **we** will pay for (including repatriation to **your home area**) will be based on this.

If **you** do not accept **our** decisions and do not want to be repatriated, then **we** will cancel **your** cover under the medical related sections being Section A – Cancellation or Curtailment charges, Section B – Emergency medical and other expenses, Section C – Hospital benefit and Section D – Personal accident of **your** policy and refuse to deal with claims from **you** for any further treatment and/or **your** repatriation to **your home area**.

Cover for **you** under all other operative sections will however continue for the remainder of **your trip**.

### What is not covered

**1.** The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless

the **excess** waiver has been purchased as detailed in **your** policy schedule.

**2.** Pregnancy, without any accompanying **pregnancy complication**. This section is designed to provide cover for unforeseen events, accidents, illnesses and diseases and normal childbirth would not constitute an unforeseen event.

**3.** The cost of **your** unused original tickets where:

- a) the Emergency Medical Assistance Service or **we** have arranged and/or paid for **you** to return to **your home**, or
- b) **we** have paid **you** for any reasonable alternative and/or additional travel costs incurred by **you** to return to **your home** if **you** cannot use the return ticket.

If however **you** have not purchased a return ticket, **we** reserve the right to deduct the cost of an economy flight (based on the cost applicable on the date **you** come **home**) from any additional costs **we** have incurred to return **you** to **your home**.

**4.** Any claims arising directly or indirectly for:

- a) The cost of treatment or surgery, including exploratory tests, which are not related to the **bodily injury** or illness which necessitated **your** admittance into hospital.
- b) Any expenses which are not usual, reasonable or customary to treat **your** bodily injury, illness or disease.
- c) Any form of treatment or surgery which in the opinion of the Emergency Medical Assistance Service or **us** (based on information provided by the **medical practitioner** in attendance), can be delayed reasonably until **your** return to **your home area**.
- d) Expenses incurred in obtaining or replacing medication, which **you** know **you** will need at the time of departure or which will have to be continued outside of **your home area**. Where possible and with the agreement of **your medical practitioner**, **you** should always travel with plenty of extra medication in case of travel delays.
- e) Additional costs arising from single or private room accommodation.
- f) Treatment or services provided by a health spa, convalescent or nursing **home** or any rehabilitation centre unless agreed by the Emergency Medical Assistance Service.
- g) Any costs incurred by **you** to visit another person in hospital.
- h) Any expenses incurred after **you** have returned to **your home area**.
- i) Any expenses incurred in England, Scotland, Wales, Northern Ireland, the Isle of Man or the Channel Islands which are:
  - i. for private treatment, or
  - ii. are funded by, or are recoverable from the Health Authority in **your home area**, or
  - iii. are funded by a reciprocal health agreement (RHA) between these countries and/or islands.
- j) Expenses incurred as a result of a tropical disease where **you** have not had the NHS recommended inoculations and/or not taken the NHS recommended medication.
- k) Any expenses incurred after the date on which **we** exercise **our** rights under this section to move **you** from one hospital to another and/or arrange for **your** repatriation but **you** decide not to be moved or repatriated.

**5.** Expenses incurred for medical tests required in the area **you** are travelling to/in/from or returning to **your home area**, or by the **public transport** provider (unless specifically needed for a repatriation arranged by our Emergency Assistance Line).

**6.** Anything mentioned in What is not covered applicable to all sections of the policy.

**You** should also refer to the Important conditions relating to health.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » Receipts or bills for all in-patient/out-patient treatment or emergency dental treatment received.
- » In the event of death, the original death certificate and receipts or bills for funeral, cremation or repatriation expenses.
- » Receipts or bills for taxi fares to or from hospital claimed for, stating details of the date, name and location of the hospital concerned.
- » Receipts or bills or proof of purchase for any other transport, accommodation or other costs, charges or expenses claimed for, including calls to the Emergency Medical Assistance Service.
- » Details of any travel, private medical or other insurance under which **you** could also claim.
- » Information and medical history from your GP (if this is requested you may need to sign a release form with your surgery to obtain this).
- » If travelling in Europe a copy of your European Health Insurance Card.

**To make a claim under this section please call: +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

**For medical assistance and/or repatriation claims +44 (0) 1473 351754**



## SECTION C HOSPITAL BENEFIT

### What is covered

**We** will pay **you** up to the amount shown in the schedule of benefits for every complete 24 hours **you** have to stay in hospital as an in-patient or are confined to **your** accommodation due to **your** compulsory quarantine or on the orders of a **medical practitioner** outside **your home area**, up to a maximum amount shown in the schedule of benefits as a result of **bodily injury**, illness or disease **you** sustain.

**We** will pay the amount above in addition to any amount payable under Section B – Emergency medical and other expenses. This payment is meant to help **you** pay for additional expenses such as taxi fares and phone calls incurred by **your** visitors during **your** stay in hospital.

**You** can only claim benefit under this section or subsection 3 of Section V – Cruise cover for the same event, not both.

### Special conditions relating to claims

**1. You** must tell the Emergency Medical Assistance Service as soon as possible of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient, compulsory quarantine or confinement to **your** accommodation on the orders of a **medical practitioner**.

### What is not covered

**1.** Any claims arising directly or indirectly from:

- a) Any additional period of hospitalisation, compulsory quarantine or confinement to **your** accommodation:
  - i) relating to treatment or surgery, including exploratory tests, which are not directly related to the bodily injury, illness or disease which necessitated **your** admittance into hospital.
  - ii) relating to treatment or services provided by a convalescent or nursing **home** or any rehabilitation centre.
  - iii) following **your** decision not to be repatriated after the date, when in the opinion of the Emergency Medical Assistance Service it is safe to do so.
- b) Hospitalisation, compulsory quarantine or confinement to **your** accommodation:
  - i) relating to any form of treatment or surgery which in the opinion of the Emergency Medical Assistance Service or **us** (based on information provided by the **medical practitioner** in attendance), can be delayed

reasonably until **your** return to **your home area**.

ii) as a result of a tropical disease where **you** have not had the NHS recommended inoculations and/or not taken the NHS recommended medication.

iii) occurring in England, Scotland, Wales, Northern Ireland, the Isle of Man or the Channel Islands relation to either:

- i. private treatment; or
- ii. tests, surgery or other elective or planned treatment the costs of which are funded by or recoverable from the Health Authority in **your home area**.

2. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Confirmation in writing from the hospital, relevant authority or the treating **medical practitioner** of the dates when **you** were admitted and subsequently discharged from hospital, compulsory quarantine or confinement to **your** accommodation.

To make a claim under this section please call: +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## D SECTION D PERSONAL ACCIDENT

### Special definitions relating to this section

#### Loss of limb

- means loss by permanent severance of an entire hand or foot or the total, complete and permanent loss of use of an entire hand or foot.

#### Loss of sight

- means total and irrecoverable loss of sight which shall be considered as having occurred:

- a) in both eyes, if **your** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist and
- b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen scale (which means only seeing at 3 metres what **you** should see at 60 metres).

#### Permanent total disablement

- means an injury sustained, resulting in total and permanent disability which medical evidence confirms will prevent **you** from undertaking **your** usual occupation or a similar one for which **you** are qualified and suitably experienced.

### What is covered

We will pay one of the benefit amounts shown in the policy schedule of benefits if **you** sustain **bodily injury** which shall solely and independently of any other cause, result within two years in **your** death, **loss of limb**, **loss of sight** or **permanent total disablement**.

#### Special conditions relating to claims

1. Our **medical practitioner** may examine **you** as often as they consider necessary if **you** make a claim.

#### Provisions

- 2. Benefit is not payable to **you**:
  - a) If the permanent loss of use of an entire hand or foot is only partial and not total and complete (being 100%).
  - b) Until one year after the date **you** sustain **bodily injury**.

3. Benefit 1. will be paid to the deceased **insured person's** estate.

### What is not covered

- 1. Anything mentioned in What is not covered applicable to all sections of the policy.
- 2. Any claim under **permanent total** disablement if at the date of the accident **you** are over the statutory age of retirement and not in full time paid employment.
- 3. Any claim arising from any event which exacerbates a previously existing **bodily injury**.
- 4. Any claim which is caused by either:
  - a) Medical or surgical procedures or
  - b) Illness, infection or bacteria or
  - c) Any gradually developing bodily deterioration.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » In the event of death, the original death certificate.
- » A medical certificate or report in relation to claims for loss of limb, loss of sight or permanent total disablement.
- » Confirmation of executor or the administrator of the estate.

To make a claim under this section please call: +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## C1 SECTION C1 PET CARE

### What is covered

We will pay **you** up to the amount shown in **your** schedule per day, up to a maximum of the amount shown in **your** schedule for any additional kennel / cattery fees incurred, if **your** domestic dog(s) / cat(s) are in a kennel / cattery during **your trip** and **your** return to **your home area** has been delayed due to **your bodily injury**, illness or disease.

### Special conditions relating to claims

**You** must send **us** written confirmation (at **your** own expense) from the appropriate kennel or cattery, confirming the amount of additional fees that **you** have had to pay, together with the dates when these were payable.

### What is not covered

- » Claims arising from **your bodily injury**, illness or disease that is not covered under Section B – Emergency medical and other expenses.
- » Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Written confirmation from the appropriate kennel or cattery confirming the amount of additional fees that **you** have had to pay together with the dates when these were payable.
- » A medical certificate from the treating **medical practitioner** explaining why **you** were unable to return **home** on time.
- » **Your** unused travel tickets.
- » Details of any travel, pet or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)



## What is covered

**1. We** will pay **you** up to the amount shown in the schedule of benefits for the accidental loss of, theft of or damage to **baggage** and **valuables** during **your trip**. The amount payable in the event of a total loss, will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value), or **we** may replace, reinstate or repair the lost or damaged **baggage** and/or **valuables**.

The maximum **we** will pay **you** for any one article, pair or set of items articles is shown in the schedule of benefits.

The maximum amount **we** will pay for all **valuables** is shown in the schedule of benefits.

**2. We** will also pay **you** up to the amount shown in the schedule of benefits, for the emergency replacement of clothing, medication and toiletries if **your baggage** is temporarily lost in transit during the outward journey and not returned to **you** within 12 hours, as long as **we** receive written confirmation from the carrier, confirming the number of hours the **baggage** was delayed.

If the loss is permanent **we** will deduct the amount paid from the final amount to be paid under this section.

If items of **baggage** and/or **valuables** are also covered under Section U – Wedding/Civil partnership cover or Section V– Cruise cover **you** can only claim for these under one section for the same event.

## Special conditions relating to claims

**1. You** must report to the local Police in the country where the incident occurred within 24 hours of discovery, or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **baggage** and/or **valuables**.

**2. If baggage** and/or **valuables** are lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

**3. If baggage** is lost, stolen or damaged whilst in the care of an airline **you** must give written notice of the claim to the airline within the time limit contained in their conditions of carriage (please keep a copy).

## What is not covered

**1. The excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** (except claims under subsection 2 of What is covered) unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

**2. Loss, theft or damage to gadgets.** Claims for **gadgets** should be made under section E1 and E2- **gadget** cover.

**3. Loss, theft of or damage to valuables left unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe, safety deposit box or left in **your** locked accommodation.

**4. Loss, theft of or damage to baggage** contained in an **unattended** vehicle:

- a) overnight between 9 pm and 9 am (local time) or
- b) at any time between 9 am and 9 pm (local time) unless:
  - i) it is locked out of sight in a **secure baggage area** and
  - ii) **violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of such entry is available.

