



Individual Protection

Relevant Life Insurance

Cover Details



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Welcome to AIG

American International Group, Inc. (AIG, Inc.) is a leading international insurance organisation serving customers in more than 80 countries and jurisdictions. AIG is the marketing name for the worldwide property-casualty, life and retirement, and general insurance operations of AIG, Inc.

AIG Life Limited is the life insurance arm of AIG in the UK, Channel Islands, Isle of Man and Gibraltar. We provide financial and practical support for individuals, families and businesses when illness or injury threatens their life, lifestyle or livelihood.

Information about our business, performance and financial position, and details on how we control our business and manage risks can be found in our Solvency and Financial Condition Report (SFCR) available on our website www.aiglifeco.uk.



How to use this booklet

This booklet is the AIG Relevant Life Insurance Cover Details. It explains how the cover works to provide a death in service benefit for your employee.

Please read this booklet carefully and keep it in a safe place, along with your Cover Summary. These two documents and the Application Details make up your contract with us.

If there's anything that isn't clear about the insurance you have purchased from AIG Life Limited or if you have any questions, please speak to your financial adviser or call us on 0345 600 6820. If calling from outside the UK, please call +44 1737 441 820.

To make sure we have an accurate record of the instructions we are given, we may record or monitor phone calls.

Who provides AIG Relevant Life Insurance?

AIG Relevant Life Insurance is provided by AIG Life Limited. We specialise in protection insurance such as life insurance, critical illness and income protection cover.

The language we use in the Cover Details

'We', 'us' or 'our' means AIG Life Limited. AIG Relevant Life Insurance is intended to cover an employee within the business - known as the person covered. 'You' or 'your' in this document means the owner of the cover or, where appropriate, to anyone legally entitled to the policy payout - unless a different meaning is given. The owner of the cover is the business taking out the life insurance for the benefit of an employee.

Look out for words in **bold**. These are all explained in section E.

How to contact us

Call us on **0345 600 6820**. If calling from outside the UK, please call **+44 1737 441 820**.

Email us at **enquiries@aiglife.co.uk**.

Write to us at
AIG Life Limited, PO Box 12010,
Harlow CM20 9LG.

We're open Monday – Thursday, 8.30am – 8.00pm and Friday, 8.30am – 5.30pm, except bank holidays.

Please note these opening hours are UK local time. To make sure we have an accurate record of the instructions, we may record or monitor phone calls.

Section A

Setting up the cover



A1 The owner of the cover

Throughout this section you and your means the **owner of the cover**.

If you apply for AIG Relevant Life Insurance to provide an employee with life insurance, the **business** will be the **owner of the cover**. You must place the **cover** in trust in order that the **benefit** can be paid to the employee's beneficiaries.

As **owner of the cover** you must be a **trustee** together with the person covered. It may also be beneficial to appoint a third **trustee**.

A2 Who can take out AIG Relevant Life Insurance?

AIG Relevant Life Insurance is taken out by a business to provide **cover** for an employee.

An employer can be a sole trader (as a **business** with employees), a partnership, a limited liability partnership, a limited company or a charity. However, a sole trader (in their capacity as **business** owner), an equity **partner** in a partnership, or a member of a limited liability partnership are not employees so can't be covered under AIG Relevant Life Insurance. An employee can include a single director of a limited company on PAYE.

The **business** applying for AIG Relevant Life Insurance must be registered in the United Kingdom (**UK**) and the employee whose life is being covered must be either a British citizen or resident in the **UK** when **cover** is applied for.

You are considered resident if:

- You have indefinite leave to remain in the **UK**; or
- You are an EU or EEA national living permanently, and have settled status, in the **UK**; or
- You have resided in the **UK** for the last 12 months, live there permanently and will continue to do so.

Section B

The cover



B1 AIG Relevant Life Insurance

When we will pay the **benefit**

We will pay the **benefit** if the person covered dies or is diagnosed with a **terminal illness**.

The **cover** stops after we have paid the full **sum assured**.

What we will base **benefit** payments on

We will base **benefit** payments on the **sum assured**.

The amount of the **sum assured** can change during the **term of the cover**. How the **sum assured** changes is shown in the **Cover Summary**.

If you have chosen a level lump sum, we will base **benefit** payments on the **sum assured** as shown in the **Cover Summary**.

If you have chosen an increasing lump sum, we will base **benefit** payments on the current **sum assured**. For the first year of the **cover**, we will pay the initial **sum assured** shown in the **Cover Summary**. Each year, on the anniversary of when the **cover** started, the **sum assured** will increase in line with any increase in the **Retail Prices Index (RPI)**, up to a maximum annual increase of 10%. We will write to you each year to tell you the new **sum assured** and the new **premium** that you will be paying.

