

# Admiral Life Insurance

Terms and Conditions





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## Definitions

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Whenever the following words are bold in this booklet they will have the meaning given below:

<b>Anniversary Date</b>	The anniversary of the <b>start date</b> of <b>your policy</b> as shown in the <b>policy schedule</b> .
<b>Application</b>	The <b>application you</b> made for <b>your policy</b> and that <b>we</b> have accepted.
<b>Attending Consultant</b>	The medical specialist supervising the treatment of the <b>life insured</b> .
<b>Decreasing Cover</b>	The <b>sum insured</b> reduces in a similar way to how a repayment mortgage decreases. <b>Your policy schedule</b> will detail the <b>sum insured</b> at each <b>policy anniversary</b> . <b>Your premiums</b> will remain the same during the <b>policy term</b> unless <b>you</b> make any changes. The <b>sum insured</b> for <b>terminal illness</b> will also decrease at the same rate. The <b>interest rate</b> applied to <b>your policy</b> will be shown in <b>your Policy Schedule</b> .
<b>Eligible</b>	<b>You</b> meet the eligibility requirements under 'Your Eligibility and Application' section.
<b>End Date</b>	The date shown in the <b>policy schedule</b> on which the <b>sum insured</b> under this <b>policy</b> ceases to be payable.
<b>Gifted Fund</b>	If <b>you</b> place <b>your policy</b> in trust, <b>you</b> can specify that any <b>terminal illness sum insured</b> should be paid to <b>your</b> beneficiary(ies).
<b>Increasing Premium</b>	If <b>you</b> selected an <b>increasing premium</b> when <b>you</b> took out <b>your policy</b> , <b>your premium</b> will increase by 5% on each anniversary from the <b>policy start date</b> . <b>We</b> will write to <b>you</b> before each anniversary to advise <b>you</b> what <b>your premiums</b> will be for the following year.
<b>Initial Sum Insured</b>	If <b>decreasing cover</b> is chosen, this is the <b>sum insured you</b> selected at the <b>policy start date</b> and will be shown in <b>your policy schedule</b> .

## Definitions (cont.)

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<b>Interest Rate</b>	If <b>decreasing cover</b> is chosen, this is the <b>interest rate</b> at which the <b>sum insured</b> decreases, as shown in <b>your policy schedule</b> .
<b>Joint Life Cover</b>	A <b>policy</b> that covers two <b>policyholders</b> as listed in <b>your policy schedule</b> . We will only pay the one-off cash lump sum once. This will be when the first <b>policyholder</b> dies or has a valid <b>terminal illness</b> claim.
<b>Life Insured</b>	<b>You</b> , the person whose life is insured in the event of <b>your</b> death or diagnosis of an earlier <b>terminal illness</b> claim. This refers to both <b>policyholders</b> if <b>Joint Life Cover</b> .
<b>Level Cover</b>	This is the <b>sum insured you</b> select at the <b>policy start date</b> and will be shown in <b>your policy schedule</b> . This will remain the same during the <b>policy term</b> unless <b>you</b> make any changes to <b>your policy</b> .
<b>Level Premium</b>	For <b>decreasing cover</b> or if <b>you</b> selected a <b>level premium</b> when <b>you</b> took out <b>your level cover policy</b> , the amount of <b>your premium</b> will remain level and will never change as shown in <b>your policy schedule</b> unless <b>you</b> make a change to the level of cover.
<b>Minimum and Maximum Sum Insured</b>	The total sum of policies under <b>your</b> Admiral Life Insurance <b>policy</b> cannot exceed a total maximum <b>sum insured</b> of £500,000 at any point for this type of <b>policy</b> . Please see 'Policy Commencement and Expiry' under the 'Your Policy - What is Covered' section.
<b>Non-smoker</b>	<b>You</b> have not smoked any tobacco products in the last 12 months.
<b>Policy</b>	<b>Your</b> Admiral Life Insurance <b>policy</b> .
<b>Policyholder</b>	<b>You</b> , the <b>life insured</b> and person named in the <b>policy schedule</b> as the <b>policyholder</b> .
<b>Policy Schedule</b>	A schedule showing the details of <b>your policy</b> that are specific to <b>you</b> including the name of the <b>life insured</b> , the <b>sum insured</b> , the <b>policy term</b> and the <b>premium</b> amount.