**5. Loss or damage due to delay, confiscation or detention by customs or any other authority.**

**6. Loss, theft of or damage to** unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, motor accessories, documents of any kind, bonds, securities, perishable goods (such as foodstuffs), bicycles, **ski equipment, golf equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).

**7. Loss or damage due to** cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or an accident to the aircraft, sea vessel, train or vehicle in which they are being carried.

**8. Loss or damage due to** breakage of sports equipment or damage to sports clothing whilst in use.

**9. Loss, theft of or damage to business equipment,** business goods, samples, tools of trade and other items used in connection with **your** business, trade, profession or occupation.

**10. Loss or damage caused by** wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

**11. Loss, theft of or damage to baggage** left **unattended** at any time.

**12. Any virtual currency** including but not limited to crypto-currency, including fluctuations in value.

**13. Anything mentioned in** What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements for items lost, stolen or damaged and for all items of clothing, medication and toiletries replaced if **your baggage** is temporarily lost in transit for more than 12 hours.
- » A letter from the carrier confirming the number of hours **your baggage** was delayed for.
- » Repair report where applicable.
- » Details of any household, travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

E1  
E2SECTION E1 & E2  
GADGET COVER & SECTION E2  
GADGET COVER EXTENSION

(ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

This policy is underwritten by Astrenska Insurance Limited, Cutlers Exchange, 123 Houndsditch, London EC3A 7BU. Astrenska Insurance Limited are authorised by the Prudential Regulation and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Firm reference number 202846.

Bastion Insurance Services Ltd are authorised and regulated by the Financial Conduct Authority in the UK under the registration number 650727. This can be checked on the Financial Services Register at [www.fca.org.uk/firms/systems-reporting/register](http://www.fca.org.uk/firms/systems-reporting/register)



## Important Information

We have not provided **you** with a personal recommendation as to whether this product is suitable for **your** needs so **you** must decide **yourself** whether it is or not. **You** have made a decision based on the information made available to **you**.

This policy meets the demands and needs of those who wish to insure their **gadgets** during their **trip** against theft, accidental damage, breakdown and **accidental loss**.

**Your Gadget** must be in good condition and full working order prior to taking out this policy. If there is evidence that the damage, theft or loss occurred prior to the policy start date **your** claim will be refused and no premium refund will be due.

## Introduction

**You** must read this policy document and the **policy schedule** together. The **policy schedule** tells **you** the period during which the policy is in force, what items are covered, and what level of cover applies to **your** insurance. Please check both documents carefully to make certain they give **you** the cover **you** want.

In return for the payment of **your** premium **we** will provide insurance for **your gadgets** during **your trip**, as stated in **your policy schedule**. This policy only covers **your gadgets** when in the care of **you** or a member of **your immediate family**.

Cover under this insurance is subject to the terms, conditions, and limitations shown below or as amended in writing by **us**.

## Definitions

The words and phrases defined below have the same meaning wherever they appear in bold in this policy document.

**Accessories** – means items such as but not limited to, chargers, protective cases, headphones and hands-free devices, below the value of £150, that are used in conjunction with **your** insured **gadget** but excludes SIM cards and wearables. Evidence of ownership for **accessories** will need to be provided at point of claim. Cover is only in place for **accessories** purchased in the UK. **Evidence of ownership** for accessories will need to be provided at point of claim.

**Accidental loss/accidentally lost** - means that the **gadget** has been accidentally left by **you** in a location and **you** are permanently deprived of its use.

**Accommodation** - **your** hotel, resort, or other main residence where **you** are staying during **your trip**.

**Claims administrators** – Davies Group Limited.

**Criteria:** **We** can only insure **gadgets** if **you** are able to provide Evidence of Ownership, and if they are:

1. Purchased by **you** as new in the UK, or;
2. Purchased by **you** as refurbished in the UK as long as the refurbished **gadget** was sold with a minimum 12-month warranty (which you will be required to provide evidence of), or gifted to **you** as long it meets the above criteria, and **you** are able to provide a UK Gift receipt, and
3. Are not more than 6 years old (18 months for laptops) at the time this policy is initially purchased, and;
4. Are in **your** possession and in good working condition (not accidentally damaged) and;
5. Have not previously been repaired using non-manufacturer parts.

**Evidence of ownership** - A document to evidence that the **gadget** **you** are claiming for belongs to **you**. This can be a copy of the till receipt, delivery note, UK gift receipt or, if the **gadget** is a mobile phone, confirmation from **your** Network Provider that the mobile phone has been used by **you**.

**Excess** - An amount **you** have to pay towards the cost of a claim under this insurance. **You** have to pay this amount regardless of the circumstances leading to the claim.

**Gadget(s)** – the portable electronic **gadget/s** that meet the **Criteria**.

**Gadgets** include: Mobile Phones, iPhones, iPads, Tablets, Camera's Camera Lenses, MP3 Players, Games Consoles, Video Camera's, Go Pro's, Smartwatch-

es, Bluetooth Headsets, Satellite Navigation Devices, PDA's, E-Readers, Head/ Ear Phones / Ear Buds and Laptops. Please note **we** do not provide cover for drones.

**Immediate family** – **your** mother, father, son, daughter, spouse, domestic partner, or other family member who resides with **you** at **your** home.

**Limit of liability** – The maximum **we** will pay in respect of any one claim in relation to **your gadget**, will be limited to the replacement cost of each **gadget** being claimed for and, in any event, shall not exceed the maximum value of cover as shown on **your policy schedule**.

**Precautions** – all measures that would be deemed appropriate to expect a person to take in circumstances to prevent **accidental loss**, accidental damage or theft of **your gadgets**, such as keeping the **gadget** concealed when **you** are in a public place and the **gadget** is not in use.

**Proof of usage** – means evidence that the **gadget** has been in use since policy inception. Where the **gadget** is a mobile phone, this information can be obtained from **your** Network Provider. For other **gadgets**, in the event of an accidental damage claim this can be verified when the **gadget** is sent to **our** repairers for inspection.

**Trip** – means any holiday, pleasure trip or journey made by **you** within the area of travel shown in the **policy schedule** which begins and ends in **your home area** during the **period of insurance**, but excluding one way **trips** or journeys. Any **trip** solely within **your home area** is only covered where **you** have pre-booked at least two nights' accommodation in a hotel, motel, holiday camp, bed and breakfast, holiday cottage or similar accommodation rented for a fee, and that occurs within the dates on **your policy schedule**.

**Terrorism** - means any act, including but not limited to the use of force or violence of the threat thereof, of any person or group of persons, whether acting alone or on behalf of or in connection with any organization or government, committed for political, religious, ideological or similar purposes, including the intention to influence any government to put the public or any section of the public in fear.

**Unattended** – not within **your** sight at all times or out of **your** arms-length reach when away from **your accommodation**.

**We, us, our** – shall mean Collinson Insurance.

**You, your, yourself** – the person, who is over 18 years old, who owns the **gadget(s)** as stated on the **policy schedule**, or if **you** are a business, any current employee.

## What We Will Cover

A. Accidental Damage / Malicious Damage

**We** will arrange a repair if **your gadget** is damaged as the result of an accident or malicious damage whilst on **your trip**. If **your gadget** cannot be economically repaired, it will be replaced.

B. Theft

If **your gadget** is stolen whilst on **your trip**, **we** will replace it. Where only a part or parts of **your gadget** have been stolen, **we** will only replace that part or those specific parts.

C. Accidental loss

If **you** accidentally or unintentionally lose **your gadget** whilst on **your trip**, **we** will replace it.

D. Breakdown

If **your gadget** suffers electrical breakdown whilst on **your trip**, which occurs outside of the manufacturers guarantee period, **we** will repair it. If **your gadget** cannot be economically repaired, it will be replaced. This cover is not available on laptops.

E. Unauthorised Call/Data Use

If **your** mobile phone is lost or stolen whilst on **your trip** and is used fraudulently, and **your** claim is covered by **your** policy, **we** will reimburse **you** for the costs upon receipt of **your** itemised bill up to a maximum value of £2,500 for any one claim. This includes calls, messages, downloads and data made / used from the time it was **accidentally lost** or stolen up to a maximum of 24 hours from discovery of the incident.

F. Liquid Damage

If **your gadget** is damaged as a result of accidentally coming into contact with any liquid whilst on **your trip**, **we** will repair it. If it cannot be repaired

we will replace it.

#### G. Accessories

If **your** claim for **your gadget** is approved, **we** will replace any **accessories** that were **accidentally lost**, stolen or accidentally damaged at the same time as **your gadget** up to a maximum value of £150.

If **we** replace **your gadget** with a different make or model and this means that **you** can no longer use **your** existing **accessories**, **we** will replace them too, up to a maximum value of £150.

## What We Will Not Cover

**Your gadget** is not covered for:

#### 1. Theft:

- from any motor vehicle where **you** or someone acting on **your** behalf is not in the vehicle, unless the **gadget** has been concealed in a locked boot, closed glove compartment or other closed internal compartment and all the vehicle's windows and doors have been closed and locked and all security systems have been activated. A copy of the receipt for any repairs made following the damage caused in gaining entry to the locked vehicle must be supplied with any claim;
- from any **unattended** building or premises (including **your accommodation**) unless the theft involves force in gaining entry to or exit from the building or premises, resulting in damage to the building or premises. A copy of the receipt for any repairs made for such damage must be supplied with any claim;
- when away from **your accommodation**, or when in **your accommodation** with invited guests or other people; unless the **gadget** is concealed on or about **your** person when not in use, or it is stored in a locked room or secured receptacle (such as a locked safe, locked locker or closed desk drawer);
- where **your gadget** was in the possession of a third party (other than a member of **your immediate family**) at the time of the event giving rise to a claim under this insurance;
- where the **gadget** has been left **unattended** when it is away from **your accommodation** (including being in luggage during transit); or
- where all available **precautions** have not been taken to prevent theft;

#### 2. Loss or damage caused by:

- you** deliberately damaging the **gadget**;
- you** not following the manufacturer's instructions;
- the use of non-manufacturer approved **accessories**;

#### 3. Repair or other costs for:

- routine servicing, inspection, maintenance or cleaning;
- loss caused by a manufacturer's defect or recall of the **gadget**;
- repairs carried out by persons not authorised by **us**;
- liquid damage to **your gadget** where the event causing the need to claim involved **you** taking **your gadgets** on a boat or other water vessel (other than a ferry or cruise ship), or whilst taking part in water activities.
- wear and tear or gradual deterioration of performance;
- cosmetic damage of any kind, including scratches, dents and other visible defects that do not affect safety or performance;

#### 4. Any kind of damage whatsoever unless the damaged **gadget** is provided for repair.

#### 5. Any loss of a SIM (subscriber identity module) card.

#### 6. Any expense incurred as a result of not being able to use the **gadget**, or any loss other than the repair or replacement costs of the **gadget** unless relating to unauthorised call/data use for **your** mobile phone up to the maximum value of £2,500.

#### 7. The policy **excess** - if **you** make a claim, an **excess** fee, as stated in the schedule of benefits, applies which must be paid to **us** before **your** claim can be settled.