When we will not pay a claim

We will not pay a claim if any of the following apply:

- the person covered, the **owner of the cover**, or their personal representatives do not give us medical or other evidence that we ask for; or
- the diagnosis of the person covered does not meet the criteria for our definition of **terminal illness**, the diagnosis is not made by a **consultant** or is not expected to lead to death within 12 months; or
- we find the person covered, the **owner of the cover** or any representative of the **business** which owns the **cover** has deliberately given us inaccurate, incomplete or false information which would have affected our decision to offer this **cover**, or would have led us to offer it with different conditions; or
- the **cover** is no longer **active**; or
- the claim is caused by something that we have specifically excluded from this **cover** - this will be shown in the **Cover Summary**; or
- the claim is for death or **terminal illness** and the person covered has left your employment and the **cover** has not been continued by a new employer; or
- the claim is for death and the person covered has left your employment and has not continued the **cover** in their sole name; or
- the claim is for **terminal illness** and the person covered has left your employment and has continued the **cover** in their sole name; or
- the person covered dies as a result of their own actions within one year of the **cover** start date or of them restarting the **cover**. Once the **cover** has been **active** for more than 12 months, if the person covered has asked us to increase the **sum assured** in the 12 months prior to them dying as a result of their own actions, no **benefit** will be payable in respect of this increase.

It is important that the information the person covered, the **owner of the cover**, or any representative of the **business** which owns the **cover** provide to us is true, accurate and complete.

If any of the information provided to us is fraudulent, misleading or deliberately untrue, incomplete or inaccurate:

- the **cover** will be cancelled;
- we will not pay any benefit;
- any **benefit** that has already been paid under the **cover** must immediately be repaid to us; and
- any **premium** payments made for the **cover** will not be returned.

Section C

Managing the cover



C1 Paying for the cover

The **owner of the cover** pays the **premiums**.

When the **premium** is paid

First premium

We will collect this by Direct Debit on, or shortly after, the date the **cover** starts. The Direct Debit must be from a **UK** bank account. **Premiums** must be paid in sterling.

Regular premium

If a monthly **premium** has been selected, we will collect the **premium** on the same date each month. The **business** can choose a date between the 1st and the 28th of the month that suits them. They will pay the **premium** every month.

If an annual **premium** has been selected, we will collect the **premium** on the same date each year.

When the **premium** collection falls on a weekend or bank holiday, we will collect it on the next working day.

What happens if the **premium** is not paid?

If any **premium** remains unpaid for more than 30 days from the date it was due to be collected, we will cancel the **cover**. We will write to the **owner of the cover** and the person covered to tell them that the **cover** has been cancelled.

Restarting a **cover**

If we cancel a **cover** because a **premium** is not paid, the **owner of the cover** can ask us to restart it. They can do this at any time up to six months after the date of the first missed **premium**. We will have no obligation to restart a **cover** and if the **owner of the cover** asks us to do this, we will decide at our discretion if we are willing to restart the **cover**. If we are, we will tell them what we need in order to restart the **cover** and they must clear any **premium** arrears. There may be circumstances when we reserve the right not to restart a **cover**. If this happens, we will explain our decision.

When the **premium** could change

The **premium** will change if:

- the **owner of the cover** makes a change to the **cover**; or
- any of the information provided as part of the application process is incorrect - further details can be found in sections D8 and D13.

If the cover has an increasing **sum assured**, each year on the anniversary of when the **cover** started, the amount of the **sum assured** will increase in line with the **RPI**, up to a maximum annual increase of 10%. Your **premium** will be reviewed annually and will increase by a higher percentage than that of the **sum assured**. The amount of the increase will depend on the age of the person covered.

We will write to the **owner of the cover** each year to tell them the new **sum assured** and the new **premium** that they will be paying. They do not need to accept the increase, but must advise us if not. If they do not accept the increase, we will not increase the **sum assured**. However, if the **owner of the cover** decides to decline the increase for three consecutive years, they will no longer have the option of an increasing **sum assured** under the **cover** in future years.

C2 Telling us about changes to personal details

The **owner of the cover** needs to tell us if there is a change to:

- the name of the **business** or the name of the person covered;
- the contact details (postal address, telephone number, email address) of the **business**, or the person covered;
- the bank account from which payments are being made; or
- additional **trustee(s)**.

We need to be told if the person covered leaves the **business** as the **cover** may need to be amended from that point. Section C4 explains this.

We will ask the **owner of the cover** for the **cover** number when they call us. We will also ask some questions to confirm their identity.

We do not need to be told if the person covered changes their **occupation** within the same **business**.

C3 Changing a cover

There are many ways that a **cover** can be changed to make sure that it is still meeting the needs of the person covered and the **owner of the cover**. All of the changes that can be made are explained in section C4.

The options that increase the **sum assured** or the **term of the cover** are not available to everyone. This could be because, for example, the person covered has a particular medical condition when **cover** is first taken out.

Those options that are not automatically available to everyone have 'limited' after the heading. The **Cover Summary** will show whether these options are available. Before taking up any of these options, the **owner of the cover** should speak to their financial adviser.