## Definitions (cont.)

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<b>Policy Term</b>	This is the duration of the <b>policy you</b> selected. The minimum <b>policy term</b> is 5 years; the maximum <b>policy term</b> is 35 years. <b>Your</b> Admiral Life Insurance <b>policy</b> will expire on the earliest of the <b>end date</b> of <b>your policy term</b> or <b>your</b> 76th birthday. For <b>Joint Life Cover</b> this is based on the older of the two <b>policyholders</b> .
<b>Policy Terms and Conditions</b>	This <b>policy terms and conditions</b> document which is a binding contract between Cigna Life Insurance Company of Europe S.A.-N.V. which is provided by Admiral Life Insurance and the <b>policyholder</b> . It must be read in conjunction with the <b>policy schedule</b> .
<b>Premium</b>	This is the amount <b>you</b> must pay on a monthly basis in order for <b>your policy</b> to remain in force throughout the life of the <b>policy</b> .
<b>Premium Due Date</b>	This is the date <b>you</b> selected to pay <b>your premiums</b> each month.
<b>Resident</b>	<b>You</b> have been <b>resident</b> in the United Kingdom (UK) for more than six months and <b>you</b> reside at the address which <b>you</b> have given to <b>us</b> . This excludes the Isle of Man and the Channel Islands. <b>Premiums</b> must continue to be paid from a UK bank account throughout the <b>policy term</b> if <b>your</b> circumstances change.
<b>Retained Fund</b>	If <b>you</b> place <b>your policy</b> in trust, <b>you</b> can specify that any <b>terminal illness sum insured</b> should be paid to <b>you</b> .
<b>Start Date</b>	This is the date <b>your policy</b> commenced as shown in <b>your policy schedule</b> .
<b>Sum Insured</b>	This is the amount payable as shown on <b>your policy schedule</b> in the event of a valid claim.
<b>Term</b>	The number of years as shown on the <b>policy schedule</b> for which the <b>policy</b> will (subject to its terms and conditions) provide cover from the <b>start date</b> until terminated by an event in the 'Your Policy – What is Covered' section.

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**Definitions (cont.)**

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

A definite diagnosis by the **attending consultant** of an illness that 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.

**We/Our/Us** Cigna Life Insurance Company of Europe S.A.-N.V.

**You/Your** The person(s) named as the **policyholder** in the **policy schedule**.

# Policy Terms and Conditions

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These **policy terms and conditions** together with the **policy schedule** provide **you** with important information about **your** Admiral Life Insurance **policy** which forms the legal contract between **you** and **us**. Any promotional incentives offered specifically to **you** when taking out a **policy** are set out in the **policy schedule**.

**You** should read them carefully and store them in a safe place in case **you** need to make a claim or **you** want to make a change to **your policy**.

Any word shown in bold has the meaning in this **policy** set out in the 'Definition' section.

Cigna Life Insurance Company of Europe S.A.-N.V. is the insurer of the Admiral Life Insurance **policy**: it underwrites the **policy** and pays any claims. Cigna Insurance Services (Europe) Limited administers the **policy**, including dealing with any correspondence regarding the policies or claims, and collecting **premiums**.

Any references in this **policy terms and conditions** to '**We**' or '**Us**' or '**Our**' refer to Cigna Life Insurance Company of Europe S.A.-N.V. and any references to 'Cigna Insurance Services' refer to Cigna Insurance Services (Europe) Limited.