#### 8. Loss of or damage to **accessories** that were not attached to **your gadget** at the time of the incident.

#### 9. Any claim for a **gadget** where **proof of usage** cannot be provided or evidenced.

#### 10. Any claim for **accidental loss** where the circumstances of the loss cannot be clearly identified, i.e. where **you** are unable to confirm the time and place

**you** last had **your gadget**.

#### 11. Any claim for any **gadget** that was purchased as second hand or used, that is not a refurbished **gadget**, sold with a minimum 12 month warranty

#### 12. Reconnection costs or subscription fees of any kind.

#### 13. War Risk

**Terrorism**, war, invasion, acts of foreign enemies, hostilities whether war is declared or not, civil war, rebellion, revolution insurrection, military or usurped power, confiscation, nationalism or requisition or destruction or damage to property by or under the order of any government or public or legal authority.

#### 14. Nuclear Risk

Damage or destruction caused by, contributed to or arising from:

- ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel; or
- the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or component thereof.

#### 15. Sonic Boom

Damage or destruction directly occasioned by pressure waves caused by aircraft or other aerial devices traveling at sonic or supersonic speeds.

#### 16. Loss of Data or Software

Any loss of or damage to information or data or software contained in or stored on the **gadget** whether arising as a result of a claim paid by this insurance or otherwise.

#### 17. Any indirect loss or damage resulting from the event which caused the claim under this policy.

#### 18. Any liability of whatsoever nature arising from ownership or use of the **gadget**, including any illness or injury resulting from such ownership or use.

#### 19. Value Added Tax (VAT) where **you** are registered with HM Revenue and Customs for VAT.

#### 20. **We** will not provide cover, pay any claim or provide any benefit if doing so would expose **us** to any sanction, prohibition or restriction.

#### 21. Any claim over and above the **limit of liability**.

#### 22. Any **gadget** whilst it's in transit.

#### 23. Any claim for any **gadget** which does not meet the **criteria**.

## Claim Settlement

- The intention of this policy is to put **you** back in the same position as immediately prior to the loss or damage. It is not a replacement as new policy. If the **gadget** cannot be replaced with an identical **gadget** of the same age and condition, **we** will replace it with one of comparable specification or the equivalent value taking into account the age and condition of the original **gadget**. **We** cannot guarantee that the replacement **gadget** will be the same colour as the original item.
- Repairs will take place on **your** return to the UK and will be carried out using readily available parts. Where possible **we** will use Original parts but in some cases, unbranded parts may be used. In the event that any repairs authorised by **us** under this policy invalidate **your** manufacturer's warranty, **we** will repair or replace **your gadget** for the remaining period of **your** manufacturer's warranty in line with **your** manufacturer's warranty terms and conditions.
- In the event of a valid claim resulting in the replacement of the **gadget**, this policy will automatically cover the replacement **gadget**.
- All blocks must be removed from **your gadget** before being sent for repair. This includes any personal pin locks or operator specific security blocks, including Find My iPhone. Failure to do so will result in **your** claim being delayed, and/or, **your gadget** being returned to **you**.

## Conditions And Limitations

- Unless **we** have agreed differently with **you**, English law and the decisions of English courts will govern this insurance.
- This insurance only covers **gadgets** bought in the UK. Cover automatically extends to include use of the **gadgets** anywhere in the world

for **your trip** and is subject to any repairs being carried out in the UK by repairers approved by **us**. No cover is provided for claims where **you** are travelling against the FCDO advice as outlined in clause 14 under 'What is Not Covered' on page 14.

3. The **gadget(s)** must not be more than 6 years old (18 months if the **gadget** is a laptop), must be purchased in the UK as new, or if refurbished, purchased with a minimum warranty period of 12 months, and **you** must be able to provide evidence of ownership when it is requested. Evidence of ownership should include the make, model and IMEI/serial number of the **gadget** and must be in **your** name or, **you** must be in possession of a UK gift receipt.
4. **You** must provide **us** with any receipts, documents or evidence of ownership, that it is reasonable for **us** to request.
5. This insurance may only be altered, varied or its conditions altered or premium changed by **us** giving **you** 30 days' notice in writing.
6. **You** cannot transfer the insurance to someone else or to cover any other **gadget(s)** without **our** written permission.
7. **You** must take all available **precautions** to prevent any loss or damage.
8. Cover excludes costs or payments recoverable from any party, under the terms of any other contract, guarantee, warranty, or insurance.

## Cancellation

**You** are free to cancel this policy at any time. If **you** wish to cancel within 14 days of receipt of the policy documents, **you** may do so by writing to **us** for a full refund providing **you** have not travelled and no claim has been made. If **you** cancel a Single Trip policy after the first 14 days of receipt of the documents, no premium refund will be made. If **you** cancel an Annual Multi-trip policy after the first 14 days of receipt (or after the renewal date if a renewal policy) **we** will refund 5% (five percent) of the premium paid for each complete month still outstanding at the time of cancellation, so long as **you** are not away on a **trip** at the time of cancellation and no claim has been or will be made since the policy was issued.

**We** reserve the right to cancel the policy by providing 21 days' notice by registered post to **your** last known address on the following grounds:

- If **you** make a fraudulent claim
- If **you** are or have been engaged in criminal or unlawful activities.
- If **any** policy in **your** name is added to the Insurance Fraud Register.

In each case no refund of premium will be made.

## Claims Procedure

**You** must:

- notify the claim administrators on 0345 0744828 or by emailing [gadgetclaims@davies-group.com](mailto:gadgetclaims@davies-group.com). as soon as possible but ideally within 48 hours of **your** return to the UK; or **you** can log **your** claim online by visiting **our** portal: <https://bastion.davies-group.com>
- report the theft or **accidental loss** of any **gadget**, within 24 hours of discovery to **your** Airtime Provider and blacklist **your** handset;
- report the theft or loss of any **gadgets** to the Police within 48 hours of discovery and obtain a crime reference number in support of a theft claim and a lost property number in support of an **accidental loss** claim; Please note any delay in reporting an incident to the claim administrators, **your** Airtime Provider or the Police may invalidate **your** right to claim under the policy.

1. Provide **us** with details of the claim and any other contract, guarantee, warranty or insurance that may apply to the loss including but not limited to household insurance. Where appropriate a rateable proportion of the claim may be recovered direct from these Insurers; and

2. If **we** replace **your gadget(s)** the damaged or lost item becomes **our** property. If it is returned or found **you** must notify **us** and send it to **us** if **we** ask **you** to.

3. The appropriate **excess**, as shown in the schedule of benefits, must be paid before **your** claim can be approved.

Please address all claims correspondence to the **Claims administrators**:

Davies Group,  
Unit 8  
Fulwood Business Park  
Caxton Road  
Preston  
PR2 9NZ  
[gadgetclaims@davies-group.com](mailto:gadgetclaims@davies-group.com)

To help **us** improve **our** service **we** may record or monitor telephone calls.

## Warning

If **you** or anyone acting on **your** behalf knowingly commit a fraudulent act or submit a fraudulent document or make a fraudulent statement or exaggerate any claim made under this insurance, **we** will not pay the claim and cover under this and all other insurances currently in force with **us** with which **you** are connected will cease immediately. **You** will not be entitled to any refund of premium under any policy.

**We** will process **your** claim under the terms and conditions of this insurance based on the first reason notified to **us** for the claim. If **your** claim is not covered and **you** then submit a claim having changed the circumstances of the loss or damage **we** consider this as fraud. Details of all such cases will be passed to appropriate agencies for action.

## Consumer Insurance Act

**You** are required to take care to supply accurate and complete answers to all the questions in the declaration and to make sure that all information supplied is true and correct. **You** must tell **us** of any changes to the answers **you** have given as soon as possible.

Under the Consumer Insurance (Disclosure and Representations) Act 2012 **your** failure to take reasonable care to avoid misrepresentation in relation to the information provided (including subsequent changes to any such information) could result in **your** policy being cancelled or **your** claim being rejected or not fully paid.

## Complaints

### Claims / Service

It is the intention to give **you** the best possible service but if **you** do have any questions or concerns about this insurance or the handling of a claim **you** should in the first instance contact The Customer Services Director. The contact details are:

### Claims administrators

Davies Group,  
Unit 8  
Fulwood Business Park  
Caxton Road  
Preston  
PR2 9NZ  
Email: [gadgetcomplaints@davies-group.com](mailto:gadgetcomplaints@davies-group.com)  
Telephone: 0345 074 4788

Please ensure **your** policy number is quoted in all correspondence to assist a quick and efficient response.

The claim administrators will make every effort to resolve **your** complaint immediately. If they cannot resolve **your** complaint by the end of the next working day they will acknowledge **your** complaint within 5 days of receipt and will do their best to resolve the problem within four weeks by sending **you** a final response letter.

If they are unable to resolve **your** complaint in this time they will write to advise **you** of progress and will endeavor to resolve **your** complaint within the following four weeks.

If **you** are still dissatisfied after receiving their final response letter **you** may refer **your** complaint to the Financial Ombudsman Service at the following address:

Financial Ombudsman Service  
Exchange Tower Harbour Exchange Square London E14 9SR  
[www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

**You** have the right of referral within six months of the date of **your** final response letter. Whilst **we** and **our** UK service providers are bound by the decision of the Financial Ombudsman Service, **you** are not. Following the complaints procedure above does not affect **your** right to take legal action.

## Compensation Scheme

The Financial Services Compensation Scheme covers this policy. **You** may be entitled to compensation from this scheme if **we** cannot meet **our** liabilities under this policy. Further information about compensation scheme arrangements is available at [www.fscs.org.uk](http://www.fscs.org.uk) or by telephoning 0207 741 4100.

### Data Protection

#### How we use the information about you

As **your** insurer and a data controller, **we** collect and process information about **you** so that **we** can provide **you** with the products and services **you** have requested. **We** also receive personal information from **your** agent on a regular basis while **your** policy is still live. This will include **your** name, address, risk details and other information which is necessary for **us** to:

- Meet **our** contractual obligations to **you**;
- issue **you** this insurance policy;
- deal with any claims or requests for assistance that **you** may have
- service **your** policy (including claims and policy administration, payments and other transactions); and, detect, investigate and prevent activities which may be illegal or could result in **your** policy being cancelled or treated as if it never existed;
- protect **our** legitimate interests

In order to administer **your** policy and deal with any claims, **your** information may be shared with trusted third parties. This will include members of The Collinson Group, Bastion Insurance Services Ltd, Davies Group, contractors, investigators, crime prevention organisations and claims management organisations where they provide administration and management support on our behalf. Some of these companies are based outside of the European Union where different data privacy laws apply. Wherever possible, **we** will have strict contractual terms in place to make sure that **your** information remains safe and secure.

**We** will not share **your** information with anyone else unless **you** agree to this, or **we** are required to do this by **our** regulators (e.g. the Financial Conduct Authority) or other authorities.

The personal information **we** have collected from **you** will be shared with fraud prevention agencies and databases who will use it to prevent fraud and money-laundering and to verify **your** identity. If fraud is detected, **you** could be refused certain services, finance, or employment. Further details of how **your** information will be used by us and these fraud prevention agencies and databases, and **your** data protection rights, can be found by visiting [www.cifas.org.uk/fpn](http://www.cifas.org.uk/fpn) and [www.insurancefraudbureau.org/privacy-policy](http://www.insurancefraudbureau.org/privacy-policy)

#### Processing **your** data

- **Your** data will generally be processed on the basis that it is:
- necessary for the performance of the contract that **you** have with us;
- is in the public or **your** vital interest; or
- for **our** legitimate business interests.