C4 Changing your AIG Relevant Life Insurance

The following sections explain how the **owner of the cover** can change their AIG Relevant Life Insurance.

Whenever a change is requested, we will send written confirmation once this has been processed.

1. Increasing the **sum assured** - limited

If this option is shown in the **Cover Summary**, the **owner of the cover** has the right to increase the amount of **cover** they have. They can do this up to 13 weeks after the person covered:

- increases their salary as a result of a pay rise or promotion;
- marries or enters into a civil partnership;
- has a child or legally adopts one; or
- increases the amount of their mortgage.

We will ask to see evidence of the event. Without this, we reserve the right to refuse to allow the increase.

The increase in **cover** cannot be more than 50% of the original **sum assured** or £75,000, whichever is lower.

If the increase is for a mortgage then the extra **sum assured** cannot be more than the increase to the mortgage.

If the increase is as a result of a change in salary or a promotion, there is a limit to which the **sum assured** can be increased by. The **cover** can be increased by the percentage salary increase, provided the salary increase is at least 10%. If the salary increase is less than 10%, it would not be possible to increase the **cover**. Additionally, this option does not apply if the person covered is self-employed, a controlling director or is in a position where they can decide the amount of their own salary.

More than one increase can be requested but the total of all increases must not exceed the **sum assured** of the original **cover** or £150,000, whichever is lower.

This option cannot be taken up:

- after the 55th birthday of the person covered;
- in the last five years of the **term of the cover** except where the **term of the cover** at the start date is five years or less, in which case we will allow increases in the first two years of **cover**;
- while we are paying a **benefit** under any **cover**;
- while the person covered is in a position to make a claim under the **cover**; or
- if the person covered has received **benefit** payments under the **cover** in the last two years.

2. Increasing the **term of the cover** - limited

If this option is shown in the **Cover Summary**, the **owner of the cover** has the right to increase the **term of the cover** they have. They can do this up to 13 weeks after the person covered increases the term of their mortgage.

More than one increase can be requested but the total of all increases must not make the new term:

- More than 150% of the original term or 50 years, whichever is lower; or
- Extend beyond the end of the term of the new mortgage; or
- Extend past the 75th birthday of the person covered.

We will ask to see evidence of the event. Without this, we reserve the right to refuse to allow the increase.

This option cannot be taken up:

- after the 55th birthday of the person covered;
- in the last five years of the **term of the cover** except where the **term of the cover** at the start date is five years or less, in which case we will allow increases in the first two years of **cover**;
- while we are paying a **benefit** under any **cover**;
- while the person covered is in a position to make a claim under the **cover**; or
- if the person covered has received **benefit** payments under the **cover** in the last two years.

3. Reducing the **sum assured**

The **owner of the cover** can reduce the **sum assured** at any time, as long as the reduction doesn't mean that the **sum assured** falls below the minimum allowed. If they later want to increase the **sum assured**, the amount by which they'll be able to do so will be based on the new, lower **sum assured**, not the initial one.

4. Stopping and restarting the annual increase - limited

If the **owner of the cover** has an increasing **sum assured**, we will write to them each year to tell them the new **sum assured** and the new **premium** that they will pay.

They can ask for the increases to stop at any time. If they do, the **sum assured** will be frozen at the level it has reached when they ask us to stop the increase. They can ask us to start increasing it again. But we can't do this if:

- the **sum assured** has been frozen for three consecutive years; or
- we are paying a **benefit** under any **cover**; or
- the person covered is in a position to make a claim under the **cover**; or
- the person covered has received **benefit** payments under the **cover** in the last two years.

5. Continuing the **cover**

There are two potential options to continuing the **cover**:

- (i) Transfer of ownership to a new employer; or
- (ii) Transfer of ownership to the employee.

Transfer of ownership to a new employer:

If the person covered leaves the employment of the **business** owning this AIG Relevant Life Insurance and goes to a new employer, the new employer can request that the insurance continues. This does not require further medical evidence or underwriting. The new employer must make this request within 90 days of the employee leaving the **business** owning this **cover**. Such requests will be considered provided **premium** payments are up to date. If we agree to this, the person covered or new employer must provide us with all details of the new employer and any other information we reasonably require to enable us to administer the **cover** and meet our regulatory and legal obligations. The previous employer should retire as a **trustee** (to ensure they are no longer involved with the **cover**) and the new employer appointed as **trustee** in their place. There must be at least two **trustees** at any given time, one of which must be a person who is not the settlor. The new employer will become responsible for the payment of **premiums**.

Transfer of ownership to the employee:

The person covered can request to continue the insurance in their sole name if they leave the employment of the **business** owning this AIG Relevant Life Insurance. This will not require further medical evidence or underwriting. Following notification that the **business** owning the **cover** no longer wishes to continue the insurance, the person covered will have 90 days to request to continue the **cover**. Any such request will only be considered provided **premium** payments are up to date. The employee will become responsible for the payment of **premiums**. The **terminal illness benefit** will be removed from the policy and will no longer be available.

