keyfacts®

Key Features of Mortgage Life Insurance

AVIVA

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The Financial Conduct Authority is a financial services regulator. It requires us, Aviva, to give you this important information to help you to decide whether our Mortgage Life Insurance is right for you. You should read this document carefully so that you understand what you are buying, and then keep it safe for future reference.

This Key Features document has been written on the basis that the Policyholder and the Life Insured are the same person. However, it is possible for the Policyholder to take out cover on another person.

Its aims

- **Your plan will provide you with life cover that decreases over the term of the plan. It is intended to provide a cash lump sum that can be used to help pay the rest of your repayment mortgage if you die.**

  For an additional premium, you can also choose to include:

  – **Integrated Critical Illness** cover (also referred to as life and critical illness cover) and/or

  – **Independent Critical Illness** cover (also referred to as critical illness cover).

  You can find more information about this in the question and answers section later in this document.

  – **Life cover** – pays out a lump sum if you die.

  – **Life and critical illness cover** – pays out a lump sum if you either die or are diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others.
- Alternatively, the plan will pay out if you are diagnosed as suffering from a terminal illness within the plan term with a life expectancy of less than 12 months.
- The plan will provide cover for the period of time that you choose, subject to your age, any options included and any terms of the plan. At the end of the term, the plan will end and you will get nothing back.
- The plan ends if we pay out the cash sum on death or terminal illness or if we pay under the integrated critical illness cover. It continues if we pay out under independent critical illness, additional critical illness benefit or children's benefit.
- For an additional premium, you can also choose either of the following, which can help protect you in case you can't work because of illness or injury and suffer a loss of earnings:

  – **Mortgage Payment Protection** – this helps to pay your mortgage repayments and related costs

  or

  – **Premium Protection** – this helps to cover the cost of your premiums for this plan.
- The plan continues if we pay out under mortgage payment protection or premium protection.
- You can find more details in the 'What other benefits can I choose?' section.

Your commitment

- To answer all the questions on your application fully, truthfully and accurately to the best of your knowledge. If you don't, we may not be able to pay any claim you make in the future.
- To tell us if any of the medical or other information you give us changes in the time between when you sign the application and the start of your plan. If you don't, the cover you receive may no longer be suitable for your needs. It may also mean that we may not be able to pay any claim you make in the future.
- If you choose mortgage payment protection, to tell us if you retire, change jobs or duties or become unemployed. If you don't, we may not be able to pay any claim you make in the future. You don't need to tell us if you have premium protection.

- To pay regular monthly or yearly premiums over the plan term. If you choose reviewable critical illness premiums, your premium may change every five years. You can find more information about this in the 'More about critical illness cover' section later in this document. If you stop paying your premiums, your cover will end 30 days from the date your last premium was due.
- To regularly review your plan to make sure it is still adequate for your needs. As your needs change, the level of cover you require may also change. If you don't regularly review your plan, you may have too little cover for your needs or be paying too much for the cover that you already have. You can find further details in the section entitled 'How flexible is it?' later in this document.

Risks

- If you don't pay your premiums, your plan and your cover will end 30 days after the last premium was due.
- This plan has no cash-in value at any time.
- If you choose critical illness cover, we'll only pay out if you're diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. All of the conditions that we cover are described in plan conditions and our 'Guide to critical illness cover' booklet.
- If you've chosen reviewable critical illness cover, we'll review your premiums every five years:
  - We may increase your premiums. We'll tell you if we're going to do this.
  - There is no maximum amount by which your premiums can be increased. Plans with longer terms have a greater risk of premium increases. This is because they have more reviews and are more likely to be affected by the factors that we take into consideration when reviewing the premium.
  - If you decide to cancel the plan due to increased premiums, you won't get any money back.

  You can find more details under the heading 'More about critical illness cover'.
- If you've chosen mortgage payment protection cover, we'll review your premium at each review date (the fifth anniversary date and every anniversary date after that).

  You can find more details under the heading 'Mortgage payment protection'.
- It's vital that you answer all the questions on your application fully, truthfully and accurately and that you tell us about your medical history in full. If you don't, the cover you receive may no longer be suitable for your needs. It may also mean that we may not be able to pay any claim you make in the future.
- If you don't provide any information we ask for when making a claim, we won't pay out under the plan.
- We apply some exclusions to the plan. For more information about these exclusions, please see the section 'When will the plan not pay out?'.
- The mortgage repayment guarantee does not apply in all circumstances. You can find details of when the guarantee does apply in the 'What is Mortgage Life Insurance?' section.
- If the amount of critical illness cover you have with us and/or any other provider is more than £2 million, we may refuse to offer you cover or reduce the cover we are prepared to offer you.

Questions and answers

What is Mortgage Life Insurance?