If **we** are not able to rely on the above, **we** will ask for **your** consent to process **your** data.

#### How we store and protect your information

All personal information collected by **us** is stored on secure servers which are either in the United Kingdom or European Union.

**We** will need to keep and process **your** personal information during the period of insurance and after this time so that **we** can meet **our** regulatory obligations or to deal with any reasonable requests from **our** regulators and other authorities.

**We** also have security measures in place in our offices to protect the information that **you** have given **us**.

#### How you can access your information and correct anything which is wrong

**You** have the right to request a copy of the information that **we** hold about **you**. If **you** would like a copy of some or all of **your** personal information please contact **us** by email or letter as shown below:

**Email address:** [data.protection@collinsongroup.com](mailto:data.protection@collinsongroup.com)

**Postal Address:** Cutlers Exchange, 123 Houndsditch, London EC3A 7BU

This will normally be provided free of charge, but in some circumstances, **we** may either make a reasonable charge for this service, or refuse to give **you** this information if **your** request is clearly unjustified or excessive.

**We** want to make sure that **your** personal information is accurate and up to date. **You** may ask us to correct or remove information **you** think is inaccurate.

If **you** wish to make a complaint about the use of **your** personal information, please contact our Complaints manager using the details above. **You** can also complain directly to the Information Commissioner's Office (ICO). Further information can be found at <https://ico.org.uk/>

### What is covered

**1. We** will pay **you** up to the amount shown in the table below for the following items if they are accidentally lost, damaged or stolen whilst on **your** trip.

Item	Limit (up to)
Bank notes, currency notes and coins  <b>We</b> will also cover foreign currency during the 72 hours immediately before <b>your</b> departure on the outward journey.	Up to the "Cash Limit" shown in <b>your</b> schedule
<b>Personal money</b> and documents.  This includes the cost of the emergency replacement or temporary passport or visa obtained outside <b>your</b> home area and the value of the unused portion of <b>your</b> passport, visa or driving licence	Up to the " <b>Personal money</b> " limit shown in <b>your</b> schedule

**2. We** will pay **you** up to the "Replacement Passport and Travel Documents" limit shown in the schedule of benefits for reasonable additional travel and accommodation expenses necessarily incurred outside **your** home area to obtain a replacement of **your** passport (known as an emergency travel document) or visa which has been lost or stolen outside **your** home area. This includes reasonable additional travel and accommodation expenses incurred because **you** were unable to board the **public transport** on which **you** were booked to return to the **United Kingdom** or continue **your** trip as a result of the accidental loss of, theft of or damage to **your** passport and/or visa.

### Special conditions relating to claims

**1. You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **personal money**, passports or documents.

**2. If** **personal money**, passports or visas are lost, stolen or damaged while in the care of a hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation. Keep all travel tickets and tags for submission if a claim is to be made under this policy.

**3. If** documents are lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

**4. If** documents are **lost**, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline within the time limit set out in their conditions of carriage (please keep a copy).

### What is not covered

**1. The** excess as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** schedule.

**2. Loss**, theft of or damage to **personal money** or **your** passport or visa if left unattended at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe, safety deposit box or left in **your** locked accommodation.

**3. Loss**, theft of or damage to travellers' cheques if **you** have not complied with the issuer's conditions or where the issuer provides a replacement service.



4. Loss or damage due to delay, confiscation or detention by customs or any other authority.

5. Loss or damage due to depreciation (loss in value), variations in exchange rates or shortages due to error or omission.

6. Travel, event or entertainment tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.

7. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt or bank or credit card statements for items lost, stolen or damaged.
- » Receipts or bills or proof of purchase for any transport and accommodation expenses claimed for.
- » Receipts or bills or proof of purchase for any replacement or temporary passport or visa claimed for.
- » Receipt for all currency and travellers cheques transactions.

Details of any household, travel or other insurance under which you could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

policy.

## What is not covered

1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

2. Compensation or legal costs arising directly or indirectly from:

- a) Liability which has been assumed by **you** under agreement (such as a hire agreement) unless the liability would have existed without the agreement.
- b) Pursuit of any business, trade, profession or occupation or the supply of goods or services.
- c) Ownership, possession or use of mechanically propelled vehicles, aircraft or watercraft (other than surfboards or manually propelled rowing boats, punts or canoes).
- d) The transmission of any contagious or infectious disease or virus.

3. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Full details in writing of any incident.
- » Any court claim form, summons, letter of claim or other document must be sent to **us** as soon as **you** receive it.
- » Details of any household, travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## G

### SECTION G PERSONAL LIABILITY

## What is covered

We will pay **you** up to the amounts shown in the schedule of benefits (including legal costs and expenses) against any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause for accidental:

1. **Bodily injury**, death, illness or disease to any person who is not in **your** employment or who is not a **close relative** or persons residing with **you** but not paying for their accommodation.

2. Loss of or damage to property that does not belong to and is neither in the charge of nor under the control of **you**, a **close relative** and/or anyone in **your** employment other than any temporary holiday accommodation occupied (but not owned) by **you**.

## Special conditions relating to claims

1. **You** must give **us** written notice of any incident, which may result in a claim as soon as possible.

2. **You** must send **us** every court claim form, summons, letter of claim or other document as soon as **you** receive it.

3. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **our** permission in writing.

4. **We** will be entitled to take over and carry out in **your** name the defence of any claims for compensation or damages or otherwise against any third party. **We** will have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **you** will give **us** all necessary information and assistance which **we** may require.

5. If **you** die, **your** legal representative(s) will have the protection of this cover as long as they comply with the terms and conditions outlined in this

## H

### SECTION H DELAYED DEPARTURE

#### European Union (EU) Regulation

European Union (EU) Regulation establishes the minimum rights for air passengers to ensure they are treated fairly and **you** may be entitled to compensation from **your** airline in the event of one of the following:

1. Denied Boarding – Have **you** been denied boarding because the airline did not have enough seats on the flight?

2. Cancelled Flight – Has **your** flight been cancelled?

3. Long Delays – Has **your** flight been delayed for three hours or more?

4. Baggage – Has **your** checked-in baggage been damaged, delayed or lost?

5. Injury and Death by Accident(s) – Have **you** been injured during **your** flight?

6. Package Holidays – Did you get what **you** booked?

For full details of your entitlements, visit <http://ec.europa.eu/transport/themes/passengers/air/>

## What is covered

If the **public transport** on which **you** are booked to travel:

1. is delayed at the final departure point from or to the **United Kingdom** and in addition for residents of Northern Ireland any departure point in the Republic of Ireland (but not including delays to any subsequent outbound or return connecting **public transport**) for at least 12 hours from the scheduled time of departure, or

2. is cancelled before or after the scheduled time of departure



as a result of any of the following events:

- a) strike or
- b) industrial action or
- c) adverse weather conditions or
- d) mechanical breakdown of or a technical fault occurring in the **public transport** on which **you** are booked to travel.

#### **We will pay you:**

1. Up to the amounts shown in the schedule of benefits for the first completed 12 hours delay and each full 12 hours delay after that, up to the maximum amount shown in the schedule of benefits (which is meant to help **you** pay for telephone calls made and meals and refreshments purchased during the delay) provided **you** eventually travel, or

2. Up to the amounts shown in the schedule of benefits for **your** proportion only of any irrecoverable unused travel and accommodation costs and other pre-paid charges which **you** have paid or are contracted to pay, if:

- a) after a delay of at least 12 hours, or
- b) following cancellation, no suitable alternative **public transport** is provided within 12 hours of the scheduled time of departure **you** choose to abandon **your trip** before departure from the **United Kingdom** and in addition for residents of Northern Ireland any departure point in the Republic of Ireland.

**You** can only claim under subsection 1. or 2. above for the same event, not both.

**You** can only claim under one of either Section H – Delayed departure or Section I – Missed departure cover for the same event.

## **Special conditions relating to claims**

1. **You** must check in according to the itinerary given to **you** unless **your** tour operator has requested **you** not to travel to the airport.

2. **You** must comply with the terms of contract of the travel agent, tour operator, carrier or transport provider and seek financial compensation, assistance or a refund of **your** ticket from them in accordance with such terms and/or (where applicable) **your** rights under EU Air Passenger Rights legislation in the event of cancellation or long delay of flights.

## **What is not covered**

1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** under sub section 2 unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

2. Claims arising directly or indirectly from:

- a) Strike or industrial action existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
- b) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
- c) Any delays to any subsequent outbound or return connecting **public transport** following **your** departure from the final departure point from or to the **United Kingdom** and in addition for residents of Northern Ireland any departure point in the Republic of Ireland.
- d) Volcanic eruptions and/or volcanic ash clouds.

3. For subsection 2. only of What is covered:

- a) The cost of Air Passenger Duty (APD) whether irrecoverable or not.
- b) Travel tickets paid for using any airline mileage or supermarket reward scheme (for example Avios), unless evidence of specific monetary value can be provided.

c) **We** will only consider the unused pre-paid expenses of a person who is insured under this policy. For example, if **you** are travelling with someone who is not insured under this policy **we** will only pay **your** proportion of the costs not theirs, regardless who has paid for the booking.

d) Accommodation costs paid for using any Timeshare, Holiday Property Bond or other holiday points scheme. In addition any property maintenance costs, fees or charges incurred by **you**, as part of **your** involvement in such schemes are not covered.

e) Any costs incurred by **you** which are recoverable from the providers of the accommodation, their booking agents (or the administrators of either) or for which **you** receive or are expected to receive compensation or reimbursement.

f) Any costs incurred by **you** which are recoverable from the **public transport** operator or for which **you** receive or are expected to receive compensation, damages, refund of tickets, meals, refreshments, accommodation, transfers, communication facilities or other assistance.

g) Any costs incurred by **you** which are recoverable from **your** credit/debit card provider or for which **you** receive or are expected to receive compensation or re-imbursement.

h) Any travel and accommodation costs, charges and expenses where the **public transport** operator has offered reasonable alternative travel arrangements within 12 hours of the scheduled time of departure.

i) Any cost if **your trip** was booked as part of a package holiday except for any pre-paid costs or charges which do not form part of **your** package holiday.

j) Anything mentioned in What is not covered applicable to all sections of the policy.

## **Claims evidence**

**We** will require (at **your** own expense) the following evidence where relevant:

- » Full details of the travel itinerary supplied to **you**.
- » Written confirmation from the carriers (or their handling agents) of the cancellation, number of hours of delay and the reason for these together with confirmation of **your** check in times and details of any alternative transport offered.
- » In the case of cancellation claims, **your** booking confirmation together with written details from **your** travel agent, tour operator or provider of transport/accommodation of the separate costs of transport, accommodation, Air Passenger Duty (APD), taxes, duties, surcharges and other pre-paid costs or charges that made up the total cost of the **trip**.
- » **Your** unused travel tickets.
- » Receipts or bills for any transport, accommodation or other costs, charges or expenses claimed for.
- » Where applicable written confirmation from the **public transport** operator (or their handling agents) and/or provider of accommodation (or their booking agents) that compensation, assistance or reimbursement of any costs, charges and expenses incurred by **you** will not be provided and the reason for this.
- » Details of any travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## **SECTION I MISSED DEPARTURE**

### **What is covered**

**We** will pay **you** up to the amounts shown in the schedule of benefits for reasonable additional accommodation (room only) and travel expenses if **you** incur costs as a result of failing to arrive in time to board the public transport on which **you** are booked to travel (or in the case of a cruise joining **your** ship at the next possible port of call) as a result of:

1. the failure of other **public transport** or

2. an accident to or breakdown of the vehicle in which **you** are travelling or
3. an accident or breakdown happening ahead of **you** on a public road which causes an unexpected delay to the vehicle in which **you** are travelling or
4. strike, industrial action or adverse weather conditions.