If we agree to this change, the person covered must provide us with any information we reasonably require to enable us to administer the **cover** and meet our regulatory and legal obligations. The employer should retire as a **trustee** (to ensure they are no longer involved with the **cover**) and a new **trustee** appointed in their place. There must be at least two **trustees** at any given time, one of which must be a person who is not the settlor. The policy will no longer qualify for some of the tax benefits associated with relevant life insurance.

If the new employer fails to make the transfer request within 90 days of the employee leaving their previous employer, or the employee has not made separate arrangements to transfer ownership to his or herself, the **cover** will cease and no **benefit** will be paid.

6. Reducing the **term of the cover**

The **owner of the cover** can reduce the **term of the cover** at any time. They can reduce it by as much as they want, as long as the reduction doesn't mean:

- the new term is lower than our minimum term; or
- the **premium** would fall below our minimum level.

If they later want to increase the term, the amount by which they will be able to do it will be based on the new, lower term, not the original one.

7. Changing how often a **premium** is paid

The **owner of the cover** can change from monthly **premiums** to annual **premiums** and vice versa. If this change is made, it will take effect from the date the next **premium** is due to be collected.

How these changes affect the cost of the **cover**

If you change your **cover**, the **premium** may change.

Please contact us for details about how your **premium** may change.

Asking us to change the **cover**

To ask us to change their **cover**, the **owner of the cover** can:

- phone us on 0345 600 6820. If calling from outside the **UK**, please call +44 1737 441 820.
- email us at enquiries@aiglife.co.uk
- write to us at AIG Life Limited, PO Box 12010, Harlow CM20 9LG

We are open Monday to Thursday, 8.30am to 8.00pm and Friday, 8.30am to 5.30pm, except bank holidays. Please note these opening times are **UK** local time.

To make sure we have an accurate record of the instructions, we may record or monitor phone calls.

C5 Making a claim

When to claim

We ask a representative of the **business** to contact us as soon as possible when claiming.

How to make a claim

The person claiming can:

- phone us on 0345 600 6815. If calling from outside the **UK**, please call +44 1737 441 815.
- email us at claimsteam@aiglife.co.uk
- write to us at Claims Team, AIG Life Limited, PO Box 12010, Harlow CM20 9LG

We are open Monday to Thursday, 8.30am to 8.00pm and Friday, 8.30am to 5.30pm, except for bank holidays. Please note these opening hours are **UK** time. To make sure we have an accurate record of the instructions we are given, we may record or monitor phone calls.

If we are considering a death claim, we will stop collecting **premiums**. If we are considering any other type of claim, **premiums** must be paid while it is being assessed. If the claim is paid, we will advise you if we can refund any of the **premiums** paid while we assessed the claim.

If the person claiming, the **owner of the cover** or the person covered does not give us the evidence we ask for, or the information they do give us is inaccurate or incomplete, we reserve the right to decline a claim. We will pay the reasonable cost of all medical reports or evidence we ask for.

Geographical restrictions

Some types of **cover** require the person covered, or the doctor that diagnoses them, to be in a particular part of the world when a claim is made or when we are making a payment.

For a death claim, the person covered can be anywhere in the world.

For **terminal illness** (where life expectancy is less than 12 months), the person covered can be residing anywhere in the world, however the **consultant** must be in an **eligible country**.

We may consider claims that fall outside our geographical restrictions if we are satisfied that we are able to obtain sufficient and reliable information to allow us to fully assess the claim.

Support during a claim

If we have agreed that the person claiming may have a valid claim, we may pay up to £300 for services that support the person covered or their family. The services that are covered by this support payment will depend on the circumstances but could range from physiotherapy or counselling to the cost of taking taxis to hospital appointments.

We need to approve the services, and agree their cost before they are used. Whether we approve the service depends on the situation of the person covered and the advice of their doctor. We will refund the cost as soon as we have received the receipts for the services that we agreed.

The claims adviser will explain the services that we can pay for.

Please remember that if we pay for support services, it does not necessarily mean we will approve a claim on your **cover**.

Any payments made under the Claims Support Fund will not be deducted from the **benefits** payable.

Who we will pay the **sum assured** to

We will pay the **sum assured** to the person legally entitled to receive it. Who this will be depends on the nature of the claim and the circumstances at the time.

In the case of a death or **terminal illness** claim, the **sum assured** will be paid to the **trustees** who must then follow the terms of the trust to distribute the monies to the chosen beneficiaries. The **trustees** need to send us the original Trust Deed and any deeds altering the trust before we can pay the **sum assured** to them. We will return these when we pay the claim.

During the course of the claim assessment, we will establish and confirm who we identify as legally entitled to receive the **benefit**.

How we will pay the **sum assured**

We will pay the **sum assured** due under the **cover** in pounds sterling by direct credit into a **UK** bank account nominated by the **owner of the cover**, the **trustee(s)**, the **assignee(s)** or their legal representative.