- It's an insurance plan designed to help cover your repayment mortgage, or just part of it.
- It provides life cover and, for an additional premium, you can also include critical illness cover.
  - **Life cover** – pays out a lump sum if you die.
  - **Life and Critical Illness cover** – pays out a lump sum if you either die or are diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others.
- Alternatively, the plan will pay out if you are diagnosed as suffering from a terminal illness within the plan term with a life expectancy of less than 12 months.
- It provides cover for the period of time that you choose, subject to your age, any options included and any terms of the plan. At the end of the term the plan will end and you will get nothing back.
- The plan provides two types of critical illness cover.
  - **Integrated critical illness cover**

    As your critical illness cover is linked to your life cover, it reduces in line with your life cover.
  - **Independent critical illness cover**

    Your critical illness cover remains at the same level as long as you hold your policy. It is not linked to your life cover.

- If you choose Critical Illness cover then children of the life insured will also be automatically covered under children's benefit. We'll pay out 50% of the critical illness amount up to a maximum of £25,000 if your child is diagnosed with a critical illness or additional critical illness we cover (excluding Total Permanent Disability). If your child dies we'll pay £5,000. Cover will start from when the child is 30 days old and end on their 18th birthday or 21st birthday if in full time education as long as the plan is in force.
- If you choose Critical Illness cover then the life assured will also be automatically covered under the Additional Critical Illness Benefit.
- The lump sum is guaranteed to pay off the outstanding loan amount covered by the plan when you make a successful claim or, if all of the following apply:
  - the yearly loan interest rate at the time the plan is taken out is under 10%
  - the difference between the cover amount and the outstanding loan is due solely to a higher rate of interest being charged on the loan rather than the interest rate used in the calculation of the table of benefits in the plan schedule
  - the amount of cover at the start of the plan is at least the size of the loan (or the part of the loan the plan covers)
  - this plan does not end before your loan.

This is called the repayment guarantee.

- If you choose the Mortgage Payment Protection option, it helps pay your mortgage repayments and related costs if you can't work due to illness or injury and you suffer loss of earnings. It covers up to half of your monthly earnings before deductions. The amount of benefit we pay you may be affected by any other income you receive while you are incapacitated. You can find further details in the plan conditions.
- You can choose the Premium Protection option which is designed to cover the cost of the plan's premiums if you are incapacitated due to illness or accident. This option is not available if you have chosen the Mortgage Payment Protection option.
- You can take out the plan on your own or with someone else. The cash sum is payable on the first claim only, unless you have taken out independent critical illness cover, mortgage payment protection or premium protection as your plan may then continue.
- You can set up the plan with someone else as the person covered by it. For further details please refer to the Plan Conditions.
- You can take this plan out from age 16, but it can't go beyond age 75. The minimum term is three years or six years if you choose reviewable critical illness cover.
- If you choose mortgage payment protection, the plan can't go beyond your 65th birthday and the minimum term is five years.
- The maximum term for critical illness cover is 40 years. You can't hold your plan past age 75.

Why does life cover reduce over the term of the plan?

- The life cover is intended to help pay the outstanding balance of your repayment mortgage. As time goes by and you make your repayments, the amount that you owe will reduce, so the life cover reduces each month broadly in line with the capital outstanding on a repayment loan with an interest rate of 6%.

How flexible is it?

- You can make any of the following changes **once the plan is a year old:**
  - You can increase or reduce the cash sum we'll pay if you make a claim.
  - You can remove any of the plan options.
  - You can attach any additional options with the exception of premium protection, which can only be included at the start.
  - You can change when you pay your premiums, either monthly or yearly.
  - You can increase or reduce the term. If you increase the term it will create a new plan to cover that term.

  You can only increase your cover and attach additional options (such as increasing the amount of Independent Critical Illness cover) if you are in good health. You will receive the premium rates and terms and conditions available at that time.

- **Separation option**

  This feature is automatically included on plans set up on a joint life basis and accepted on standard terms. It allows you to split a joint life plan into two single life plans. This option may be exercised if you separate and the existing mortgage is rearranged in your name, or your partners, or if either of you takes out a new mortgage on a new house.
  - New plans must begin within three months of the mortgage being arranged or taken out. We will need evidence that the mortgage has been rearranged.
  - Mortgage payment protection benefit can't be carried forward into new plans.
  - The maximum sum assured available will be that under the existing plan at the time the option is used.

- **Moving house and home improvement option**

  If you increase your mortgage to move house or to make home improvements, you can take out a new plan without providing more evidence of your health as long as you do it within three months of increasing your mortgage. There are some limits and the new plan must not have any options that were not in the original plan.

  You can find more information about this option in the Plan Conditions booklet.

When does the plan pay out the cash sum?