If the same expenses are also covered under Section H – Delayed departure cover **you** can only claim under one section for the same event.

## Special conditions relating to claims

1. **You** must allow enough time for the **public transport** or other transport to arrive on schedule and to deliver **you** to the departure point.

## What is not covered

1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.
2. Claims arising directly or indirectly from:
  - a) Strike or industrial action existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
  - b) An accident to or breakdown of the vehicle in which **you** are travelling when a repairers report or other evidence is not provided.
  - c) Breakdown of any vehicle owned by **you** which has not been serviced properly and maintained in accordance with manufacturer's instructions.
  - d) An aircraft or sea vessel being withdrawn from service (temporary or otherwise) on the recommendation of the Civil Aviation Authority, Port Authority or any such regulatory body in a country to/from which **you** are travelling.
  - e) Volcanic eruptions and/or volcanic ash clouds (except claims under subsection 1. of What is covered).
  - f) Additional expenses where the scheduled **public transport** operator has offered reasonable alternative travel arrangements within 12 hours of the scheduled time of departure.

3. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A letter from the **public transport** provider detailing the reasons for failure.
- » A letter from the relevant **public transport** provider, carrier or authority confirming details of the strike, industrial action or adverse weather conditions.
- » **Your** unused travel tickets.
- » Receipts or bills or proof of purchase for any transport, accommodation or other costs, charges or expenses claimed for.
- » In the case of an accident to or breakdown of the vehicle in which **you** are travelling a repairers or breakdown company's report or other evidence from the relevant highway authority or local authority.
- » In the case of the breakdown of any vehicle owned by **you** a copy of the last service report confirming that the vehicle has been serviced properly and maintained in accordance with manufacturer's instructions.
- » Details of any travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## Special definition relating to this section

### Lawyer

- means the legal representative or other appropriately qualified person acting for **you**. **You** have the right to choose the lawyer acting for **you** in the following circumstances:

- a) Where the commencement of court proceedings to pursue **your** claim is required.
- b) should any conflict of interest or dispute over settlement arise.

## What is covered

**We** will pay up to the amounts shown in the schedule of benefits for legal costs to pursue a civil action for compensation, against someone else who causes **you** **bodily injury**, illness or death.

Where there are two or more insured persons insured by this policy, then the maximum amount **we** will pay for all such claims shall not exceed the amount shown in the schedule of benefits.

## Prospects of success

**We** will only provide cover where **your** claim or any appeal **you** are pursuing or defending is more likely than not to be successful. If **you** are seeking damages or compensation, it must also be more likely than not that any judgement obtained will be enforced.

If **we** consider **your** claim is unlikely to be successful or any judgement will not be enforced **we** or **you** may request a second opinion from an independent lawyer. If **You** seek independent legal advice any costs incurred will not be covered by this policy.

If the independent lawyer agrees **your** claim is unlikely to be successful or any judgement is unenforceable then **you** cannot make a claim under this section.

## Special conditions relating to claims

1. **We** shall have complete control over the legal case through agents **we** nominate, by appointing agents of **our** choice on **your** behalf with the expertise to pursue **your** claim.
2. **You** must follow **our** agent's advice and provide any information and assistance required within a reasonable timescale.
3. **You** must advise **us** of any offers of settlement made by the negligent third party and **you** must not accept any such offer without **our** permission.
4. **We** may include a claim for **our** legal costs and other related expenses.
5. **We** may, at **our** own expense, take proceedings in **your** name to recover compensation from any third party for any legal costs incurred under this policy. **You** must give **us** any assistance **we** require from **you** and any amount recovered shall belong to **us**.

## What is not covered

**We** shall not be liable for:

1. Legal costs and expenses incurred in pursuit of any claim against **us**, **our** appointed agents, CEGA Group, someone **you** were travelling with, a person related to **you**, or another **insured person**.
2. Legal costs and expenses incurred prior to **our** written acceptance of the case.
3. Any claim where the legal costs and expenses are likely to be greater than the anticipated amount of compensation.
4. Any claim where legal costs and expenses are variable depending on the outcome of the claim.

5. Legal costs and expenses incurred if an action is brought in more than one country.

6. Travel, accommodation and incidental costs incurred to pursue a civil action for compensation.

7. The costs of any Appeal.

8. Claims by **you** other than in **your** private capacity.

9. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Relevant documentation and evidence to support **your** claim, including photographic evidence.
- » Details of any travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## K SECTION K HIJACKING

### Special definitions relating to this section

#### Hijack

- means the unlawful seizure or wrongful exercise of control of an aircraft or sea vessel that **you** are travelling on as a fare paying passenger.

### What is covered

If **you** are prevented from reaching **your** scheduled destination as a result of hijack of the aircraft or ship in which **you** are travelling we will pay **you** the amount shown in **your** schedule for the first full 24 hours of delay and the amount shown in **your** schedule for each subsequent full 24 hours of delay up to the amount shown in **your** schedule. This benefit is only payable if no claim is made under Section A – Cancellation or curtailment charges or Section H – Delayed departure.

### Special conditions relating to claims

1. **You** have not engaged in any political or other activity which would prejudice this insurance.
2. **You** have no family or business connections that could be expected to prejudice this insurance or increase **our** risk.
3. All **your** visas and documents are in order.
4. **You** must report the matter to the Police within 24 hours of **your** release or as soon as possible after that and provide **us** within 30 days of returning from the **trip** with a Police report confirming that **you** were unlawfully detained and the dates of such detention.

### What is not covered

1. Any claim relating to payment of ransom monies.
2. Any claim arising out of any act(s) by **you** which would be considered an offence by a court of the **United Kingdom** if they had been committed in the **United Kingdom**.
3. Any claim where the detainment, internment or hijack of **you** has not been reported to or investigated by the local Police or local authority.

4. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » A report from the local Police or local authority in the country where the incident occurred confirming that **you** were unlawfully detained and the dates of such detention.
- » Details of any travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## L SECTION L MUGGING COVER

### Special definition relating to this section

#### Mugging/mugged

Means a violent, threatening attack by a third party causing actual bodily harm.

### What is covered

We will pay **you** the amounts shown in the schedule of benefits if **you** need medical treatment in a hospital outside the **United Kingdom** as a result of **you** sustaining bodily injury whilst being mugged if **you** are admitted to a hospital as an inpatient for a period of up to 24 hours and the amount shown in **your** schedule for each additional 24 hour period that **you** remain as an inpatient.

**You** may claim only under Section L – **Mugging** cover or Section C – Hospital benefit for the same event, not both. Depending on the cover **you** have selected, **you** should always check which section is more specific to the event and/or provides the highest level of cover before claiming.

### Special conditions relating to claims

1. **You** must give notice as soon as possible to the Emergency Medical Assistance Service or **us** of any bodily injury which necessitates **your** admittance to hospital as an in-patient.
2. **You** must obtain a written report of the **mugging** from the local Police within 24 hours of the incident or as soon as possible after that.

### What is not covered

- » Any additional period of hospitalisation relating to treatment or surgery, including exploratory tests, which are not directly related to the bodily injury which necessitated **your** admittance into hospital.
- » Hospitalisation relating to any form of treatment or surgery which in the opinion of emergency medical assistance service or **us** (based on information provided by **medical practitioner** in attendance), can be delayed reasonably until **your** return to **your home area**.
- » Any additional period of hospitalisation relating to treatment or services provided by a convalescent or nursing **home** or any rehabilitation centre.
- » Any additional period of hospitalisation following **your** decision not to be repatriated after the date, when in the opinion of emergency medical assistance service it is safe to do so.
- » Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Confirmation in writing from the hospital, relevant authority or the treating **medical practitioner** of the dates when **you** were admitted

and subsequently discharged from hospital, together with details of **your** injuries.

- » Details of any travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## M1 SECTION M1 SCHEDULE AIRLINE FAILURE INSURANCE

This cover is provided by International Passenger Protection Limited, IPP House, 22-26 Station Road, West Wickham, Kent BR4 0PR, United Kingdom and is underwritten by Liberty Mutual Insurance Europe SE (**The Insurer**). The Insurer is authorised and regulated by the Luxembourg Minister of Finance and the Commissariat aux Assurances. Deemed authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority (registered number 829959). Details of the Temporary Permissions Regime, which allows EEA-based firms to operate in the UK for a limited period while seeking full authorisation, are available on the Financial Conduct Authority's website.

### What you are covered for under section M1

**We** will pay up to the amount shown in the table of benefits for each **insured person** named on the Invoice and Airline Ticket for:

1. Irrecoverable sums paid prior to financial failure of the scheduled airline not forming part of an inclusive holiday prior to departure or
2. In the event of financial failure after departure:
  - a) Additional costs incurred by the **insured Person** in replacing that part of the flight arrangements to a similar standard of transportation as enjoyed prior to the curtailment of the travel arrangements; or
  - b) If curtailment of the holiday is unavoidable - the cost of the return flights to the **United Kingdom**, Isle of Man or Channel Islands to a similar standard of transportation as enjoyed prior to the curtailment of the travel arrangements.

Financial Failure means the airline becoming insolvent or has an administrator appointed and does not fulfill the booked flight(s).

### What You are not covered for under section M1

1. Scheduled flights not booked within the **United Kingdom**, Isle of Man or Channel Islands prior to departure.
2. Any costs resulting from the Financial Failure of:
  - a. Any scheduled airline which is, or which any prospect of Financial Failure is known by the **insured Person** or widely known publicly at the date of the **insured Person's** application under this policy
  - b. Any loss or part of a loss which at the time of the happening of the loss is insured or guaranteed by any other existing policy, policies, bond or is capable of recovery under section 75 of the Consumer Credit Act or from any bank or card issuer or any other legal means.
3. The financial failure of any travel agent, tour organiser, booking agent or consolidator with whom the **insured** has booked a scheduled flight.
4. Any losses which are not directly associated with the incident that caused the **insured** to claim. For example, loss due to being unable to reach a pre-booked hotel, villa, car hire or cruise following the financial failure of an airline.

**Please also refer to the What is not covered shown on page 14 of this policy wording for details of what is not covered.**

### How to make a claim under sections M1

International Passenger Protection claims only - Any occurrence which may give rise to a claim should be advised as soon as reasonably practicable to the following by quoting your policy number, travel insurance policy name and reference SAFI-V1.21 (for SAFI claims):

**IPP Claims at Sedgwick  
Oakleigh House  
14-15 Park Place  
Cardiff CE10 3DQ  
Phone: 0345 266 1872  
Email: [Insolvency-claims@ipplondon.co.uk](mailto:Insolvency-claims@ipplondon.co.uk)  
Website: [www.ipplondon.co.uk/claims.asp](http://www.ipplondon.co.uk/claims.asp)**

For claims under all other sections of this policy, please see the Claims conditions section on page 13.

