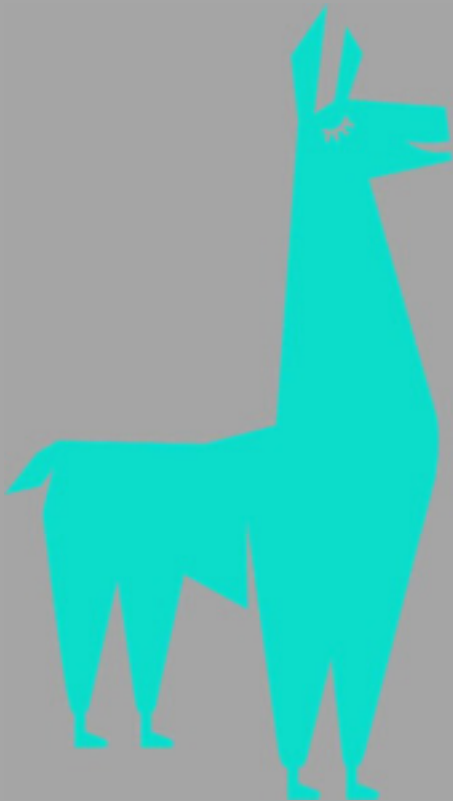


6-7 Hammet Street,  
Taunton,  
Somerset,  
TA1 1RZ



# Llama Life

## Explanation

Llama Life Insurance and Critical Illness cover is provided by our partner Cignpost Life. Please carefully read the Terms and Conditions of their Term Life and Critical Illness cover below.

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Terms & Conditions for  
Cignpost Term Life  
& Cignpost Critical Illness

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## Contents

1.	Glossary .....	3
2.	Introduction .....	4
3.	Who is covered?.....	5
4.	Your Cover Amount.....	5
5.	Premium type .....	6
6.	Cignpost Term Life Cover .....	6
7.	Cignpost Critical Illness .....	8
8.	Additional Critical Illness cover .....	10
9.	Children’s Critical Illness Cover.....	12
10.	Premiums .....	14
11.	Changes to Your cover .....	15
12.	Notifying Us of changes about You or rights to the Plan.....	16
13.	Making a claim.....	16
14.	Entitlement to the Cover Amount .....	18
15.	Cancellation of Your Plan.....	18
16.	Changes We can make .....	19
17.	Law, language and country.....	19
18.	Taxes .....	20
19.	If You have a complaint.....	20
20.	The Financial Services Compensation Scheme (FSCS).....	21
21.	Money Laundering Regulations and Sanctions .....	21
22.	APPENDIX A Critical Illness and Children’s Critical Illness Definitions.....	22
23.	APPENDIX B Additional Critical Illness Payment Definitions .....	31

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## 1. Glossary

- 1.1. **Cover Amount** means the level of cover **You** have chosen for Cignpost Term Life or Cignpost Critical Illness, as shown on **Your Plan Schedule**. The **Cover Amount** can be different between Cignpost Term Life and Cignpost Critical Illness.
- 1.2. **Cover Commencement Date** means the date **We** confirm **Your** cover started from, set out in the **Plan Schedule**
- 1.3. **Insurer** means iptiQ Life S.A., UK Branch
- 1.4. **Life Insured** means the person(s) named on the **Plan Schedule** covered by the **Plan**
- 1.5. **Plan** means **Your** Cignpost Term Life Cover or Cignpost Critical Illness Cover
- 1.6. **Plan Anniversary** means the twelve month anniversary of the initial **Cover Commencement Date** as shown on **Your Plan Schedule**
- 1.7. **Plan Owner(s)** means the person or persons shown in **Your Plan Schedule** who own and are authorised to make changes to the **Plan**
- 1.8. **Plan Schedule** means the document **We** provide to **You** showing the **Life Insured(s)** and **Plan Owner(s)**, which options have been chosen, the **Cover Amount**, **Cover Commencement Date** and the **Premium** payable
- 1.9. **Premium** means the amount **You** have to pay for this **Plan**, as shown in the **Plan Schedule**
- 1.10. **UK** means England, Wales, Scotland and Northern Ireland and does not include the Channel Islands or the Isle of Man
- 1.11. **We, Us** and **Our** means the **Insurer**
- 1.12. **You** and **Your** means the **Plan Owner(s)**

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## 2. Introduction

### **About Your insurance and who is involved**

**Your Plan** is arranged by Albany Park Limited, trading as Cignpost Life. Albany Park Limited is authorised and regulated by the Financial Conduct Authority and entered on the Financial Services register under reference number 304130, Registered Office: Inchora Ltd, Copy Technology Park, Building X92, Farnborough GU14 0LX.

**Your Plan** is issued, underwritten and administered by iptiQ Life S.A. UK Branch ("iptiQ") registered in England and Wales. Registration No: BR017015. Registered Office: 30 St Mary Axe, London EC3A 8EP. iptiQ Life S.A. is a public limited company (société anonyme) incorporated and registered in Luxembourg. Registered office: 2, rue Edward Steichen, L-2540 Luxembourg, Grand-Duchy of Luxembourg. R.C.S. Luxembourg B 184281. Authorised and regulated by Le 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. 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.

**Your Plan** sets out **Your** contract with iptiQ. **Your Plan** is made up of:

- these terms and conditions;
- the **Plan Schedule We** supply to go with them; and
- any letters from Cignpost Life confirming changes to **Your** insurance.

The **Plan Schedule** contains the **Plan** details naming you as the **Plan Owner(s)** and showing the person(s) covered, what options have been chosen, the **Cover Amount**, **Cover Commencement Date**, end date and the **Premiums** payable.

**Please keep these important documents in a safe place and let Your family know where to find them.**

For information on who else may be involved when a claim is made, please refer to the section regarding entitlement to the **Cover Amount**.

### **Accuracy of information You give**

It is important that **You** answer all questions honestly, accurately and fully. If **You**, or someone acting on **Your** behalf, deliberately or recklessly provides inaccurate information, **We** are entitled to cancel this **Plan** and refuse any claim.

If **You**, or someone acting on **Your** behalf, carelessly provides inaccurate information **We** are entitled to amend the **Plan** to reflect the terms that would have been offered if **We** had known the accurate information at the start.