If **you** have any questions or queries about **your** Admiral Life Insurance **policy**, please call **us** on **0800 422 0072** or write to Admiral Life Insurance c/o - Cigna Insurance Services (Europe) Limited, PO Box 500, 1 Drake Circus, Plymouth, Devon PL1 1QH. Admiral Life Insurance is provided by Cigna Life Insurance Company of Europe S.A.-N.V. UK Branch Chancery House, St Nicholas Way, Sutton, Surrey SM1 1JB. Registered in Belgium with limited liability (Brussels trade register no. 0421 437 284), Avenue de Cortenbergh 52, 1000 Brussels, Belgium, authorised by the National Bank of Belgium and subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority. Details about the extent of **our** regulation by the Financial Conduct Authority and Prudential Regulation Authority are available on request.

## Cooling Off Period

**We** hope that **you** will be happy with **your policy**. However, if the **policy** does not meet **your** needs **you** have a 30 day cooling-off period to cancel the **policy** from the **start date**, or, if later, the date **you** receive the **policy** documents. Please see 'Cancelling Your Policy' under the 'General Policy Conditions' section.

So long as **you** pay **your premiums**, **we** will pay the **sum insured** if **you** die or are diagnosed with a **terminal illness** during the **term** of the cover in accordance with the **policy schedule** and **policy terms & conditions**.

## Policy Terms and Conditions (cont.)

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The **sum insured** and cover available under this **policy** are explained below. If **you** make a claim which **we** accept, the **sum insured** will be payable.

Please note the **policy** has no cash in value at any time. For the full definitions please refer to the 'Definition' section.

### Your Policy – What is Covered

Cigna Insurance Services on behalf of Admiral Life Insurance do not offer any personal recommendation that this **policy** is suitable for **you** or **your** specific circumstances and requirements. Please speak to **your** financial adviser if **you** want to discuss what suits **your** individual needs.

#### Death Sum Insured

**We** will pay the death **sum insured** if the **life insured** dies during the **term** of the **policy**. If **you** select **decreasing cover**, the **sum insured** reduces in a similar way to how a repayment mortgage decreases. **Your policy schedule** will detail the **sum insured** at each **policy** anniversary. The amount payable at claim stage will be calculated using the date of death of the **life insured**.

#### Terminal Illness Sum Insured - where death is expected within 12 months

**We** will pay the **terminal illness sum insured** if, before the last 12 months of the **policy**, the **life insured** is diagnosed with a **terminal illness**. For the full definition please refer to the 'Definition' section.

**We** will only pay the **sum insured** once on either the death or earlier diagnosis of a **terminal illness**. If **you** select **decreasing cover**, the **sum insured** reduces in a similar way to how a repayment mortgage decreases. **Your policy schedule** will detail the **sum insured** at each **policy** anniversary. The amount of benefit payable under the **terminal illness** cover will be based on the **sum insured** calculated on the date the **life insured** meets the definition of **terminal illness** as defined by the **policy**.

For **Joint Life Cover**, **we'll** only pay the one-off cash lump sum once. This will be when the first **policyholder** dies or has a valid **terminal illness** claim. Once a claim has been paid, the **policy** will cease.

## Policy Terms and Conditions (cont.)

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### Policy Commencement and Expiry

Your **policy** commences on the **start date** and ceases on the earliest of one of the following events:

- The **end date** being reached;
- **You** cancelling the **policy**;
- The **sum insured** having been paid;
- **You** die from an excluded clause;
- **You** do not pay **your premiums** (please see 'Premiums' and 'Paying for Your Policy' under the 'General Policy Conditions' section);
- If **you** have not provided honest and accurate information this may affect the amount **we** pay out in the event of a claim and/or **your policy** being cancelled (please refer to 'Your Eligibility and Application' section);
- If **you** have exceeded the maximum total **sum insured** of £500,000 at any point for this type of **policy**, **we** reserve the right to cancel any additional **policy** that exceeds the maximum **sum insured** permitted for this type of **policy** and will not pay out the excess in the event of a claim.

When this **policy** ends following one of the above events, no further **premiums** or claims will be payable.