### How to make a complaint under sections M1

Compliance Officer  
Liberty Mutual Insurance Europe SE  
20 Fenchurch Street  
London EC3M 3AW  
Tel: +44 (0) 20 3758 0840

Email: [complaints@libertyglobalgroup.com](mailto:complaints@libertyglobalgroup.com)  
quoting **your** policy and/or claim number;

If after making a complaint **you** are still not satisfied **you** may be entitled to refer the dispute to an independent organisation. This will depend on where **you** are based, please see below.

#### For policyholders and insured persons based in the UK

The Financial Ombudsman Service is a free and impartial service, who may be contacted at:

Exchange Tower  
Harbour Exchange  
London E14 9SR  
Tel: 0800 023 4567  
Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

To confirm whether **you** are eligible to ask the Financial Ombudsman Service to review **your** complaint find out more at [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

### Data Protection

Any information **you** have provided will be dealt with by **us** in compliance with the provisions of the Data Protection Act 1998. For the purposes of providing this insurance and the handling of any claims or complaints, **we** may need to transfer certain information which **you** have provided to other parties.

### Sanctions

**We** will not provide any benefit under this insurance to the extent of providing cover, payment of any claim or the provision of any benefit where doing so would breach any sanction, prohibition or restriction imposed by law or regulation.

### Non-Assignment

No title, right or interest under this policy may be assigned, transferred, conveyed or otherwise disposed of without the consent in writing of the Insurer hereon. Any attempt to assign rights or interests without the Insurer's written consent is null and void.



## SECTIONS N, O, P, Q, R AND S WINTER SPORTS (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

There is no cover under:

- Section B – Emergency medical and other expenses
- Section C – Hospital benefit
- Section D – Personal accident,

for incidents which occur whilst participating in a winter sports, unless the Winter Sports section is showing as added in **your** schedule and the appropriate additional premium has been paid.

Cover for sections N, O, P, Q, R and S only operates:-

1. Under single **trip** policies - if the appropriate winter sports section is shown as operative in the schedule and the appropriate additional premium has been paid.

2. Under annual multi **trip** policies and multi **trip** policies - for a period no more than 28 days in total in each **period of insurance**, providing the appropriate winter sports section is shown as operative in the schedule and the appropriate additional premium has been paid.

## N

### SECTION N SKI EQUIPMENT (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

#### What is covered

**We** will pay **you** up to the amount shown on the schedule of benefits for the accidental loss of, theft of or damage to **your** own **ski equipment** or up to the amount shown for hired **ski equipment**. The amount payable in the event of a total loss, will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value - calculated from the table below), or **we** may replace, reinstate or repair the lost or damaged **ski equipment**.

Age of ski equipment	Amount payable
Less than 1 year old	90% of value
Over 1 year old	70% of value
Over 2 years old	50% of value
Over 3 years old	30% of value
Over 4 years old	20% of value
Over 5 years old	No payment

The maximum **we** will pay for any one article, pair or set of articles is the amount payable calculated from the table above up to the amount shown on the schedule of benefits whichever is the less.

#### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get a written report (at **your** own expense) of the loss, theft or attempted theft of all **ski equipment**.

2. If **ski equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

3. If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline, within the time limit set out in their conditions of carriage (please keep a copy).

#### What is not covered

1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

2. Loss, theft of or damage to **ski equipment** contained in or stolen from an **unattended** vehicle:

a) overnight between 9 pm and 9 am (local time) or

b) at any time between 9 am and 9 pm (local time) unless:

i) it is locked out of sight in a **secure baggage area** and

ii) **Violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.

3. Loss or damage due to delay, confiscation or detention by customs or any other authority.

4. Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

5. Anything mentioned in What is not covered applicable to all sections of the policy.

#### Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, valuation or bank or credit card statements for items lost, stolen or damaged.
- » Repair report where applicable.
- » Details of any household, travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## O

### SECTION O SKI EQUIPMENT HIRE (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

#### What is covered

**We** will pay **you** up to the amount shown on the schedule of benefits for the reasonable cost of hiring replacement **ski equipment** as a result of the accidental loss of, theft of or damage to or temporary loss in transit for more than 24 hours of **your** own **ski equipment**.

#### Special conditions relating to claims

1. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of **your** own **ski equipment**.

2. If **ski equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

3. If **ski equipment** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline within the



time limit set out in their conditions of carriage (please keep a copy).

## What is not covered

1. Loss, theft of or damage to **ski equipment** contained in an **unattended** vehicle:
  - a) overnight between 9 pm and 9 am (local time) or
  - b) at any time between 9 am and 9 pm (local time) unless:
    - i) it is locked out of sight in a **secure baggage area** and
    - ii) **Violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.
2. Loss or damage due to delay, confiscation or detention by customs or any other authority.
3. Loss or damage caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.
4. Loss, theft of or damage to ski equipment left **unattended** at any time.
5. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, valuation or bank or credit card statements for items lost, stolen or damaged together with receipts or bills detailing the costs incurred of hiring replacement **ski equipment**.
- » Details of any travel or other insurance under which **you** could also claim.

## P SECTION P SKI PACK (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

### What is covered

**We** will pay **you**:

- a) Up to the amount shown on the schedule of benefits for the unused portion of **your** ski pack (ski school fees, lift passes and hired **ski equipment**) following **your** **bodily injury**, illness or disease.
- b) Up to the amount shown on the schedule of benefits for the unused portion of **your** lift pass if **you** lose it.

**You** can only claim under Section P – Ski pack cover for the same event, not both.

### Special conditions relating to claims

**1. You** must provide (at **your** own expense) written confirmation to **us** from a **medical practitioner** that the **bodily injury**, illness or disease prevented **you** from using **your** ski pack.

### What is not covered

**1.** Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A medical certificate from the treating **medical practitioner** explaining why **you** were unable to use **your** ski pack.
- » Details of any travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**



## SECTION Q PISTE CLOSURE (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

### What is covered

**We** will pay **you** up to the amount shown in the schedule of benefits for transport costs necessarily incurred by **you**, to travel to and from an alternative site if either lack of or **excess** snow, or an avalanche results in the skiing facilities (excluding cross-country skiing) in **your** resort being closed and it is not possible to ski.

The cover only applies:

- a) To the resort which **you** have pre-booked for a period more than 12 hours and for as long as these conditions continue at the resort, but not more than the pre-booked period of **your** trip and
- b) To **trips** taken outside the **United Kingdom** during the published ski season for **your** resort.

If no alternative sites are available, **we** will pay **you** compensation for each day **you** are unable to ski up to the maximum amount detailed in **your** schedule of benefits.

### Special conditions relating to claims

**1. You** must get (at **your** own expense) written confirmation from the relevant authority, ski lift operator or **your** tour operator's representative of the number of days skiing facilities were closed in **your** resort and the reason for the closure.

### What is not covered

1. Any circumstances where transport costs, compensation or alternative skiing facilities are provided to **you**.
2. The closure or impending closure of the skiing facilities in **your** resort existing or being publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
3. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A letter from the relevant authority, ski lift operator or **your** tour operator's representative of the number of days skiing facilities were closed in **your** resort and the reason for the closure.
- » Receipts or bills for any transport costs claimed for.
- » Details of any travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## R

## SECTION R AVALANCHE OR LANDSLIDE COVER (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

### What is covered

We will pay **you** up to the amount shown in the schedule of benefits for reasonable additional accommodation (room only) and travel expenses necessarily incurred in reaching **your** booked resort or returning **home** if **you** are delayed for more than 12 hours by avalanche or landslide. The cover only applies to **trips** taken outside the **United Kingdom** during the published ski season for **your** resort.

### Special conditions relating to claims

1. **You** must get (at **your** own expense) written confirmation from the relevant authority or **your** tour operator's representative confirming the event.

### What is not covered

Anything mentioned in What is not covered applicable to all sections of the policy.

### Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » A letter from the relevant authority or **your** tour operator's representative confirming details of the avalanche or landslide that caused the delay and the period of delay.
- » Receipts or bills for any accommodation and travel expenses claimed for.
- » Details of any travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

the policy.

### Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » Written confirmation from the treating physiotherapist confirming the bodily injury **you** sustained and the continuation of treatment provided
- » Receipts or bills for all physiotherapy treatment received.
- » Details of any travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## T

## SECTION T GOLF COVER (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

This extension to the policy provides the following amendments to the insurance, specifically for any golfing **trips** taken by **you**:

### Loss of green fees

In addition to the cover provided under Section A – Cancellation or curtailment charges, **we** will pay **you** up to the amount shown in the schedule of benefits per day, up to the maximum amount detailed for any irrecoverable unused green fees which **you** have paid or are contracted to pay if

- a) cancellation of the **trip** is necessary and unavoidable or
- b) the **trip** is curtailed before completion

as a result of any of the events detailed under What is covered in Section A – Cancellation or curtailment charges occurring.

### Golf equipment cover

#### What is covered

In addition to the cover provided under Section E – **Baggage**, **we** will pay **you**:

1. Up to the amount shown in the schedule of benefits for the accidental loss of, theft of or damage to **golf equipment**. The amount payable will be the value at today's prices, less a deduction for wear, tear and depreciation (loss of value), or **we** may replace, reinstate or repair the lost or damaged **golf equipment**.
2. Up to the amount shown in the schedule of benefits for the emergency replacement of **golf equipment** if **your golf equipment** is temporarily lost in transit during the outward journey and not returned to **you** within 12 hours, as long as **we** receive written confirmation from the carrier, confirming the number of hours the **golf equipment** was delayed.

If the loss is permanent, **we** will deduct the amount already paid from the final amount to be paid under this section.

3. Up to the amount shown in the schedule of benefits for the reasonable cost of hiring replacement **golf equipment** as a result of the accidental loss of, theft of or damage to, or temporary loss in transit during the outward journey for more than 24 hours of **your own golf equipment**, as long as **we** receive written confirmation from the carrier, confirming the number of hours the **golf equipment** was delayed.

### Liability for golf buggies whilst in use

#### What is covered

In addition to the cover provided under Section G – Personal liability, **we** will pay **you** and each **insured person** up to the amount shown in the schedule

## S

## SECTION S PHYSIOTHERAPY IN THE UNITED KINGDOM (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

### What is covered

We will pay **you** up to the amount shown in the schedule of benefits for expenses necessarily incurred for a qualified physiotherapist to continue **your** physiotherapy treatment upon return to **your home**, as a result of **your** unforeseen bodily injury sustained whilst taking part in a winter sports activity during **your trip**.

### Special conditions relating to claims

1. **You** must obtain (at **your** own expense) written confirmation from the treating **medical practitioner** details of the bodily injury **you** sustained during **your trip** and that this bodily injury requires continuation of physiotherapy treatment upon **your** return to **your home area**.

### What is not covered

1. Any subsequent costs incurred as a result of **your** injury following **your** return to **your home area** that does not constitute as physiotherapy, including but not limited to any private medical, surgical, hospital, ambulance, doctor or nursing fees.
2. Any expenses which are not usual, reasonable or customary to treat **your** bodily injury including any treatment or services provided by a health or holistic spa.
3. Anything mentioned in What is not covered applicable to all sections of

of benefits (including legal costs and expenses) against any amount **you** become legally liable to pay as compensation for any claim or series of claims arising from any one event or source of original cause for accidental:

1. **Bodily injury**, death, illness or disease to any person who is not in **your** employment or who is not a **close relative** or member of **your** household or
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of **you**, a **close relative**, anyone in **your** employment or any member of **your** household arising from **your** ownership, possession or use of a golf buggy.