## Need to get in touch?

**It will help if you provide Your Plan number when you contact Us.**

Phone: 0330 123 3747

Monday to Friday, 8am – 6pm (except UK public holidays), Saturday 9am – 1pm

E-mail: [customerservices@cignpostlife.co.uk](mailto:customerservices@cignpostlife.co.uk)

Post: freepost Cignpost Life Customer Service

Online: [cignpostlife.co.uk](http://cignpostlife.co.uk)

Please remember to let Us know if you change Your name, address, bank account details or if you move to a different country.

**We record and monitor calls to help us to improve our service.**

---

## 3. Who is covered?

- 3.1. The **Life Insured** covered is shown in **Your Plan Schedule**.
  - 3.2. **Your Plan** can be set up on Single Life or Joint Life basis
    - 3.2.1. On single life, the **Life Insured** is the owner and pays the **Premium**.
    - 3.2.2. On joint life, both the **Life Insured** are the owners and one must pay the **Premium**.
- 

## 4. Your Cover Amount

The **Cover Amount(s)** payable under **Your Plan** is shown in **Your Plan Schedule**.

Depending on the reason for the claim, the claim payment will be the same as, or a proportion of, the **Cover Amount** (subject to any maximum amount for the cover type).

There are three types of cover available for **Your Plan**:

- 4.1. Level Cover
  - 4.1.1. If the cover type shown in **Your Plan Schedule** is level cover then the **Cover Amount** won't change over the term of the **Plan**.
- 4.2. Increasing Cover
  - 4.2.1. If the cover type shown in your **Plan Schedule** is increasing then on each **Plan Anniversary** the **Cover Amount** will increase by 3% and **Your Premiums** will go up by 3.75%.

- 4.2.2. **Your Plan Schedule** shows whether **You** have chosen the increasing cover option to apply from the **Cover Commencement Date**.
  - 4.2.3. Increasing Cover can be selected or removed at any time, but once removed, it cannot be selected again. Adding Increasing Cover after the **Cover Commencement Date** may be subject to further underwriting.
  - 4.2.4. If **You** decrease the **Cover Amount** at any time during the term of the **Plan**, Increasing Cover is removed.
- 4.3. Decreasing Cover
- 4.3.1. If the cover type shown in **Your Plan Schedule** is decreasing, the **Cover Amount** decreases on each **Plan Anniversary** by the amount of capital that would be outstanding under a repayment mortgage with an interest rate of 8% and an initial loan amount of the **Cover Amount** if all mortgage payments have been made.
- 

## 5. Premium type

- 5.1. **Your Plan Schedule** shows whether the **Premium** type **You** have chosen is level or increasing.
  - 5.2. Level **Premiums** won't change throughout the **Plan**, unless **You** make changes to **Your Cover Amount** or choose to take out the Increasing Cover option. Level **Premiums** apply for Level and Decreasing cover types.
  - 5.3. If **You** have chosen increasing cover, **Your Premiums** will increase by 3.75% on each **Plan Anniversary**.
- 

## 6. Cignpost Term Life Cover

The minimum entry age of the **Life Insured** for Cignpost Term Life is 18 and the maximum entry age is 54.

**You** can choose a term between 5 and 40 years, although the minimum expiry age is 23 and the maximum expiry age is 64.

- 6.1. What is covered
  - 6.1.1. **We** will pay the Cignpost Term Life **Cover Amount** if a **Life Insured** dies or is diagnosed with a terminal illness while covered by the **Plan**.
  - 6.1.2. Terminal illness means the **Life Insured** has a definite diagnosis by a consultant of an illness for which both:

- 6.1.2.1. the illness either has no known cure or has progressed to the point where it can't be cured; and
  - 6.1.2.2. in the opinion of **Your** consultant and our medical officer, the illness is expected to lead to death within 12 months.
- 6.2. What is not covered
  - 6.2.1. **You** are not covered if the **Life Insured** dies by suicide before **Your** first **Plan Anniversary** Date.
  - 6.2.2. The **Life Insured** must tell **Us** the truth when answering the health and lifestyle questions or **We** may not be able to pay a claim.
- 6.3. Cignpost Term Life **Cover Amount**
  - 6.3.1. The Cignpost Term Life **Cover Amount You** can have at the **Cover Commencement Date** can be up to a maximum of £250,000.
  - 6.3.2. Regardless of how many policies **You** take out with **Us** the total Term Life **Cover Amount** for Cignpost Term Life can't exceed £250,000 for any **Life Insured**, excluding increases if the Increasing Cover option has been selected.
- 6.4. Cover start and end date
  - 6.4.1. **Your** Cignpost Term Life cover begins on the **Cover Commencement Date** shown in **Your Plan Schedule**.
  - 6.4.2. **Your** Cignpost Term Life cover ends on the earliest of:
    - 6.4.2.1. the payment of the Cignpost Term Life **Cover Amount**;
    - 6.4.2.2. the cancellation of the cover or the **Plan** by **You** or **Us**; or
    - 6.4.2.3. **Your Plan's** end date.
- 6.5. Changing **Your** cover
  - 6.5.1. **You** can reduce **Your Cover Amount** at any point during the term of the **Plan**, provided that **Your Premium** is always above the minimum amount.
  - 6.5.2. **You** can also increase **Your Cover Amount** up to a maximum of £250,000, subject to underwriting. Any increase in **Your Cover Amount**, other than because of the Increasing Cover option, will be written on new business terms and conditions which are subject to benefit limits and may be different from **Your** existing **Plan**.



- 6.5.3. If **You** change **Your Cover Amount**, the **Premium You** pay will be changed accordingly. **You** will be informed of the revised **Premium** when you accept the new **Cover Amount**.
- 

## 7. Cignpost Critical Illness

Critical Illness cover only applies if **Your Plan Schedule** includes Cignpost Critical Illness in the Plan Details section.

The minimum entry age of the **Life Insured** for Cignpost Critical Illness is 18 and the maximum entry age is 49.

**You** can choose a term between 5 and 40 years, although it can't be for a longer term than the Cignpost Term Life Plan. The minimum expiry age is 23 and the maximum expiry age is 59.