### Exclusions to Your Policy

- **We** won't pay the **sum insured** if the cause of death or earlier diagnosis of a **terminal illness** is directly or indirectly caused by suicide or intentional self-inflicted injury within 12 months of the **policy start date**. If this happens, the **policy** will end.
- In the event of an increase to **your sum insured**, **we** won't pay the amount by which the **sum insured** has increased if the cause of death or earlier diagnosis of a **terminal illness** is directly or indirectly caused by suicide or intentional self-inflicted injury within 12 months of the effective date of the increase.

## Policy Terms and Conditions (cont.)

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### Your Eligibility and Application

**You** are **eligible** for this Admiral Life Insurance **policy** provided that on the **start date**:

- **You** are over 18 years of age and under 51 years of age;
- **You** have been **resident** in the United Kingdom (UK) for more than six months and **you** reside at the address which **you** have given to **us**;
- **You** completed the **application** questions honestly and accurately and **we** confirmed **your** cover under the **policy**;
- The **maximum sum insured** under all Admiral Life Insurance policies held by **you** has not exceeded £500,000 at any point permitted for this type of **policy**.

It is important that **you** have taken time to ensure that **your** responses to the **application** questions are complete, accurate and honest.

**We** offer cover based on the information that **you** provided and confirmed to **us** in **your application** questions. If **you** gave **us** incorrect information it may invalidate the **policy** or have serious consequences to the amount **we** will pay if a claim is made under **your policy**.

If **you** deliberately or recklessly provide inaccurate information and this might reasonably have affected **our** decision to provide the **policy**, then **we** are entitled to cancel this **policy** and not pay a claim. In these circumstances **we** will not refund any **premiums you** have already paid, unless it is unfair of **us** to retain them.

If **you** provide inaccurate information through carelessness, then:

- If **we** would not have issued **your policy** on any terms had the accurate information been provided, **we** are entitled to cancel **your policy**, however **we** will refund any **premiums you** have already paid;
- If **we** would have issued **your policy** with higher **premiums** had the accurate information been provided, **we** may reduce the amount of **sum insured** to reflect the higher **premiums** that would have been applied had the accurate information been provided; or
- If **we** would have issued **your policy** but on different terms had the accurate information been provided, **we** are entitled to amend the **policy** retrospectively to reflect the terms that would have been offered at the time had accurate information been provided.

## Policy Terms and Conditions (cont.)

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### Changes to Your Policy

**You** can ask to make changes to **your policy** by calling Admiral Life Insurance, on **0800 422 0072** or write to: Admiral Life Insurance c/o – Cigna Insurance Services (Europe) Limited, PO Box 500, 1 Drake Circus, Plymouth, Devon PL1 1QH.

### Changing Your Sum Insured

**You** may request an increase or decrease to **your sum insured** subject to the minimum and maximum levels of cover available on an Admiral Life Insurance **policy**. Any decision to accept this request will be made at the discretion of Admiral Life Insurance.

- If **you** request an increase to **your sum insured**, **we** will ask **you** some eligibility questions before **we** agree to accept **your** request.
- If **we** accept **your** request for an increase to **your sum insured**, **your** existing **policy** will be amended and **you** will be provided with a new **policy schedule**.
- **You** can request a decrease to **your sum insured** without any eligibility questions.
- The **premium you** pay if **you** increase or decrease **your sum insured** will be based on the **premium** rates applicable at the time **you** took out **your** original **policy**.
- **We** will send **you** an amended **policy schedule** for the new **sum insured**.
- The amended **policy schedule** will be a replacement for any prior **policy schedule** and will confirm **your** new **premium**.

If **you** increase the **sum insured** under **your policy**, **we** won't pay the amount of the increase if the cause of death or **terminal illness** is directly or indirectly caused by suicide or intentional self-inflicted injury within 12 months of the effective date of the increase.

### Changing Your Policy Term

**You** may request an increase or decrease to **your policy term** subject to the minimum and maximum levels available on an Admiral Life Insurance **policy**. Any decision to accept this request will be made at **our** discretion.