If the claimant wishes to receive the **sum assured** outside of the **UK**, then arrangements for such transfer from the **claimant's UK** bank account must be made at the **claimant's** own expense. The **claimant** will bear the risk of any difference due to the currency exchange rates.

Section D

General terms and conditions



D1 Cancelling a cover

When your **cover** starts, we will send you information about your right to change your mind and cancel your **cover**. You have 30 days from the date you receive this information to cancel your **cover**. If you cancel your **cover** in this time we will refund any **premiums** you've paid to us, unless we have paid a claim before you cancel.

Should you not cancel your **cover** within this time period, your **cover** will remain **active** as set out in your **Cover Summary**.

You can stop your **cover** at any other time. Once you tell us, your **cover** will end on the day before your next monthly **premium** is due to be collected. Any **premiums** paid to date will not be refunded. If you are paying annual **premiums**, your **cover** will end on the day before the next monthly anniversary of the **cover**. We will retain the cost of any full (or partial) months of **cover** up to the date of cancellation and will refund any balance of the annual **premium**.

D2 Surrender value

The **cover** does not have a surrender value at any time.

D3 Inflation

The purchasing power of the **benefit(s)** paid out may be reduced in real terms, due to the effects of **inflation**. If the **cover** has an increasing **sum assured**, this may provide some protection against the effects of **inflation**, however this is not guaranteed. For further information on the effects of **inflation** please speak to your financial adviser.

D4 Interest

If we pay a claim any later than eight weeks after we receive all the information we need, we will pay interest on the overdue amount from the date payment should have been made. This will be at the Bank of England base rate at the time.

D5 Data protection

We are committed to protecting the privacy of customers, claimants and other business contacts.

In order to provide our products and services and to run our business, we will collect, use and disclose your personal information, including sensitive personal data (health information). Where we do this, we will rely either on your consent, or on a combination of the following justifications: performing a contract with you or preparing to enter into a contract with you; complying with regulatory requirements; or having a legitimate interest to request your personal information.

“Personal information” identifies and relates to you or other individuals (e.g. your partner or other members of your family). If you provide personal information about another individual, you must (unless we agree otherwise) inform the individual about the content of this notice and our Privacy Policy and obtain their permission (where possible) for sharing of their personal information with us.

Personal information we collect

Personal information we may collect about the **owner of the cover** and the person covered includes:

- General identification and contact information;
- Family details;
- Sensitive information such as health and lifestyle details;
- Other sensitive information such as racial/ethnic origin, religious or other beliefs, sexual life, criminal proceedings – outcomes and sentences, offences/alleged offences; and
- Financial details: bank account details and other financial information.

How we use your personal information

We may use the personal information provided to us to:

- Make decisions about whether to provide insurance and assistance services (such as claim assessment, claim processing and claim settlement);
- Administer your policy, assess and pay claims, and general customer service activities (including complaint resolution and claims disputes);
- Detect, investigate and prevent and crime, including fraud and money laundering;
- Carry out market research and analysis;
- Comply with applicable laws and regulatory obligations (including those outside your country of residence); and
- Market products and services of the **AIG Group**, unless you have specifically asked us not to in the application.

Sometimes, as part of our business operations, decisions are taken about you using automated computer software and systems. These decisions do not involve human input. For example, we use automated decision making to assess your eligibility for insurance and to determine the **premium** amount.

To opt-out of any marketing communications that we may send you, contact us by e-mail at DataProtectionOfficer@aiglife.co.uk or by writing to The Data Protection Officer, AIG Life, 58 Fenchurch Street, London, EC3M 4AB. If you opt-out, we may still send you other important service and administration communications relating to the services which we provide to you from which you cannot opt-out.

Where we may get personal information from

We may get personal information about the person covered or the **owner of the cover** from them, their financial adviser; or from other sources - for instance their doctor.

We may ask their doctor for information before we offer **cover**. We may also get a report from their doctor or telephone them for more information after the **cover** has started. If we find that we have been given incomplete, inaccurate or false information, we do not receive the report from their doctor or they are unavailable for interview, we reserve the right to cancel the **cover** within 13 weeks.

Who we will share personal information with

We may share personal information (including medical information with their consent) about the person covered or **owner of the cover** solely for the purposes listed above in 'How we will use personal information' with certain named third parties.

These third parties are:

- **AIG Group** companies: AIG Life Limited is a member company of American International Group, Inc. As such, we have group companies throughout the world, both inside and outside Europe (for example, in the USA);
- Our reinsurers (a list of these reinsurers can be provided on request);
- Our external third party service providers (including medical screening service providers);
- Your financial adviser;
- Your own doctor and other medical consultants;
- Legal and regulatory bodies;
- Law enforcement and fraud prevention agencies; and
- Other insurance companies or organisations.