### 7.1. What is covered

7.1.1. **We** will pay the Cignpost Critical Illness **Cover Amount** if a **Life Insured** is diagnosed with one of the Critical Illnesses detailed in APPENDIX A, meet the definition and survive that diagnosis by 28 days. The full definitions of the Critical Illnesses covered and the circumstances in which **You** can claim are in APPENDIX A.

7.1.2. **We** will pay the Cignpost Critical Illness **Cover Amount** if a **Life Insured** is diagnosed with a terminal illness while covered by the **Plan**. Terminal illness means **You** have a definite diagnosis by a consultant of an illness for which both:

7.1.2.1. the illness either has no known cure or has progressed to the point where it can't be cured; and

7.1.2.2. in the opinion of **Your** consultant and our medical officer, the illness is expected to lead to death within 12 months.

### 7.2. What is not covered

7.2.1. **We** will not pay out if the Cignpost Critical Illness claim was caused, in any way because of:

7.2.1.1. **Alcohol or drug abuse**

Inappropriate use of alcohol or drugs, including but not limited to the following:

- consuming too much alcohol;
- taking an overdose of drugs, whether lawfully

prescribed or otherwise; and

- taking Controlled Drugs (as defined by the Misuse of Drugs Act 1971) otherwise than in accordance with a lawful prescription

7.2.1.2. **Self-inflicted injury**  
Intentional self-inflicted injury

7.2.2. The **Life Insured** must tell **Us** the truth when answering the health and lifestyle questions or **We** may not be able to pay a claim.

7.2.3. Some Critical Illness definitions include exclusions specific to those illnesses, see APPENDIX A.

7.2.4. **We** will not pay out if the **Life Insured** dies within 28 days of meeting the definition.

7.2.5. Evidence for authorising a Cignpost Critical Illness claim must come from a qualified doctor / consultant from one of the following countries: any of the countries in the United Kingdom, European Union, Switzerland, Iceland, Norway, USA, Canada, Australia, New Zealand, the Isle of Man or the Channel Islands. **We** will act reasonably if evidence is presented from other countries.

7.3. Cignpost Critical Illness **Cover Amount**

7.3.1. The maximum Cignpost Critical Illness **Cover Amount You** can have at the **Cover Commencement Date** is £100,000.

7.3.2. Regardless of how many policies **You** take out with **Us**, the total **Cover Amount** for Cignpost Critical Illness cannot exceed £100,000 for any **Life Insured**, excluding increases under the Increasing Cover option.

7.4. Cover start and end date

7.4.1. **Your** Cignpost Critical Illness cover begins on the **Cover Commencement Date** shown in **Your Plan Schedule**.

7.4.2. **Your** Cignpost Critical Illness cover ends on the earliest of:

7.4.2.1. the payment of the Cignpost Critical Illness **Cover Amount**;

7.4.2.2. the cancellation of the Cignpost Critical Illness cover or the **Plan** by **You** or **Us**; or

7.4.2.3. **Your** Cignpost Critical Illness cover end date;

#### 7.4.2.4. Death of a **Life Insured**

### 7.5. Changing **Your** cover

- 7.5.1. **You** can reduce **Your** Cignpost Critical Illness **Cover Amount** at a later date, subject to the minimum **Premium** for Cignpost Critical Illness cover.
- 7.5.2. **You** can also increase Your Cignpost Critical Illness **Cover Amount** up to £100,000, subject to the underwriting. Any increase in cover, other than because of the Increasing Cover option, will be written on new business terms and conditions which are subject to benefit limits and may be different from **Your** existing **Plan**.
- 7.5.3. If **You** change **Your Cover Amount**, the **Premium You** pay will be changed accordingly.
- 7.5.4. **You** can cancel **Your** Cignpost Critical Illness cover at any time.

---

## 8. Additional Critical Illness cover

Additional Critical Illness cover applies if **Your Plan Schedule** includes Cignpost Critical Illness cover in **Your Plan**.

### 8.1. What is covered

- 8.1.1. If, during the term of **Your** Cignpost Critical Illness cover, a **Life Insured** is diagnosed with one of the Additional Critical Illnesses listed in Appendix B, meets the definition and survives that diagnosis for 28 days. **We** will pay an additional cash sum according to which illness it is. Such a payment can be made for more than one of these illnesses, but only once per **Life Insured** covered.
- 8.1.2. The full definitions of the illnesses covered and the circumstances in which **You** can claim are in Appendix B.

### 8.2. What is not covered

- 8.2.1. **We** will not pay out if the Additional Critical Illness claim was caused, in any way because of:
  - **Alcohol or drug abuse**  
Inappropriate use of alcohol or drugs, including but not limited to the following:

- consuming too much alcohol.
- taking an overdose of drugs, whether lawfully prescribed or otherwise.
- taking Controlled Drugs (as defined by the Misuse of Drugs Act 1971) otherwise than in accordance with a lawful prescription

- **Self-inflicted injury**

Intentional self-inflicted injury

8.2.2. Some Additional Critical Illness definitions include exclusions specific to those illnesses

8.2.3. **We** will not pay out if the **Life Insured** dies within 28 days of meeting the definition

8.2.4. Evidence for authorising an Additional Critical Illness claim must come from a qualified doctor / consultant from one of the following countries: any of the countries of the United Kingdom, European Union, Switzerland, Iceland, Norway, USA, Canada, Australia, New Zealand, the Isle of Man or the Channel Islands. **We** will act reasonable if evidence is presented from other countries.

8.3. Additional Critical Illness **Cover Amounts**

8.3.1. Payment of the Additional Cignpost Critical Illness **Cover Amount** doesn't reduce the total Cignpost Critical Illness **Cover Amount**.

8.3.1.1. **Low-grade prostate cancer**

The additional cash sum payable will be the lower of 25% of the Critical Illness **Cover Amount** or £25,000.

8.3.1.2. **Carcinoma in Situ of the breast** – with surgery to remove the tumour

The additional cash sum payable will be the lower of the 25% of the Critical Illness **Cover Amount** or £25,000.