- If **you** request an increase to **your policy term**, **we** will ask **you** some eligibility questions before **we** agree to accept **your** request.
- If **we** accept **your** request for an increase to **your policy term**, **your** existing **policy** will be amended and **you** will be provided with a new **policy schedule**.

## Policy Terms and Conditions (cont.)

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- **You** can request a decrease to **your policy term** without any eligibility questions.
- The **premium you** pay for any increase or decrease to **your policy term** will be based on the **premium** rates applicable at the time **you** took out **your** original **policy**.
- **We** will send **you** an amended **policy schedule** for the new **policy term**.
- The amended **policy schedule** will be a replacement for any prior **policy schedule** and will confirm **your** new **premium**.

### Other Changes

**You** need to advise **us** if **you** change **your** name or address by contacting **our** customer service team on **0800 422 0072**.

Depending on any other change **you** are seeking, **we** may need to ask **you** to provide evidence and/or answer some questions about **your** circumstances before **we** agree to make any changes to **your policy**.

**We** may decline to make a change to **your policy**. This may be due to **your** health at that time or if the total **sum insured** or **term** of cover to be provided by **us** would then exceed any minimum or maximum limits that **we** permit for this type of **policy**.

**We** will confirm in writing any **policy** alterations **we** agree to make to **your policy terms and conditions** or **policy schedule**.

### Making a Claim

To make a claim, please contact **our** customer services team by calling **us** on: **0800 422 0072**

**Our** customer services team will guide **you** through the claims process and keep **you** informed of any information which is required to consider a claim.

### Making a Death Sum Insured Claim

To make a claim under the **policy**, **your** estate or representative legally entitled to make the claim on **your** behalf must notify **us** either in writing or by telephoning the Customer Services Helpline on: **0800 422 0072**.

## Policy Terms and Conditions (cont.)

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In order to assess a claim under **your** Admiral Life Insurance **policy**, **we** will require:

- The name and date of birth of the **life insured**;
- The original death certificate;
- A completed claim form;
- The **policy schedule** or lost **policy** indemnity form;
- Proof of the claimant's entitlement to the **sum insured** payable under the **policy** (which may include a copy of the **life insured's** will or trust deed if there is one);
- Grant of representation (probate);
- Small estates indemnity;
- **We** may need to approach third parties such as the **life insured's** doctor, medical specialists, coroner and police or to access the **life insured's** medical records at **our** expense.

If any information or documents **we** may reasonably request or require in order to assess the claim are not provided, the claim will not be processed until the information or documents are made available. By taking out this **policy**, **you** grant **us** the right to access **your** medical records for the purposes of evaluating any claim under the **policy**.

**We** will add interest to the **sum insured** payable in the event of a valid claim if payment is delayed by more than one month. The applicable **interest rate** will be 0.5 percent (0.5%) above the Bank of England base rate at the time of **your** death.

**We** will pay the **sum insured** under the **policy** to:

- the person or representative legally entitled to **your** estate where the **policy** is owned by a single **life insured** or
- the surviving **policyholder** where a **policy** is owned jointly by the lives insured; or
- the trustees on behalf of the beneficiaries if **you** placed this **policy** under a relevant trust before **your** death and **we** have been notified of this.

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## Policy Terms and Conditions (cont.)

### Making a Terminal Illness Claim

To assess a claim for a **terminal illness**, we will require:

- The name and date of birth of the **life insured**;
- A completed claim form;
- The **policy schedule**;
- Proof of the claimant's entitlement to the **sum insured** payable under the **policy**;
- Medical certificates and evidence of **terminal illness** at **your** expense;
- **We** may require information from third parties such as the **life insured's** doctor, **attending consultants** or access to the **life insured's** medical records at **our** expense;
- At **our** expense, **we** may require the **life insured** to undergo a medical examination or for tests on the **life insured** to be carried out by a medical examiner appointed by **us**.