International Transfer of personal information

Due to the global nature of our business, personal information may be transferred to parties located in other countries (including the USA, China, Mexico, Malaysia, Philippines and Bermuda) that have data protection regimes that are different to those in the country where you are based, including countries which have not been found to provide adequate protection for personal information by the European Commission.

When making these transfers, we will take steps to ensure that your personal information is adequately protected and transferred in accordance with the requirements of data protection law.

Security of personal information

Appropriate technical and physical security measures are used to keep your personal information safe and secure. When we provide personal information to a third party (including our service providers) or engage a third party to collect personal information on our behalf, the third party will be selected carefully and required to use appropriate security measures to protect the confidentiality and security of personal information.

Your rights

You have a number of rights under data protection law in connection with our use of your personal information. These rights may only apply in certain circumstances and are subject to certain exemptions. These rights may include a right to access personal information, a right to correct inaccurate data, a right to erase data or suspend our use of data. These rights may also include a right to transfer your data to another organisation, a right to object to our use of your personal information, a right to request that certain automated decisions we make have human involvement, a right to withdraw consent and a right to complain to the data protection regulator.

Further information about your rights and how you may exercise them is set out in full in our Privacy Policy (see below).

Privacy Notice

For full details on how we use personal information, how we maintain the security of personal information, who we share personal information with, the data protection rights available to individuals in the European Economic Area (EEA), and who to contact in the event of any queries, please refer to our full Privacy Notice which can be found on our website (<http://www.aiglife.co.uk/privacy-policy>).

Alternatively, you may request a copy by writing to The Data Protection Officer, AIG Life, 58 Fenchurch Street, London, EC3M 4AB or by email at DataProtectionOfficer@aiglife.co.uk

D6 Taxation, laws and regulations

AIG Relevant Life Insurance has been designed to comply with the conditions for relevant life insurance contained in Section 393(B)(4) of the Income Tax (Earnings and Pensions) Act 2003 (ITEPA 2003) and sections 481 and 482 of the Income Tax (Trading and Other Income) Act 2005 (ITTOIA 2005).

To ensure the insurance meets the conditions outlined by the above legislation, it must be placed in trust with either an individual or charity as a named beneficiary.

This contract between you and AIG, and any dispute or claim arising out of or in accordance with it or its subject matter or formation (including non-contractual disputes or claims), shall be governed by and construed in accordance with the laws of England and Wales (**Laws**).

By taking out this contract, the **owner of the cover** agrees to submit to the exclusive jurisdiction of the courts of England and Wales if there is ever a dispute between them and AIG Life Limited. **Laws** may change in future and AIG Life Limited cannot be held responsible for any information given or any changes in tax provisions or legislation.

Benefit(s) payable under this **cover** are normally free from Income Tax and Capital Gains Tax for **UK** residents. This may change if the **law** changes.

Professional guidance should be sought before any type of assignment or changed ownership is undertaken.

We cannot advise whether a trust is suitable in any particular circumstances or give tax advice in relation to the use of trusts and would recommend that you take professional advice before setting up a trust.

Cover held by the **trustee(s)** of a trust should not normally form part of the estate of the person covered for Inheritance Tax purposes. There is a potential Inheritance Tax charge when **benefit(s)** are paid out of a trust (known as 'exit charges') or on every tenth anniversary of the creation of the trust (known as 'periodic charges'). This applies to **UK** residents only.

Claimant(s) who are outside of the **UK** when the lump sum is received may also be subject to additional taxation in the local jurisdiction. Please consult your tax adviser or local tax inspector for clarification. If there is any change to tax and, other **laws**, or State Benefits, AIG Life Limited may change the terms and conditions set out in the **cover** documents in order to comply with such **laws**.

D7 Contract

The contract between the **owner of the cover** and AIG Life Limited consists of:

- any information provided by the person covered or the **owner of the cover** in their application and any subsequent information they have provided;
- these terms and conditions, which we may amend from time to time;
- any additional terms and conditions detailed in the **Cover Summary** that we send when the **cover** starts; and
- any additional terms and conditions detailed in any subsequent **Cover Summary**.

The contract between the **owner of the cover** and AIG Life Limited as described above constitutes the entire agreement and understanding between the parties and supersedes and extinguishes all previous drafts, agreements, arrangements and understandings between them, whether written or oral, relating to its subject matter.

If there is a conflict between these terms and any of the terms set out in the **Cover Summary**, the terms set out in the **Cover Summary** will take precedence.

If any court finds that any provision of the **Cover Summary** or any other document embodying the contract between the **owner of the cover** and AIG Life Limited (or part thereof) is invalid, illegal or unenforceable that provision or part-provision shall, to the extent required, be deemed to be deleted, and the validity and enforceability of the other provisions of the **Cover Summary** or any other document embodying the contract between the **owner of the cover** and AIG Life Limited shall not be affected.

The contract between the **owner of the cover** and AIG Life Limited and any dispute or claim arising out of it shall be governed by and construed in accordance with the **law**.