8.3.2. If **You** have chosen Increasing Cover, the maximum amount **We** will pay under this benefit will also increase. See section 4 of this document for more information.

- 8.4. Cover start and end date
- 8.4.1. **Your** Additional Critical Illness cover begins on the **Cover Commencement Date** shown in **Your Plan Schedule**.
- 8.4.2. **Your** Additional Critical Illness cover ends on the earliest of:
- 8.4.2.1. the payment of the Critical Illness **Cover Amount**;
  - 8.4.2.2. the cancellation of the Critical Illness cover or the **Plan** by **You** or **Us**; or
  - 8.4.2.3. **Your** Critical Illness cover end date;
  - 8.4.2.4. Death of a **Life Insured**
- 

## 9. Children's Critical Illness Cover

Children's Critical Illness cover applies if **Your Plan Schedule** includes Cignpost Critical Illness in **Your Plan**.

- 9.1. What is covered
- 9.1.1. Children's Critical Illness Cover applies to eligible children, from aged 30 days until their 18<sup>th</sup> birthday or 21<sup>st</sup> birthday if they are in full time education.
  - 9.1.2. All of **Your** natural, legally adopted or step children, or any child **You** are the legal guardian of, are eligible to be covered by this benefit.
  - 9.1.3. If, while covered by Critical Illness cover, a child undergoes an operation or is diagnosed with a condition which meets the definition of one of the Critical Illnesses listed in APPENDIX A, **We** will pay the Children's Critical Illness **Cover Amount**.
  - 9.1.4. **We** will only pay out once for each child regardless of how many policies **You** have. Also, the benefit can only be claimed for a maximum of three children.
- 9.2. What is not covered
- 9.2.1. **We** won't pay a claim under this benefit if:
- the child's condition was present at birth;

- the symptoms first arose before the child was covered under the **Plan**; or
- if the child dies within 14 days of being diagnosed with the Critical Illness or undergoing the specified operation.

9.2.2. Evidence for authorising a claim for the **Plan** must come from a qualified doctor / consultant from one of the following countries: any of the countries of the United Kingdom, European Union, Switzerland, Iceland, Norway, USA, Canada, Australia, New Zealand, the Isle of Man or the Channel Islands. **We** will act reasonably if evidence is presented from other countries.

### 9.3. Children's Critical Illness **Cover Amount**

9.3.1. The Children's Critical Illness **Cover Amount** is the lower of £25,000 or 50% of the Critical Illness **Cover Amount**. Any such claim won't affect the Critical Illness **Cover Amount**.

9.3.2. If **You** have chosen Increasing Cover, the maximum amount **We** will pay under this benefit will also increase. See section 4 of this document for more information.

### 9.4. Cover start and end date

9.4.1. Children's Critical Illness cover begins on the **Cover Commencement Date** if **Your** schedule includes Cignpost Critical Illness in **Your Plan**.

9.4.2. Cover begins for an eligible child once they are 30 days old and ends on the 18<sup>th</sup> birthday or 21<sup>st</sup> birthday if they are in full time education.

9.4.3. **We** will only pay out once per eligible child regardless of how many policies **You** have.

9.4.4. Children's Critical Illness cover ends on the earliest of;

- the payment of the Cignpost Critical Illness **Cover Amount**;
- the cancellation of the Cignpost Critical Illness cover or the **Plan** by **You** or **Us**; or
- the Children's Critical Illness cover has paid out three times; or
- **Your** Cignpost Critical Illness cover end date;
- Death of a **Life Insured**

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## 10. Premiums

### 10.1. Paying **Your Premiums**

- 10.1.1. **Your Premiums** are due from the **Plan** start date and at monthly intervals as shown in **Your Plan Schedule**.
- 10.1.2. **Premiums** must be paid monthly by direct debit from a UK bank account. **You** can choose a date between the 1st and the 28th of the month to pay.
- 10.1.3. The minimum **Premium** when **You** take out **Your** policy is £5 per month for Cignpost Term Life cover and £5 per month for Cignpost Critical Illness cover.
- 10.1.4. The minimum **Premium** for any future increases in **Cover Amount** is £1.

### 10.2. Missed Premiums

- 10.2.1. If **You** don't keep up **Your Premium** payments, **We** are entitled to cancel **Your Plan**.
- 10.2.2. If **You** miss a **Premium** payment, **We** will write to inform **You** of the unpaid **Premium(s)**. **You** can pay any missed **Premium(s)** by calling and making a debit or credit card payment over the phone.
- 10.2.3. If **You** miss three consecutive **Premiums** (e.g. March, April, May), **You** have five days from the third missed **Premium** collection date to call **Us** and make a debit or credit card payment. If **Your** missed **Premiums** aren't consecutive (e.g. March, July, December), **You** have thirty days from the third missed **Premium** collection date to call **Us** and make a debit or credit card payment.
- 10.2.4. If **Premiums** remain unpaid, **We** will cancel **Your Plan** and write to **You** to confirm that **Your** cover has been cancelled.
- 10.2.5. If a claim is payable and there are unpaid **Premiums** on **Your Plan**, the unpaid **Premiums** will be deducted from the **Cover Amount**.
- 10.2.6. Policies that have been cancelled because of unpaid **Premiums** can be restarted within two months of the cancellation date if **You** pay all the missed **Premiums** and no claim has been made. **You** won't be covered again until all the missed **Premiums** are paid.