**We** will pay the **terminal illness** benefit under the **policy** to:

- **you** if one of the **policyholders** has been diagnosed as terminally ill as per **policy** definition or
- if **you** placed this **policy** under a relevant trust to:
  - the Donor who is ill if **you** kept the **Terminal Illness** Benefit in the **retained fund** or to
  - the trustees on behalf of the beneficiaries if **you** put the **Terminal Illness Benefit** in the **gifted fund**.

The amount of benefit payable under the **terminal illness** cover will be based on the **sum insured** calculated on the date the **life insured** meets the definition of **terminal illness** as defined by the **policy**.

### Other Claim Requirements

All medical certificates, records and results of tests must be supplied in English and in writing. They must be provided by the **life insured's** doctor or **attending consultant** resident and practicing in the following locations: European Union, Andorra, Channel Islands, The Faroe Islands, Gibraltar, The Isle of Man, Liechtenstein, Norway, Monaco, San Marino, Switzerland, Vatican City, USA, Canada, Australia or New Zealand.

If any claim under this **policy** is unfounded **we** may, without affecting any legal rights **we** have, reclaim the **sum insured** paid and cancel the **policy** without refunding any **premiums**.

## Policy Terms and Conditions (cont.)

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### General Policy Conditions

#### Premiums

The **premium you** pay for **your policy** is determined by the following:

- **Your** age;
- Smoker status when **you** apply;
- **Your sum insured**;
- **Your policy term**;
- Single or **Joint Life Cover**;
- **Your** type of cover (level or decreasing)
- If **level cover**, **your** type of **premium** (**level premium** or **increasing premium**);
- Any promotion applicable to **you** at the time **you** took out **your policy**; and
- If **you** are an Admiral customer, **we** may also use information about **your** Admiral insurance **policy** (for example, **your** no claims period on **your** motor **policy**).

**Premiums** are payable for the duration of **your policy term**. So long as **you** pay **your premiums**, the **policy** will continue.

This **policy** has no cash-in value.

For **level cover**, there are two types of **premium** – **level premium** and **increasing premium**.

- If **you** selected a **level premium**, when **you** took out **your policy**, the amount of **your premium** will never change and is shown in **your policy schedule** (unless **you** make a change to **your policy**).
- If **you** selected an **increasing premium** when **you** took out **your policy**, **your premium** will increase by 5% on each anniversary of the **policy start date**. **We** will write to **you** before each anniversary to advise what **your premium** will be for the following year.

For **decreasing cover**, the **premium** will remain the same during the **term of your policy** unless **you** make any changes to **your policy**.

The **premium** for this **policy** may change if **you** inform **us** of a change in **your** smoker status to a **non-smoker**, in which case **we** will let **you** know the amount of any reduction at that time.

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## Policy Terms and Conditions (cont.)

### Paying for Your Policy

The **premium** for **your policy** must be paid monthly by direct debit.

If **you** miss a **premium** payment, **we** will write to **you** and let **you** know when **we** will make another attempt to collect **your premium**. **You** can bring a missed **premium** up to date by calling **us** on **0800 422 0072** and making a debit card payment for the arrears.

If **you** miss two **premiums** **your policy** will be automatically cancelled and **we** will write to **you** to confirm this has occurred. If **you** wish to reinstate **your policy**, **you** can do so within 30 days of the **policy** being cancelled. **You** will need to call **us** on **0800 422 0072** and bring **your premiums** up to date with a debit card payment.

### Your Policy Term

The **minimum policy term** is 5 years and the **maximum policy term** is 35 years (for **Joint Life Cover** this is based on the older of the two **policyholders**).

**Your policy** will expire the earliest of the end of **your policy term** or **your** 76th birthday (for **Joint Life Cover** this is based on the older of the two **policyholders**). **We** will write to **you** and let **you** know when **your policy** is about to end.