D8 Misstatement of age

If, after the **cover** is taken out, we learn that the person covered has a different date of birth than the one originally stated by you, this will impact on the **premium** and/or **sum assured** of their **cover**.

In some cases, this may affect their right to the **cover** and your **cover** may be cancelled. It may also affect how we have interpreted medical evidence, which may result in a claim not being paid or the **sum assured** being reduced.

D9 Complaints

If the **owner of the cover**, the person covered or any person to whom the plan has been assigned has a complaint, they can contact our customer care team as detailed on page two of this document.

We will try to resolve complaints as quickly as possible. If we can't deal with a complaint promptly, we will send a letter to acknowledge it and then give regular updates until it is resolved.

We are committed to resolving complaints through our own complaints procedures. However, if a matter cannot be resolved satisfactorily, the person with the complaint may be able to refer it to the Financial Ombudsman Service.

The Financial Ombudsman Service helps settle disputes between consumers and financial firms. Their service is independent and does not cost anything. They can decide if we have acted wrongly and if the person with the complaint has lost out as a result. If this is the case, they will tell us how to put things right and whether we have to pay compensation.

Some businesses may not be eligible to complain to the Financial Ombudsman Service if they exceed a certain number of employees or have an annual turnover in excess of the Ombudsman's limits.

If a complaint is made, we will send a leaflet explaining more about the Financial Ombudsman Service which includes information on the current eligibility requirements. The leaflet is also available at any time on request. Alternatively, the Ombudsman can be contacted at the following address:

Financial Ombudsman Service, Exchange Tower, Harbour Exchange Square, London E14 9SR.

Telephone 0800 023 4567 (calls to this number are free on mobile phones and landlines) or 0300 123 9123 (calls to this number are cost no more than calls to 01 and 02 numbers). If calling from outside the UK, please call +44 20 7964 0500.

Email: complaint.info@financial-ombudsman.org.uk

Website: www.financial-ombudsman.org.uk

If a complaint is made, it will not affect the right to take legal proceedings.

D10 If we cannot meet our liabilities

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

Before looking to pay compensation, the FSCS will first see if they can arrange for your current policy to be maintained. They may arrange for your policy to be transferred to another insurer or provide a new policy. If this is not possible, the FSCS aims to provide compensation.

Most of our customers, including most individuals and small businesses, are covered by the FSCS.

Whether or not you can claim, and the amount you could claim, will depend on the specific circumstances of your claim. The FSCS will pay 100% of the value of the claim. There is no upper financial limit on the amount of the payment.

You can find out more about the FSCS, including eligibility to claim, by visiting its website www.fscs.org.uk. Alternatively, you can contact the Financial Services Compensation Scheme at the following address:

Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU.

Telephone: 0800 678 1100 or 020 7741 4100

Email: enquiries@fscs.org.uk

Please be aware that the rules of the FSCS may change in the future, or FSCS may take a different approach on their application of the above, depending on the circumstances.

D11 Assignment

If the **owner of the cover** assigns any of their legal rights under the **cover** to someone else (including any assignment to the **trustee(s)** of a trust), we must see notice of the assignment when a claim is made. This notice must be sent to:

AIG Life Limited, PO Box 12010, Harlow CM20 9LG.

D12 Rights of third parties

No term of this contract is enforceable under the Contracts (Right of Third Parties) Act 1999 by a person who is not party to this contract. This does not affect any right or remedy of a third party which may exist or be available otherwise than under that Act.

The **owner of the cover** and AIG Life Limited are the parties to the contract.

D13 Disclosure confirmation and verification

The person covered will be asked to provide details of their health and personal circumstances. The person covered and the **owner of the cover** must provide full, honest and accurate answers to all questions asked. Furthermore, subject to what we say in section 'Telling us about changes to personal details', we must be told immediately if the information in the **Application Details** is not correct as this may affect the **cover**.

The information provided to us by the person covered is confidential and we will not disclose it to the **owner of the cover** without their permission. We will send to the person covered details of their answers and a copy of their **Application Details**, and ask them to advise us of any corrections or additions they wish to make. If they do not answer our questions fully and honestly, this may result in us refusing any future claim.

We will provide the **owner of the cover** and the person covered with a **Cover Summary** which will include information on any exclusions made as a result of the health information provided by the person covered.

We may select the application for a disclosure check. To complete the check, we will either obtain a report from the doctor of the person covered, or call them for further information or perform data checks. If we have selected it for a check, the person covered must give permission for us to contact their doctor if required, and use all reasonable endeavours to ensure we are able to complete the check. If we have requested any additional information from the **owner of the cover** or person covered they must provide it within 30 days.

If they do not respond to a request from us within 13 weeks for medical evidence or 30 days for other information, we will cancel the **cover**.