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## 11. Changes to Your cover

- 11.1. **You** can request any of the following changes to **Your Plan**:
- 11.1.1. Increase **Your Cover Amount** up to a maximum of £250,000. Any increase in **Your Cover Amount**, other than because of the Increasing Cover option, will be written on new business terms and conditions which are subject to benefit limits and may be different from **Your existing Plan**.
  - 11.1.2. Decrease (subject to our then minimum **Premium**) the amount of cover;
  - 11.1.3. Bring forward the end date of the cover;
  - 11.1.4. Delay the end date of cover. Any change will be written on new business terms and conditions which may be different from **Your existing Plan**; or
  - 11.1.5. Remove a person covered.
- 11.2. **We** will usually need evidence of **Your** state of health to make an increase or extension to **Your** cover and may need to apply restrictions to the revised cover.
- 11.3. **You** cannot change **Your** cover type from either Level or Increasing to Decreasing
- 11.4. **You** cannot change the **Plan** term in the last 3 years of **Your Plan**.
- 11.5. **We** will confirm if the change **You** have requested requires **Us** to cancel this **Plan** and a new **Plan** will be issued which may have different terms and conditions, and **Premium** rates. The **Premiums** payable for a new **Plan** would be based on **Your** age and whether or not **You** smoke at the time the change is made, unless **You** are decreasing the scope of the cover. For a lesser cover basis, **We** will reduce **Your** future **Premiums** to the level they would have been if the lesser basis had applied from the beginning.
- 11.6. **We** will write to **You** to confirm the changes **You** have made.
- 11.7. Information verification
- 11.7.1. As part of **Our** routine checks on the accuracy of the information that has been provided to **Us**, **We** may ask for permission to access **Your** medical reports up to six months after **Your Plan** has started. If **You** don't give **Us Your** consent or **We** discover that **You** have not provided truthful and accurate answers to the application questions, then **We** may need to cancel **Your Plan** and refund **Your Premiums**.



---

## 12. Notifying Us of changes about You or rights to the Plan

### 12.1. Your details

12.1.1. To help ensure the cover is available when needed, **You** need to let **Us** know if **You** change:

- **Your** name;
- **Your** bank account;
- **Your** address; or
- other contact details **You** have provided for Cignpost Life

### 12.2. Your country of residence

12.2.1. If **You** move to another country outside of the UK, **Premiums** must be paid from a UK bank account in the name of a **Plan Owner**.

### 12.3. Changing ownership

12.3.1. If **You** assign the legal (and possibly beneficial) ownership of the **Plan** to someone else or to a trustee(s) of a trust for the **Plan**, **You** need to inform **Us** in writing.

### 12.4. Changes to Your health or circumstances

12.4.1. Up until the **Cover Commencement Date** of **Your Plan**, **You** need to tell **Us** about any changes to **Your** health or circumstances that would result in a change to **Your** application form answers. This will also apply if **You** increase, delay the end date or reinstate **Your Plan**. If **We** do not know about such changes then **We** may not be able to pay a claim or may need to void the **Plan**.

---

## 13. Making a claim

13.1. To make a claim, please contact our Customer Service team as soon as possible after the insured event:

13.1.1. phone **Us** on 0330 123 3747 (lines are open 8am-6pm Monday to Friday and 9am-1pm on Saturdays, excluding UK public holidays)

13.1.2. email **Us** at [customerservices@cignpostlife.co.uk](mailto:customerservices@cignpostlife.co.uk)

- 13.1.3. or write to **Us** at: freepost Cignpost Life Customer Service
- 13.2. Our Customer Service team will explain how the claims process works and what is required to make a claim.
- 13.3. In all cases, **We** will need a completed claim form.
- 13.4. Depending on the nature of the claim, **We** may need one or more of the following:
- 13.4.1. The birth, marriage or death certificate of the person covered.
- 13.4.2. Proof of identity and entitlement of the claimant.
- 13.4.3. Any other evidence of a change of name.
- 13.4.4. Medical evidence relating to the person covered, which may include;
- a report from **Your** treating doctor or a medical specialist;
  - access to full medical records; and
  - possibly a medical examination or relevant medical tests.
- 13.5. In rare situations, **We** may need to request additional documents to assess the claim.
- 13.6. **We** will tell **You** when **You** contact **Us** which of these **We** need, and if **We** need anything else.
- 13.7. **We** will pay the reasonable cost of all medical reports or evidence **We** ask for.
- 13.8. All diagnoses must:
- 13.8.1. be made by a consultant or suitably qualified doctor based within the geographical limits shown below who is a specialist in an area of medicine appropriate to the cause of the claim; and
- 13.8.2. be confirmed by our chief medical officer.
- 13.9. **We** won't pay a claim for any of the circumstances that are shown under the exclusions section in **Your Plan Schedule**.
- 13.10. Also, for all claims except death claims, **You** may not be covered if **You** are unable to provide evidence to support **Your** claim from a qualified doctor or consultant from one of the following countries: any of the countries of the United Kingdom, European Union, Switzerland, Iceland, Norway, USA, Canada, Australia, New Zealand, the Isle of Man or the Channel Islands.

- 13.11. **We** will take a reasonable approach to evidence from other countries, but it may not be possible to demonstrate the validity of a claim.
  - 13.12. Once the claim is accepted, **We** will pay the claim amount due into a UK bank account to **You** or the person who is legally entitled to it. This is often the **Plan Owner's** personal representative. A personal representative is a person in charge of the **Plan Owner's** estate. The term 'estate' refers to a person's belongings and debts after their death. **We** may ask to see the original grant of representation (or grant of confirmation in Scotland) before **We** settle the claim. These documents are issued by a court and prove who the personal representatives are. **We** will only pay a claim once.
  - 13.13. If any information or documentation that would reasonably be required to assess the claim isn't provided by the claimant, **We** won't be able to process the claim until the information or documentation is made available.
  - 13.14. If the information provided when taking out this **Plan** wasn't honest or accurate and complete, **We** might have to amend the terms or amount of **Your** cover, or at worst cancel **Your Plan** and not pay any claim.
  - 13.15. Once a claim is approved by **Us**, **We** will pay the **Cover Amount** into the UK bank account of the person legally entitled to receive it. If applicable, **We** will refund any **Premium(s)** collected after the insured event occurred
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## 14. Entitlement to the Cover Amount

- 14.1. If there are two **Plan Owners** and **We** accept a claim for anything other than death, each person will have an equal entitlement to the **Cover Amount**.
  - 14.2. If there are two of **You** named as a **Plan Owner**, on the death of either of **You**, the deceased **Plan Owner** has no rights under the **Plan**.
  - 14.3. The survivor is entitled to any **Cover Amount** paid resulting from the death of the other **Plan Owner** if the **Plan** isn't held under a trust.
  - 14.4. If **You** have assigned **Your Plan** into trust, the **Cover Amount** on **Your** death is paid to the trustees.
  - 14.5. If **You** haven't assigned **Your Plan** into trust with a trustee to claim the **Cover Amount** for trust beneficiaries, the **Cover Amount** on **Your** death is payable into **Your** estate, once **Your** family has obtained probate (or confirmation in Scotland).
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## 15. Cancellation of Your Plan