## Special conditions relating to claims

1. **You** must get (at **your** own expense) a medical certificate from a **medical practitioner** and the prior approval of the Emergency Medical Assistance Service to confirm the necessity to return **home** prior to curtailment of the **trip** due to death, bodily injury, illness or disease.
2. If **you** fail to notify the travel agent, tour operator or golf club as soon as **you** find out it is necessary to cancel the **trip**, the amount **we** will pay will be limited to the cancellation charges that would have otherwise applied.
3. If **you** cancel the trip due to a **bodily injury**, illness, disease or **pregnancy complication**, **you** must provide (at **your** own expense) a medical certificate from a **medical practitioner** stating that this necessarily and reasonably prevented **you** from travelling. **We** need the medical certificate completed as soon as **you** find out it is necessary to cancel the **trip**, as any delay in seeing a **medical practitioner** could mean that **your** symptoms are no longer present. If **you** cannot get an immediate appointment, please make one for as early as possible and keep all details of this to help substantiate **your** claim.
4. **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **golf equipment**.
5. If **golf equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.
6. If **golf equipment** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please keep a copy).
7. **You** must give **us** written notice of any incident, which may result in a claim as soon as possible.
8. **You** must send **us** every court claim form, summons, letter of claim or other document as soon as **you** receive it.
9. **You** must not admit any liability or pay, offer to pay, promise to pay or negotiate any claim without **our** permission in writing.
10. **We** will be entitled to take over and carry out in **your** name the defence of any claims for compensation or damages or otherwise against any third party. **We** shall have full discretion in the conduct of any negotiation or proceedings or in the settlement of any claim and **you** must give **us** all necessary information and assistance which **we** may require.
11. If **you** die, **your** legal representative(s) will have the protection of this cover as long as they comply with the terms and conditions outlined in this policy.

## What is not covered

1. The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.
2. Any claims arising directly or indirectly from:
  - a) **Your** misconduct or misconduct by any person who **you** are travelling

with or have arranged to travel with leading to dismissal, **your/their** resignation, voluntary redundancy, **you/they** entering into a compromise agreement, or where **you/they** had received a warning or notification of redundancy before **you** purchased this insurance or at the time of booking any **trip**.

- b) Circumstances known to **you** before **you** purchased this insurance or at the time of booking any **trip** which could reasonably have been expected to lead to cancellation or curtailment of the **trip**.

3. Loss, theft of or damage to **golf equipment** contained in an **unattended** vehicle

- a) overnight between 9 pm and 9 am (local time) or

- b) at any time between 9 am and 9 pm (local time) unless:

- i) it is locked out of sight in a **secure baggage area** and
- ii) **Violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of such entry is available.

4. Loss or damage due to delay, confiscation or detention by customs or any other authority.

5. Loss or damage caused by wear and tear, depreciation (loss in value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

6. Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A medical certificate from the treating **medical practitioner** explaining why it was necessary for **you** to cancel or curtail the **trip**.
- » In the case of death causing cancellation or curtailment of the **trip**, the original death certificate.
- » Booking confirmation together with a cancellation invoice from **your** travel agent, tour operator or golf club.
- » In the case of curtailment claims, written details from **your** travel agent, tour operator or golf club of the separate costs of green fees that made up part of the total cost of the **trip**.
- » **Your** unused travel tickets.
- » Receipts or bills for any costs, charges or expenses claimed for.
- » In the case of compulsory quarantine a letter from the relevant authority or the treating **medical practitioner**.
- » In the case of jury service or witness attendance the court summons.
- » The letter of redundancy for redundancy claims.
- » A letter from the commanding officer concerned, confirming cancellation of authorised leave or call up for operational reasons.
- » In the case of serious damage to **your home** a report from the police or relevant authority. Where flooding or other damage is so widespread that the Police or other authorities could not be present, then a report from **your** household insurers or the contractor engaged to carry out repairs to **your home**.
- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements for items lost, stolen or damaged and for all items of **golf equipment** replaced if **your golf equipment** is temporarily lost in transit for more than 12 hours.
- » Receipts or bills detailing the costs incurred in hiring replacement **golf equipment**.
- » A letter from the carrier confirming the number of hours **your golf equipment** was delayed for.
- » Repair report where applicable.
- » Full details in writing of any incident involving the use of a golf

- » buggy on a golf course.
- » Any court claim form, summons, letter of claim or other document must be sent to **us** as soon as **you** receive it.
- » Details of any household, travel or other insurance under which **you** could also claim.

To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)

## SECTION U WEDDING/CIVIL PARTNERSHIP COVER (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

### Special definitions relating to this section

#### You/your/insured person

-means each person travelling to be married or to enter into a civil partnership whose names appear in the policy schedule.

#### Insured couple

-means the **couple** travelling to be married or to enter into a civil partnership whose names appear in the policy schedule.

#### Wedding

-means the religious or civil ceremony at which the **couple** become married or register as civil partners of each other.

#### Wedding attire

-means dress, suits, shoes and other accessories bought specially for the wedding and make-up, hair styling and flowers paid for or purchased for the wedding, forming part of **your baggage**.

### What is covered

**1. We** will pay **you** up to the amount shown in the schedule of benefits for the accidental loss of, theft of or damage to the following items detailed below forming part of **your baggage** or **valuables**:

- a) Wedding ring taken or purchased on the **trip** for each **insured person**
- b) Wedding gifts (including up to £150 for bank notes and currency notes) taken or purchased on the **trip** for the insured **couple**
- c) Wedding attire which is specifically to be worn by the insured **couple** on their wedding day.

The amount payable will be the value at today's prices less a deduction for wear, tear and depreciation (loss of value), or **we** may replace, reinstate or repair the lost or damaged **baggage** and/or **valuables**.

**2. We** will pay the insured **couple** up to the amount shown in the schedule of benefits for the reasonable additional costs incurred to reprint/make a copy of or retake the photographs/video recordings either at a later date during the **trip** or at a venue in the **United Kingdom** if:

- a) the professional photographer who was booked to take the photographs/video recordings on **your** wedding day is unable to fulfil their obligations due to bodily injury, illness or unavoidable and unforeseen transport problems, or
- b) the photographs/video recordings of the wedding day taken by a professional photographer are lost, stolen or damaged within 15 days after the wedding day and whilst **you** are still at the holiday/honeymoon location.

**You** can only claim under one of either this section, Section E – **baggage**, Section F – **personal money** or Section V – Cruise cover for loss of, theft of or damage to the items of **baggage** and/or **valuables** shown above arising from the same event.

### Special conditions relating to claims

**1. You** must report to the local Police in the country where the incident oc-

curred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **baggage** and/or **valuables**.

**2. If baggage** and/or **valuables** are lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

**3. If baggage** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline, within the time limit contained in their conditions of carriage (please keep a copy).

### What is not covered

**1. The excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

**2. Loss, theft of or damage to valuables**, bank notes and currency notes left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel safe, safety deposit box or left in **your** locked accommodation.

**3. Loss, theft or damage to gadgets**. Claims for **gadgets** should be made under sections E1 and E2 - **gadget** cover.

**4. Loss, theft of or damage to baggage** contained in an **unattended** vehicle:

a) overnight between 9 pm and 9 am (local time) or

b) at any time between 9 am and 9 pm (local time) unless:

i) it is locked out of sight in a **secure baggage area** and

ii) **Violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.

**5. Loss or damage** due to delay, confiscation or detention by customs or any other authority.

**6. Loss, theft of or damage to** unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, documents of any kind, bonds, securities, perishable goods (such as foodstuffs), bicycles, **ski equipment**, **golf equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).

**7. Loss or damage** due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or accident to the aircraft, sea vessel, train or vehicle in which they are being carried.

**8. Loss or damage** due to breakage of sports equipment or damage to sports clothing whilst in use.

**9. Loss, theft of or damage to business equipment**, business goods, samples, tools of trade, motor accessories and other items used in connection with **your** business, trade, profession or occupation.

**10. Loss or damage** caused by wear and tear, depreciation (loss of value), variation in exchange rates, atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

**11. Anything** mentioned in What is not covered applicable to all sections of the policy.

### Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, damage, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the



carrier where loss, theft or damage occurred in their custody.

- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements.
- » Repair report where applicable.
- » A medical certificate from the treating **medical practitioner** or relevant transport provider or authority explaining why the professional photographer was unable to fulfil his/her obligations.
- » Details of any household, travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## V SECTION V CRUISE COVER (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

This extension to the policy provides the following amendments to the insurance, specifically for any cruise taken by you.

### Special definition relating to this section

#### Cruise

- means a **trip** involving a sea voyage of more than one day total duration, where transportation and accommodation is primarily on an ocean going passenger ship.

#### What is covered

##### 1. Under Section E – Baggage:

- a) the baggage limit under paragraph 1. is increased to the amount shown in the schedule of benefits under Section V – Cruise cover.
- b) the maximum that **we** will pay for any article, pair or set of articles is increased to the amount shown in the schedule of benefits under Section V – Cruise cover.
- c) the total for all **valuables** is increased to the amount shown in the schedule of benefits under Section V – Cruise cover.

##### 2. We will pay **you** up to the amount shown in the schedule of benefits for each pre-paid shore **trip** excursion missed as a result of the following:

- a) The ship on which **you** are travelling being unable to dock at the scheduled destination due to adverse weather or timetable restrictions or
- b) **You** are confined to **your** cabin as a result of **bodily injury**, illness or disease you sustain whilst on **your** cruise.

##### 3. We will pay **you** up to the amount shown in the schedule of benefits for every complete 24 hours **you** are confined to **your** cabin due to **your** compulsory quarantine, or on the orders of the ship's doctor (or another **medical practitioner** on-board the ship outside your **home area**) up to a maximum shown in the schedule of benefits as a result of **bodily injury**, illness or disease **you** sustain.

**We** will pay the amount above in addition to any amount payable under Section B – Emergency medical and other expenses. *This payment is meant to help you pay additional expenses such as phone calls incurred during your confinement.*

##### 4. We will pay **you** up to the amount shown in the schedule of benefits for each missed port visit as a result of the ship on which **you** are travelling being unable to dock at the scheduled destination as a result of adverse weather or timetable restrictions

**You** can only claim under one of either subsection 1. of What is covered, Section E - **baggage** or Section U – Wedding/Civil partnership cover for the accidental loss of, theft of or damage to any item of **baggage** and/or **valuables** arising from the same event.

## Special conditions relating to claims

**1. You** must get written confirmation from **your** carrier or tour operator confirming **your** scheduled port visit was cancelled and the reason for the cancellation.

**2. You** must give notice as soon as possible to Emergency Assistance Service of any **bodily injury**, illness or disease which necessitates your admittance to hospital as an in-patient, compulsory quarantine or confinement to your accommodation on the orders of a **medical practitioner**.

**3. If baggage** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please keep a copy).

**4. You** must get written confirmation from **your** carrier or tour operator confirming **your** scheduled port visit was cancelled and the reason for the cancellation.

**5. You** must give notice as soon as possible to Emergency Assistance Service of any **bodily injury**, illness or disease which necessitates **your** admittance to hospital as an in-patient, compulsory quarantine or confinement to your accommodation on the orders of a **medical practitioner**.