### Cancelling Your Policy

For every Admiral Life Insurance **policy**, **you** have a 30 day cooling-off period in which to consider the cover provided and ensure that the **policy** meets **your** requirements. The cooling-off period runs from the **start date**, or, if later, the date **you** receive the **policy** documents.

If **you** would like to cancel the **policy** during or after the 30 day cooling-off period **you** must inform **us** by either:

- Writing to **us** at: Admiral Life Insurance c/o Cigna Insurance Services (Europe) Limited  
PO Box 500, 1 Drake Circus, Plymouth, Devon PL1 1QH; or
- Telephoning the Customer Services Helpline **0800 422 0072**. For **your** protection, calls may be recorded and may be monitored.

## Policy Terms and Conditions (cont.)

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If **you** cancel during the 30 day cooling-off period, **we** will refund any **premium** paid in full unless a valid claim has been made under the **policy**.

If **you** cancel **your policy** after the 30 day cooling-off period, any **premium** that **you** have paid prior to the date of cancellation of the **policy** will not be refundable.

### Unpaid Premiums

**We** will write to **you** at the address **you** provided **us** to let **you** know if any **premium** payment **you** are required to make under this **policy** has not been received by **us** on the **premium due date**. **We** will send a reminder letter to **you** if the **premium** remains outstanding. This will warn **you** that the **policy** will be cancelled if the outstanding **premium** is not paid within 30 days of the missed **premium due date**.

**We** are entitled to cancel this **policy** if any **premium** owed is not paid within 30 days of the **premium due date**.

**We** will send **you** notice of any cancellation by **us** of the **policy**. If **we** cancel this **policy** for non-payment of **premiums**, the cover will end on the date of cancellation and no further **premium** will be payable by **you**. **We** will not refund any **premium** already paid in such circumstances. **We** may refuse to pay a claim under this **policy** until **your premiums** due are paid up to date.

If **your policy** is cancelled by **you** or **us**, cover will then cease and the **sum insured** under this **policy** will not be payable.

### Alterations to Your Admiral Life Insurance Policy Terms and Conditions

In some circumstances **we** may make changes to these **policy terms and conditions** that are reasonably necessary and proportionate due to changes in any applicable legislation, regulation, taxation or industry codes of best practice or guidance and to correct errors where it is fair and reasonable to do so. In such circumstances, **we** will notify **you** in writing in advance of any changes being made unless **we** are required by law or regulatory requirement to make the change sooner, in which case **we** will notify **you** as soon as possible of the change.

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## Policy Terms and Conditions (cont.)

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If **we** believe the alteration to **your policy** is disadvantageous (other than a change to meet regulatory requirements), **we** will provide 30 days notice before that change is made.

**You** can cancel **your policy** at any time in which case the **sum insured** under this **policy** will not be payable in the event of a claim and the **policy** will cease.

### Law

The laws of England and Wales, Scotland and Northern Ireland allow the parties to choose the law which will apply to this **policy**. **We** have chosen the law of England and Wales to apply. Any dispute will be subject to the exclusive jurisdiction of the courts of England and Wales.

### Tax

Under current legislation, any payment **we** make is free from UK income and capital gains tax. The government may change the tax position at any time. Inheritance tax may be due on any payment made under this **policy**. It may be possible to mitigate this by setting up an appropriate trust. **We** can provide **you** with a trust form by contacting **us** on **0800 422 0072**. For more information and full and accurate advice on any tax matters please contact **your** financial adviser in the first instance.

### Language

The language used in this **policy** is English and any communications relating to it will be in English.

If **you** are visually impaired and would like this document in Braille, large print or audiotape, please contact **our** Customer Services on **0800 422 0072**.

### Compensation

Cigna Life Insurance Company of Europe S.A.-N.V. is covered by the Financial Services Compensation Scheme (FSCS). If **we** are unable to meet **our** obligations, **you** may be entitled to compensation from the FSCS, depending on the circumstances of the claim. Further information is available from the FSCS at [www.fscs.org.uk](http://www.fscs.org.uk) or by contacting them at 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3 7QU or by telephone on **0800 678 1100** or **0207 741 4100**.