- 15.1. Cancellation by **You**

- 15.1.1. **You** can cancel **Your Plan** at any time for any reason by contacting **Us** on 0330 123 3747, emailing **Us** at customerservices@cignpostlife.co.uk or writing to **Us** at freepost Cignpost Life Customer Service.
  - 15.1.2. This **Plan** doesn't have a cash value at any time. If **You** choose to cancel **Your Plan** within 30 days of receiving **Your Plan**, **We** will refund any **Premiums** paid.
  - 15.1.3. If **You** cancel it after 30 days from receiving **Your Plan**, **You** won't get any money back.
  - 15.2. Cancellation by **Us**
    - 15.2.1. **We** will cancel **Your Plan** if **You** don't pay the **Premiums**. The section about missed **Premiums** says how **We** would deal with this.
    - 15.2.2. **We** may cancel **Your Plan** as a last resort if **We** find that **You** gave **Us** wrong or incomplete information on purpose, or if **You** wouldn't have obtained the cover at all had all the correct information been given before the cover started.
    - 15.2.3. If **We** cancel **Your Plan**, **We** will confirm the cancellation in writing.
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## 16. Changes We can make

- 16.1. **We** can make reasonable changes to **Your Plan** if
    - 16.1.1. **We** become aware of any error or omission on **Your** part or ours; or
    - 16.1.2. there is a change needed to allow an improvement in services or cover which **We** wish to make or offer at no detriment to **You**.
    - 16.1.3. **We** can also change **Your Plan** if reasonable to deal with new laws, regulations or taxation affecting **You** or **Us**, or a change in circumstances beyond our control, and
    - 16.1.4. it otherwise becomes impracticable or impossible to give effect to the terms and conditions applying to **Your Plan**; or
    - 16.1.5. failing to make the change could in our reasonable opinion, result in our customers as a group not being treated fairly.
  - 16.2. **We** will notify **You** at least 30 days in advance if **We** decide to make a change.
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## 17. Law, language and country

- 17.1. The law of England and Wales applies to **Your Plan**, but if there was to be a

legal dispute and **You** were living in Scotland or Northern Ireland at the time, the courts there would have jurisdiction.

- 17.2. Also, all communications relating to **Your Plan** will be in English.
- 17.3. Where **We** say "UK" in various parts of the **Plan**, UK means England, Wales, Scotland and Northern Ireland and doesn't include the Channel Islands or the Isle of Man.
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## 18. Taxes

- 18.1. The **Cover Amount** paid on death is currently free from income and capital gains tax. The amount paid on death may form part of the deceased's estate, so may be subject to inheritance tax, unless the **Plan** is put in an appropriate trust.
- 18.2. Tax information is based on **Our** interpretation of current law and HM Revenue & Customs practice. If **Your** country of residence changes, so will **Your** tax circumstances. How taxation could affect **You** will depend on **Your** individual circumstances. Both tax law and HM Revenue & Customs practice may change in the future. **We** are not authorised to provide tax advice.
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## 19. If You have a complaint

- 19.1. If **You** would like to make a complaint about any aspect of the service **You** have received, please contact **Our** Customer Service team.
- 19.1.1. phone Us on 0330 123 3747
- 19.1.2. email Us at [customerservices@cignpostlife.co.uk](mailto:customerservices@cignpostlife.co.uk)
- 19.1.3. or write to Us at: freepost Cignpost Life Customer Service
- 19.2. If **We** can't settle **Your** complaint immediately, **We** will send **You** a letter within five working days.
- 19.3. **We** will keep **You** informed about what **We** are doing and will aim to put it right within eight weeks.
- 19.4. If **You** aren't satisfied with the response to **Your** complaint, or after eight

weeks,

**You** can contact the Financial Ombudsman Service:

19.4.1. By phone: **0800 023 4567**

19.4.2. In writing: The Financial Ombudsman Service, Exchange Tower, Harbour Exchange Square, London E14 9SR.

19.4.3. Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

19.4.4. Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

19.5. Making a complaint won't affect **Your** legal rights.

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## 20. The Financial Services Compensation Scheme (FSCS)

20.1. We are covered by the FSCS. If we are unable to pay claims due to, for example, insolvency, the FSCS may help by transferring **Your Plan** to another insurer or by paying compensation. Compensation can cover up to 100% of the value of a claim. **You** can find out more about the FSCS (including amounts and eligibility to claim) by visiting its website [www.fscs.org.uk](http://www.fscs.org.uk) or calling 0800 678 1100.

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## 21. Money Laundering Regulations and Sanctions

21.1. **We** have a requirement to confirm the identity of anyone who wishes to receive benefits from a life insurance contract. **We** may need to ask **You** to send certain documents to help verify **Your** identity. **We** will write to **You** if this is the case.

21.2. The **Insurer** will not provide cover, be liable to pay any claim or provide any benefit, if it may expose the **Insurer** (or the **Insurer's** parent company, direct or indirect holding company) to any penalty or restriction arising from any trade and economic sanctions laws or regulations which are applicable. This includes extraterritorial penalties or restrictions that do not contradict laws applicable to the **Insurer**.

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## 22. APPENDIX A Critical Illness and Children's Critical Illness Definitions

### 22.1. Aorta Graft Surgery – for disease

- 22.1.1. The undergoing of surgery for disease to the aorta with excision and surgical replacement of a portion of the diseased aorta with a graft.
- 22.1.2. The term aorta includes the thoracic and abdominal aorta but not its branches.

22.2. For the above definition, the following are not covered:

- Any other surgical procedure, for example the insertion of stents or endovascular repair.

### 22.3. Aplastic anaemia - resulting in permanent symptoms

- 22.3.1. A definite diagnosis of Aplastic Anaemia by a Consultant Haematologist. There must be permanent bone marrow failure with anaemia, neutropenia and thrombocytopenia.