D14 Economic sanctions

We will not be responsible or liable to provide **cover** (including payment of a claim or provision of any other **benefit**) under this policy if we are prevented from doing so by any economic sanction which prohibits us or our **Parent Company** (or our **Parent Company's** ultimate controlling entity) from providing **cover** or dealing with you under this policy.

Economic sanctions change from time to time and can include prohibiting the transfer of funds to a sanctioned country, freezing the assets of a government, the corporate entities and residents of a sanctioned country, or freezing the assets of specific individuals or corporate entities. This means that if you, or any third party who has suffered a loss which would otherwise be covered under the **cover**, are the subject of an economic sanction, we may not be able to provide **cover** under the policy.

D15 Restricted persons

This **cover** will not cover any injury, loss or expense sustained directly or indirectly by any person covered who is a terrorist organisation, narcotics trafficker, or seller of nuclear, chemical or biological weapons.

Section E

Definitions

An explanation of the terms we use across AIG Relevant Life Insurance (please note these definitions are not case sensitive).

Active

The **cover** has started, is within its term, **premiums** are up-to-date and we have not written to the person covered or the **owner of the cover** to tell them that they are no longer covered.

AIG Group

Any wholly or partly owned, direct or indirect subsidiary of American International Group, Inc.

Application Details

A copy of all the information provided by the person covered and (if applicable) the **owner of the cover** in the application.

We must be told immediately if the information in the Application Details is not correct as this may affect the **cover**.

Assignee

A person to whom this **benefit(s)** is legally transferred.

Benefit

Any payments the **claimant** receives from AIG Life Limited.

Business

Any of the following: sole trader or proprietorships, partnerships including limited liability partnerships, companies, charities or corporations and any representative, employee or director providing information to us or authorised to contract with us on behalf of the business.

Claimant

The person(s) legally entitled to claim the **benefit(s)** under the **cover(s)**. This may be the **owners(s) of the cover**, **trustee(s)** on behalf of the trust and for the benefit of the beneficiaries, **assignee(s)** or personal representatives of the **owners(s) of the cover** estate.

Consultant

A consultant doctor who:

- specialises in an area of medicine appropriate to the cause of the claim;
- is employed at a hospital in an **eligible country**, and
- is treating the person covered for their condition.

All diagnoses made by a consultant must be confirmed by our Consultant Medical Officer.

Cover/covers

Any policy provided by AIG Life Limited.

Cover Summary

This is a document we send to the person covered or to the **owner of the cover** once we have agreed to offer them **cover**. It explains any special conditions which apply to the **cover**, for example if there are any illnesses which are usually part of the **cover** but which we can't **cover** them for, and whether or not they have the automatic right to ask for an increase in the **sum assured** should their circumstances change.

Eligible country

An eligible country is one of the following:

Australia, Austria, Belgium, Canada, Channel Islands, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Gibraltar, Greece, Hong Kong, Hungary, Iceland, Ireland, Isle of Man, Italy, Japan, Luxembourg, Malta, The Netherlands, New Zealand, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland, **UK**, USA.

Inflation

Inflation is the rise in the general level of prices in goods and services over a period of time. As inflation rises, the real value of your money, and the **benefits** provided by your **cover**, may fall because you may be able to afford less with the same amount.

Laws

The law of England and Wales.

Occupation

A trade, profession or type of **work** undertaken for profit or pay. It is not a specific job with any particular employer and is independent of location and availability.

Owner(s) of the cover

A person or a **business** that enters into a contract to **cover** the life of another person who is their employee. Or any other **business** or person that agrees to take ownership of the **cover**.

Parent Company

The legal entity that owns or controls AIG Life Limited as defined by the laws applicable to the jurisdiction within which the legal entity resides.

Partnership

A partnership is the relationship existing between two or more persons who join together to carry on a trade or **business**.

Premium/premiums

The monthly or annual payment to AIG Life Limited for AIG Relevant Life Insurance.

Retail Prices Index (RPI)

The Retail Prices Index (RPI) is the general purpose domestic measure of inflation in the **UK**. It is published by the Office of National Statistics.

Sum assured

The amount we would pay for a successful claim on AIG Relevant Life Insurance.

Term of the cover

How long the **cover** lasts. In other words, the period between the date the **cover** starts and the date it ends as shown in the **Cover Summary**.

Terminal illness - where life expectancy is less than 12 months

A definite diagnosis by the attending **consultant** of an illness which satisfies both of the following:

The illness either has no known cure or has progressed to the point where it cannot be cured; and

In the opinion of the attending **consultant**, the illness is expected to lead to death within 12 months.

A claim will be considered where terminal illness is diagnosed and this definition is met at any time up to the day **cover** ends.

Trustee

A person, often one of a group, who becomes the legal owner of the trust assets (in this case, the policy and its proceeds) and who has powers to deal with the trust assets in accordance with the terms of the trust and the duties imposed by law.

UK

The United Kingdom consisting of England, Wales, Scotland, and Northern Ireland.

Work

Paid employment.



www.aiglife.co.uk

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