## Policy Terms and Conditions (cont.)

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### Complaints

If **you** would like to make a complaint about any aspect of **our** service to **you**, **you** can do so by contacting **our** customer services team by:

Post: Admiral Life Insurance  
c/o Cigna Insurance Services (Europe) Limited  
Customer Relations Department,  
1 Drake Circus,  
Plymouth  
PL1 1QH

Telephone: **0800 422 0072**.  
For **your** protection, calls may be recorded and monitored.

Email: [customerrelations.plymouth@cignainsurance.co.uk](mailto:customerrelations.plymouth@cignainsurance.co.uk)

**We** take complaints very seriously. **We** have processes and procedures for handling complaints and these are documented in **our** complaints handling guide. **You** can access a free copy of this by contacting **us** directly and requesting a copy.

### What To Do If You Are Still Not Satisfied

If **you**, or the person complaining on **your** behalf are still not satisfied then **you** may be able to refer **your** complaint to the Financial Ombudsman Service (FOS). **You** must approach the FOS within six months of **our** final response to **your** complaint unless there are exceptional circumstances.

Cigna Insurance Services will remind **you** of the time limits in **our** final response.

The Financial Ombudsman Service can be contacted at:

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

Telephone: **0800 023 4 567**  
**0300 123 9 123**

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)

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## Policy Terms and Conditions (cont.)

**We** must accept the FOS's final decision, but **you** are not bound by it and may bring legal proceedings.

### Alternatively - Online Sales Only

The European Commission has set up an online platform where consumers in all EU countries can register a complaint. This can only be used for complaints about purchases made online.

The Online Dispute Resolution service (ODR) directs **your** enquiry to **our** Customer Relations Team who will handle it in the usual way. It will also let **you** know that the Financial Ombudsman Service (FOS) is the UK's dispute resolution body for insurance.

Please note that this new EU service facilitates contact only. It doesn't provide any other complaints service.

**You** can find this platform at [www.ec.europa.eu/odr](http://www.ec.europa.eu/odr)

### Contact Us

**Your** rights as a customer to take legal action remain unaffected by the existence or use of **our** complaints procedure.

Should **you** need to contact **us** about **your policy**, **you** can phone, email or write to **our** customer services team using the following details:

- Phone: **0800 422 0072**
- Fax: 0870 164 4101
- Email: [customerrelations.plymouth@cignainsurance.co.uk](mailto:customerrelations.plymouth@cignainsurance.co.uk)
- Post: Admiral Life Insurance c/o - Cigna Insurance Services (Europe) Limited  
PO Box 500, 1 Drake Circus, Plymouth, Devon PL1 1QH

For **your** protection, calls may be recorded and may be monitored.

This **policy** is administered by Cigna Insurance Services (Europe) Limited and is underwritten by Cigna Life Insurance Company of Europe S.A.-N.V.

Admiral Life Insurance is provided by Cigna Insurance Services (Europe) Limited who is

## Policy Terms and Conditions (cont.)

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authorised and regulated by the Financial Conduct Authority and is registered in England & Wales No. 4617110, Financial Services Register number 310671. Registered Office: Chancery House, St Nicholas Way, Sutton, Surrey SM1 1JB.

Cigna Life Insurance Company of Europe S.A.-N.V. UK Branch Chancery House, 1st Floor, St Nicholas Way, Sutton, Surrey SM1 1JB. Registered in Belgium with limited liability (Brussels trade register no. 0421 437 284), Avenue de Cortenbergh 52, 1000 Brussels, Belgium, authorised by the National Bank of Belgium and subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority. Details about the extent of **our** regulation by the Financial Conduct Authority and Prudential Regulation Authority are available on request.

**You** can check this information on the Financial Services register at [www.register.fca.org.uk/](http://www.register.fca.org.uk/)

Policy Terms and Conditions (cont.)

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