### 22.4. Bacterial meningitis - resulting in permanent symptoms

- 22.4.1. A definite diagnosis of Bacterial Meningitis resulting in permanent neurological deficit with persisting clinical symptoms.
- 22.4.2. For the above definition, the following are not covered:
  - All other forms of meningitis other than those caused by bacterial infection.

### 22.5. Benign Brain Tumour - resulting in permanent symptoms

- 22.5.1. A non-malignant tumour or cyst in the brain, cranial nerves or meninges within the skull, resulting in either of the following:
  - permanent neurological deficit with persisting clinical symptoms or
  - removal of the tumour by craniotomy or treatment by stereotactic radiosurgery
- 22.5.2. For the above definition, the following are not covered:

- tumours in the pituitary gland;
- angiomas.

## 22.6. **Benign spinal cord tumour**

22.6.1. A non-malignant tumour in the spinal canal or spinal cord, resulting in either of the following:

- Permanent neurological deficit with persisting clinical symptoms or
- Invasive surgery to remove the tumour, or treatment by stereotactic radiosurgery.

22.6.2. For the above definition, the following are not covered:

- tumours in the pituitary gland;
- angiomas.

## 22.7. **Blindness – permanent and irreversible**

22.7.1. Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 6/60 or worse in the better eye using a Snellen eye chart or visual field is reduced to 20 degrees or less of an arc, as certified by an ophthalmologist.

## 22.8. **Cancer – excluding less advanced cases**

22.8.1. Any malignant tumour positively diagnosed with histological confirmation and characterised by the uncontrolled growth of malignant cells and invasion of tissue.

22.8.2. The term malignant tumour includes leukaemia, lymphoma and sarcoma except cutaneous lymphoma (lymphoma confined to the skin).

22.8.3. For the above definition the following are not covered:

- All cancers which are histologically classified as any of the following:
  - pre-malignant
  - non-invasive



- cancer in situ
- having either borderline malignancy; or
- having low malignant potential
- All tumours of the prostate unless histologically classified as having a Gleason score greater than, or equal to, 7 or having progressed to at least clinical TNM classification T2bN0M0
- All thyroid tumours unless histologically classified as having progressed to at least TNM classification T2N0M0
- Malignant melanoma unless it has been histologically classified as having caused invasion beyond the epidermis (outer layer of skin).
- Any other skin cancer (including cutaneous lymphoma) unless it has been histologically classified as having caused invasion in the lymph glands or spread to distant organs

## 22.9. Cardiac arrest – with insertion of a defibrillator

22.9.1. Sudden loss of heart function with interruption of blood circulation around the body resulting in unconsciousness and resulting in either of the following devices being surgically implanted:

- Implantable cardioverter-defibrillator (ICD) or;
- Cardiac resynchronisation therapy with defibrillator (CRT-D)

22.9.2. For the above definition the following are not covered:

- Insertion of a pacemaker
- Insertion of a defibrillator without cardiac arrest

## 22.10. Cardiomyopathy – of specified severity

22.10.1. A definite diagnosis of cardiomyopathy by a Consultant Cardiologist. There must be clinical impairment of heart function resulting in the permanent loss of ability to perform physical activities to at least Class 3 of the New York Heart Association classifications of functional capacity\*.

22.10.2. For the above definition, the following are not covered:

- Cardiomyopathy secondary to alcohol or drug abuse.

- All other forms of heart disease, heart enlargement and myocarditis.

*\* NYHA Class 3. Heart disease resulting in marked limitation of physical activities where less than ordinary activity causes fatigue, palpitation, breathlessness or chest pain.*

#### **22.11. Coma – with associated permanent symptoms**

22.11.1. A state of unconsciousness with no reaction to external stimuli or internal needs which:

- requires the use of life support system
- or
- results in permanent neurological deficit with persisting clinical symptoms.

22.11.2. For the above definition, the following is not covered:

- Coma secondary to alcohol or drug abuse.

#### **22.12. Coronary artery by-pass grafts**

22.12.1. The undergoing of surgery on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts.

#### **22.13. Deafness – permanent and irreversible**

22.13.1. Permanent and irreversible loss of hearing to the extent that the loss is greater than 70 decibels across all frequencies in the better ear using a pure tone audiogram.

#### **22.14. Dementia including Alzheimer's Disease – resulting in permanent symptoms**

22.14.1. A definite diagnosis of Dementia, including Alzheimer's disease, by a Consultant Neurologist, Psychiatrist or Geriatrician. There must be permanent clinical loss of the ability to do all of the following:

- Remember;
- To reason; and
- To perceive, understand, express and give effect to ideas

#### 22.15. **Devic's disease (Neuromyelitis Optica) - with persistingsymptoms**

22.15.1. A definite diagnosis of Devic's disease by a Consultant Neurologist. There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 3 months.

#### 22.16. **Heart attack – of specified severity**

22.16.1. Death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- New characteristic electrocardiographic changes.
- The characteristic rise of cardiac enzymes or Troponins
- The evidence must show a definite acute myocardial infarction.

22.16.2. For the above definition, the following are not covered:

- Other acute coronary syndromes including but not limited to angina.
- Angina without myocardial infarction

#### 22.17. **Heart valve replacement or repair**

22.17.1. The undergoing of surgery on the advice of a Consultant Cardiologist to replace or repair one or more heart valves.

#### 22.18. **HIV infection – caught from a blood transfusion, physical assault or accident at work**

22.18.1. Infection by Human Immunodeficiency Virus resulting from:

- a blood transfusion given as part of medical treatment;
- a physical assault; or
- an incident occurring during the course of performing normal duties of employment;

22.18.2. After the start of the **Plan** and satisfying all of the following:

- The incident must have been reported to appropriate authorities and have been investigated in accordance with the established procedures.

- Where HIV infection is caught through a physical assault or as a result of an incident occurring during the course of performing normal duties of employment, the incident must be supported by a negative HIV antibody test taken within 5 days of the incident.
- There must be a further HIV test within 12 months confirming the presence of HIV or antibodies to the virus.
- The incident causing infection must have occurred in the UK or EU

22.18.3. For the above definition, the following is not covered:

- HIV infection resulting from any other means, including sexual activity or drug abuse.