## What is not covered

**1. The excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule. Note subsection 3 and 4 are not subject to an **Excess** deduction.

**2. Loss, theft of or damage to valuables** left **unattended** at any time (including in a vehicle, in checked in luggage or while in the custody of a carrier, tour operator or **public transport** operator) unless deposited in a hotel or ship's safe, safety deposit box or left in **your** locked cabin or other accommodation.

**3. Loss, theft or damage to gadgets.** Claims for **gadgets** should be made under sections E1 and E2 - **Gadget** cover.

**4. Loss, theft of or damage to baggage** contained in an **unattended** vehicle:

- a) overnight between 9 pm and 9 am (local time) or
- b) at any time between 9 am and 9 pm (local time) unless:
- b) it is locked out of sight in a **secure baggage area** and
- c) **violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.

**5. Loss or damage** due to delay, confiscation or detention by customs or any other authority.

**6. Loss, theft of or damage to** unset precious stones, contact or corneal lenses, hearing aids, dental or medical fittings, antiques, musical instruments, documents of any kind, bonds, securities, perishable goods (such as foodstuffs), bicycles, **ski equipment, golf equipment** and damage to suitcases (unless the suitcases are entirely unusable as a result of one single incidence of damage).

**7. Loss or damage** due to cracking, scratching, breakage of or damage to china, glass (other than glass in watch faces, cameras, binoculars or telescopes), porcelain or other brittle or fragile articles unless caused by fire, theft, or an accident to the aircraft, sea vessel, train or vehicle in which they are being carried.

**8. Loss or damage** due to breakage of sports equipment or damage to sports clothing whilst in use.

**9. Loss, theft of or damage to business equipment**, business goods, samples, tools of trade, motor accessories and other items used in connection with **your** business, trade, profession or occupation.

**10. Loss or damage** caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, vermin, any process of cleaning repairing or restoring, mechanical or electrical breakdown.

**11. Any claims** arising directly or indirectly from any additional period of



confinement or compulsory quarantine:

- i) Relating to treatment or surgery, including exploratory tests, which are not directly related to the **bodily injury**, illness or disease which necessitated **your** confinement.
  - ii) Following **your** decision not to be repatriated after the date when in the opinion of Emergency Assistance Service it is safe to do so.
- b) Confinement or compulsory quarantine:
- i) Relating to any form of treatment or surgery which in the opinion of Emergency Assistance Service or **us** (based on information received from the ship's doctor or other **medical practitioner** in attendance), can be delayed reasonably until **your** return to **your home area**.
  - ii) As a result of a tropical disease where **you** have not had the NHS recommended inoculations and/or taken the NHS recommended medication.

**12.** Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

**We** will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police or Port Authority in the country where the incident occurred (or where appropriate the ship's purser or the cruise operator's representative) for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** cruise operator's representative, hotel or accommodation provider where appropriate, including details of any missed shore **trip**/excursion.
- » All travel tickets and tags for submission.
- » An original receipt, proof of ownership or valuations for items lost, stolen or damaged.
- » Repair report where applicable.
- » Confirmation in writing from the ship's doctor or other treating **medical practitioner** of the dates when **you** were confined to **your** cabin.
- » A letter from **your** cruise operator's representative, hotel or accommodation provider where appropriate, including details of any missed port.
- » Details of any household, travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline) (Scheme Code: A00813)**

## SECTION W BUSINESS TRAVEL (ONLY OPERATIVE IF INDICATED IN THE SCHEDULE)

This extension to the policy provides the following amendments to the insurance specifically for any business **trip** made by **you**.

## What is covered

**1.** In addition to the cover provided under Section E – **baggage** and passport, **we** will pay **you** up to the amount shown in the schedule of benefits for the accidental loss of, theft of or damage to **business equipment**. The amount payable will be the current market value, which takes into account a deduction for wear, tear and depreciation (loss of value), or **we** may replace, reinstate or repair the lost or damaged **business equipment**.

**2.** **We** will pay up to the amount shown in the schedule of benefits for reasonable additional accommodation and travelling expenses incurred in arranging for a colleague or business associate to take **your** place on a pre-arranged business **trip** in the event that:

- a) **You** die.
- b) **You** are unable to make the business **trip** due to **you** being hospitalised or totally disabled as confirmed in writing by a **medical practitioner**.
- c) **Your close relative** or **close business associate** in the **United Kingdom** dies, is seriously injured or falls seriously ill.

## Special conditions relating to claims

**1.** **You** must report to the local Police in the country where the incident occurred within 24 hours of discovery or as soon as possible after that and get (at **your** own expense) a written report of the loss, theft or attempted theft of all **business equipment**.

**2.** If **business equipment** is lost, stolen or damaged while in the care of a carrier, transport company, authority, hotel or **your** accommodation provider **you** must report details of the loss, theft or damage to them in writing and get (at **your** own expense) written confirmation.

**3.** If **business equipment** is lost, stolen or damaged whilst in the care of an airline **you** must give formal written notice of the claim to the airline within the time limit contained in their conditions of carriage (please keep a copy).

## What is not covered

**1.** For subsection 1. of What is covered:

a) The **excess** as shown in the schedule of benefits for each and every claim, per incident claimed for, under this section by each **insured person** unless the **excess** waiver has been purchased as detailed in **your** policy schedule.

b) Loss, theft of or damage to **business equipment** left **unattended** at any time (including in a vehicle, or checked in luggage or while in the custody of a carrier, tour operator, or **public transport** operator) unless deposited in a hotel safe or safety deposit box or left in **your** locked accommodation.

c) Loss, theft or damage to **gadgets**. Claims for **gadgets** should be made under section E1 and E2 – **Gadget** cover.

d) Loss, theft of or damage to **business equipment** contained in an **unattended** vehicle:

- i) overnight between 9 pm and 9 am (local time) or
- ii) at any time between 9 am and 9 pm (local time) unless:

it is locked out of sight in a **secure baggage area** and

e) **Violent and forcible entry** has been used by an unauthorised person to gain entry into the vehicle and evidence of this entry is available.

f) Loss or damage due to delay, confiscation or detention by customs or any other authority.

g) Loss or damage caused by wear and tear, depreciation (loss of value), atmospheric or climatic conditions, moth, vermin, any process of cleaning, repairing or restoring, mechanical or electrical breakdown.

h) Loss of, theft of or damage to CD's, DVD's, films, tapes, cassettes, cartridges or discs other than for their value as unused materials unless purchased pre-recorded, when **we** will pay up to the makers latest list price.

**2.** For subsection 2. of What is covered:

a) Additional costs under subsection 2. b) of What is covered if **you** were totally disabled, hospitalised or **you** were on a waiting list to go into hospital at the time of arranging the business **trip**.

b) Additional costs under subsections 2. b) and c) of What is covered if **you** were aware of circumstances at the time of arranging the business **trip**, which could reasonably have been expected to lead to cancellation of the business **trip**.

**3.** For subsections 1. and 2. of What is covered:

a) Any loss or damage arising out of **you** engaging in manual work.

b) Any financial loss, costs or expenses incurred arising from the interruption of **your** business.

c) Anything mentioned in What is not covered applicable to all sections of the policy.

## Claims evidence

We will require (at **your** own expense) the following evidence where relevant:

- » A police report from the local Police in the country where the incident occurred for all loss, theft or attempted theft.
- » A Property Irregularity Report from the airline or a letter from the carrier where loss, theft or damage occurred in their custody.
- » A letter from **your** tour operator's representative, hotel or accommodation provider where appropriate.
- » All travel tickets and tags for submission.
- » Proof of ownership such as an original receipt, a valuation, original user manual or bank or credit card statements.
- » Repair report where applicable.
- » A medical certificate from the treating **medical practitioner** explaining why **you** were unable to make the business **trip**.
- » In the event of death the original death certificate.
- » **Your** unused travel tickets.
- » Receipts or bills for any transport, accommodation, or other costs, charges or expenses claimed for.
- » Details of any household, travel or other insurance under which **you** could also claim.

**To make a claim under this section please call +44 (0)1473921257 Or  
Register your claim online: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline)  
(Scheme Code: A00813)**

## MAKING A COMPLAINT

AXA Insurance UK plc aims to provide the highest standard of service to every customer.

If **our** service does not meet **your** expectations, **we** want to hear about it so **we** can try to put things right.

All complaints **we** receive are taken seriously. The following will help **us** understand **your** concerns and give **you** a fair response.

### Making your complaint

If **your** complaint relates to a claim on **your** policy, please contact the department dealing with **your** claim as follows:

#### All claim complaints (except Gadget cover or Scheduled airline failure)

Cega Travel Claims,  
PO BOX 127,  
Chichester,  
West Sussex,  
PO18 8WQ  
Online claims registration: [www.cedartreeinsurance.com/claimonline](http://www.cedartreeinsurance.com/claimonline)  
(Scheme Code: A00813)  
Tel: +44 (0)1473921257

#### Gadget Cover

If **your** complaint is in relation to a **gadget** claim, please write to The Customer Services Director. The contact details are:

Davies Group,  
Unit 8  
Fulwood Business Park  
Caxton Road  
Preston  
PR2 9NZ  
Email: [gadgetcomplaints@davies-group.com](mailto:gadgetcomplaints@davies-group.com)  
Telephone: 0345 074 4788

Please ensure your policy number is quoted in all correspondence to assist a quick and efficient response.

#### Scheduled Airline Failure

Any complaint you may have should in the first instance be addressed to:

Compliance Officer  
Liberty Mutual Insurance Europe SE  
20 Fenchurch Street  
London EC3M 3AW  
Tel: +44 (0) 20 3758 0840  
Email: [complaints@libertyglobalgroup.com](mailto:complaints@libertyglobalgroup.com)

#### All emergency medical assistance complaints

Tel: +44(0) 1473 351754

AXA Medical Assistance  
CEGA Group  
Funtington Park  
Cheesmans Lane  
Funtington  
Chichester  
PO18 8UE

If **your** complaint relates to **your** policy, please contact **us** on  
**0203 137 9479**  
**[complaints@cedartreeinsurance.com](mailto:complaints@cedartreeinsurance.com)**

#### When you make contact please provide the following information:

- » **Your** name, address and postcode, telephone number and e-mail address (if **you** have one)
- » **Your** policy and/or claim number, and the type of policy **you** hold
- » The reason for **your** complaint

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

#### Beyond AXA

Should **you** remain dissatisfied following **our** final written response, **you** may be eligible to refer **your** case to the Financial Ombudsman Service.

The Financial Ombudsman Service is an independent body that arbitrates on complaints about general insurance products. **You** have six months from the date of **our** final response to refer **your** complaint to the Financial Ombudsman Service. This does not affect **your** right to take legal action.

If **we** cannot resolve **your** complaint **you** may refer it to the Financial Ombudsman Service at the address given below.

The Financial Ombudsman Service  
Exchange Tower  
Harbour Exchange Square  
London  
E14 9SR  
Tel: 0300 123 9123 or 0800 023 4567  
Fax: 020 7964 1001  
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)

#### Our promise to you

##### We will

- » Acknowledge all complaints promptly.
- » Investigate quickly and thoroughly.
- » Keep **you** informed of progress.
- » Do everything possible to resolve **your** complaint.
- » Use the information from complaints to continuously improve **our** service.