#### 22.19. **Kidney failure – requiring permanent dialysis**

22.19.1. Chronic and end stage failure of both kidneys to function, as a result of which regular dialysis is permanently required.

#### 22.20. **Liver failure – of advanced stage**

22.20.1. A definite diagnosis, by a consultant physician, of irreversible end stage liver failure due to cirrhosis resulting in all of the following:

- permanent jaundice
- ascites
- encephalopathy

22.20.2. For the above definition, the following are not covered:

- Liver disease secondary to alcohol or drug abuse.

#### 22.21. **Loss of a hand or foot – permanent physical severance**

22.21.1. Permanent physical severance of a hand or foot at or above the wrist or ankle joint.

## 22.22. **Loss of speech – total permanent and irreversible**

22.22.1. Total permanent and irreversible loss of the ability to speak as a result of physical injury or disease.

## 22.23. **Loss of the physical ability to look after yourself**

22.23.1. Losing the physical ability to do at least three of the six tasks listed below with no reasonable prospect of there ever being any improvement. The person must need the help or supervision of another person and be unable to perform the task on their own, even with the use of special equipment routinely available to help.

1. **Washing** – the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means.
2. **Getting dressed and undressed** – the ability to put on, take off, secure and unfasten all garments and, if needed, any braces, artificial limbs or other surgical appliances.
3. **Feeding yourself** – the ability to feed yourself when food has been prepared and made available.
4. **Maintaining personal hygiene** – the ability to maintain a satisfactory level of personal hygiene by using the toilet or otherwise managing bowel and bladder function.
5. **Getting between rooms** – the ability to get from room to room on a level floor.
6. **Getting in and out of bed** – the ability to get out of bed into an upright chair or wheelchair and back again.

## 22.24. **Major organ transplant – from another donor**

22.24.1. The undergoing as a recipient of a transplant from another donor of:

- bone marrow; or a complete heart, kidney, pancreas, lobe of the liver or lung, or inclusion on an official UK waiting list for such a procedure.

22.24.2. For the above definition, the following is not covered:

- Transplant of any other organs, parts of organs, tissues or cells.

**22.25. Motor neurone disease – resulting in permanent symptoms**

22.25.1. A definite diagnosis of motor neurone disease by a Consultant Neurologist. There must be permanent clinical impairment of motor function.

**22.26. Multiple sclerosis – with persisting symptoms**

22.26.1. A definite diagnosis of multiple sclerosis by a consultant neurologist. There must have been clinical impairment of motor or sensory function caused by multiple sclerosis.

**22.27. Open (structural) heart surgery – with surgery to divide the breastbone**

22.27.1. The undergoing of surgery requiring median sternotomy (surgery to divide the breastbone) on the advice of a consultant cardiologist, to correct any structural abnormality of the heart.

22.27.2. The following is not covered:

- Any percutaneous, transluminal or investigative procedure

**22.28. Paralysis of a limb – total and irreversible**

22.28.1. Total and irreversible loss of muscle function to the whole of any limb.

**22.29. Parkinson's Disease – resulting in permanent symptoms**

22.29.1. A definite diagnosis of Idiopathic Parkinson's disease by a Consultant Neurologist or Consultant Geriatrician. There must also be permanent clinical impairment that includes bradykinesia (slowness of movement) and at least one of the following:

- Tremor; or
- muscle rigidity; or
- postural instability

22.29.2. For the above definition, the following are not covered:

- Parkinsonian syndromes including but not limited to those caused by alcohol or drugs.

### **22.30. Respiratory failure – of advanced stage**

22.30.1. Confirmed by a consultant physicians of advanced stage emphysema or other chronic lung disease, resulting in all of the following:

- The need for regular oxygen treatment on a permanent basis.
- Evidence that oxygen therapy has been required for a minimum of 6 months
- The permanent impairment of lung function tests as follows; Forced Vital Capacity (FVC) and Forced Expiratory Volume at 1 second (FEV1) being less than 50% of normal.

### **22.31. Stroke – resulting in permanent symptoms**

22.31.1. Death of brain tissue due to inadequate blood supply or haemorrhage within the skull resulting in either:

- permanent neurological deficit with persisting clinical symptoms; or
- Definite evidence of death of tissue or haemorrhage on a brain scan; and
- Neurological deficit with persistent clinical symptoms lasting at least 24 hours.

22.31.2. The following are not covered:

- Transient ischaemic attack
- Death of tissue of the optic nerve or retina/eye stroke.

### **22.32. Third degree burns – of specified severity**

22.32.1. Burns that involve damage or destruction of the skin to its full depth through to the underlying tissue and covering at least 20% of the body's surface area or 50% of the surface area to the face.

### **22.33. Traumatic brain injury – resulting in permanent symptoms**

22.33.1. Death of brain tissue due to traumatic injury resulting in permanent neurological deficit with persisting clinical symptoms.

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## 23. APPENDIX B Additional Critical Illness Payment Definitions

### 23.1. Carcinoma in Situ of the breast – with surgery to remove the tumour

23.1.1. Breast cancer in situ positively diagnosed with histological confirmation by biopsy together with the undergoing of surgery to remove the tumour.

23.1.2. The amount payable will be the lower of:

- 25% of the current amount of Critical Illness cover amount; and
- £25,000

### 23.2. Low-grade prostate cancer

23.2.1. Tumours of the prostate histologically classified as having a Gleason score between 2 and 6 inclusive provided the tumour has progressed to a clinical TNM classification between T1N0M0 and T2aN0M0; and the tumour has been treated by one of the following:

- Complete removal of the prostate
- External beam or interstitial implant radiotherapy
- Cryotherapy
- Hormone therapy
- High intensity focused ultrasound

23.2.2. For the above definition the following are not covered:

- Prostate cancers where the treatment is not one of the specified treatments above, or requires observation only.

23.2.3. The **Cover Amount** payable will be the lower of:

- 25% of the current amount of Critical Illness cover amount; and
- £25,000



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Phone: **0330 123 3747**

E-mail: [customerservices@cignpostlife.co.uk](mailto:customerservices@cignpostlife.co.uk)

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