- With the exception of the cover provided by independent critical illness, the cash sum reduces broadly in line with your mortgage. We'll pay out what the plan is worth if you:
  - die during the plan term
  - are diagnosed as suffering from a terminal illness within the plan term and you aren't likely to live more than 12 months
  - either die or are diagnosed with a critical illness during your term plan that meets our plan definition and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others.
  - claim and meet our definition for Arteriovenous Malformation (AVM) of the Brain, Bladder Removal, Carcinoma in situ of the Breast, Carcinoma in situ of the Cervix, Carcinoma in situ of the Testicle, Cerebral Aneurysm, Crohn's Disease treated with intestinal resection, Low Grade Prostate Cancer, Non-Malignant Pituitary Tumour, Removal of an Eyeball or Significant Visual Impairment. These 11 conditions are in addition to the main plan (if Critical Illness cover is selected at the start of the plan). The amount payable will be £20,000 or 20% of the critical illness amount, whichever is lower.
- claim for an eligible child under the children's benefit. We'll pay out 50% of the critical illness amount up to a maximum of £25,000 if your child is diagnosed with a critical illness or additional critical illness we cover (excluding Total Permanent Disability). If your child dies we'll pay £5,000. Cover will start from when the child is 30 days old and end on their 18th birthday or 21st birthday if they are in full time education as long as the plan is in force.
- If we pay out for life cover, terminal illness benefit or for integrated critical illness then the plan will end. However if we pay out for independent critical illness, additional critical illness benefit, children's benefit, mortgage payment protection or premium protection, then the plan will continue.

More about critical illness cover

For an extra cost, you can choose one or both types of critical illness cover.

£2,000,000 is the maximum total sum assured available for Critical Illness with Aviva including existing cover already in force with Aviva.

£3,000,000 is the maximum total sum assured available in the market for Critical Illness including existing cover already in force with Aviva or any other provider.

You must be aged between 16 and 59 at the start of the plan if you choose critical illness cover.

If you choose to include both types of cover, we'll pay out for both.

Integrated critical illness cover

Integrated critical illness cover is linked to your life cover amount and provides you with life and critical illness cover.

Integrated critical illness cover is designed to help pay off the outstanding amount of the mortgage covered by the plan. If we pay a claim for integrated critical illness cover, the plan will end. This means that we won't make any further payment if you die.

If you choose integrated critical illness cover, the maximum amount of life cover you can have is £2,000,000.

Independent critical illness cover

With independent critical illness cover you can choose the amount we'll pay out up to the limit of £2,000,000, as detailed above. This benefit is independent of your life cover. This means the amount of cover stays the same throughout the plan term and can be more or less than the amount of the mortgage covered by the plan. This could allow you to pay off your mortgage and have some money left over for adapting your home, for example, if you become disabled.

The plan won't end if we pay a claim for independent critical illness cover. This means that we would make a further payment if you die within the plan term. There is no maximum amount of life cover you can have if you choose independent critical illness cover.

You can find full details of the illnesses covered by the plan in the 'Guide to critical illness cover' booklet. Please ask your financial adviser for a copy.

What are the critical illness premium options?

Critical illness premiums can be on a guaranteed or reviewable basis. Your financial adviser will be able to help you decide the best option for your circumstances.

If you choose the guaranteed basis, your premiums will stay the same throughout the term of your plan.

You may want to choose the reviewable premium basis. This means that your premium is very likely to change over the term of your plan.

How will you review my critical illness premium?

If you choose a critical illness plan on a reviewable basis, it means that:

- we will review the part of the premium relating to this benefit before the fifth anniversary of the inclusion of critical illness in the plan
- we will not change your premium between reviews
- We will review the premiums in a fair and reasonable way and, as a result of the review, your premium may increase, decrease or remain unchanged
- there is no limit to the change in premium we could apply to your plan at review
- we will tell you of the outcome of the review at least 60 days before we make any change to your premium.

We will review your premium based on a range of factors including:

- the possible impact of further medical advances
- claims experience and the experience of the rest of the industry
- expectation of future claims
- investment returns
- changes in taxation, legislation and regulation
- the early cancellation of our plans which include critical illness cover.

What are my options following a review?

If your premiums need to change following a review, we will tell you of the proposed change at least 60 days before the five year anniversary date unless the reason for the change is beyond our control and means only a shorter notice period is possible.

If your premium needs to increase, there are some options available to you. You can:

- accept the higher premium and maintain your level of cover
- continue to pay the existing premium, but reduce the amount of life and critical illness cover on the plan
- reduce the amount of independent critical illness cover if included in your plan (your level of life cover will remain unaffected)
- remove the critical illness cover – you will not get back any premiums you have already paid
- cancel the plan and stop paying premiums – you will not get back any premiums you have already paid.

If you don't want to accept the higher premiums, you must tell us your chosen option at least 14 days before the five year anniversary date. Otherwise, we will assume you want to pay the higher premium.

What critical illness conditions are covered?

The complete list of the conditions we cover is set out below. These headings are only a guide to what is covered. The full definitions of the illnesses covered and the circumstances in which you can claim are given in the plan conditions. These typically use medical terms to describe the illnesses, but in some cases the cover may be limited. For example:

- some types of cancer are not covered
- to make a claim for some illnesses, you need to have permanent symptoms.

Please ask your financial adviser for a copy of the plan conditions. The definitions are also available in our 'Guide to critical illness cover' booklet.

- **Alzheimer's Disease or Pre-Senile Dementia (before age 65) –** *resulting in permanent symptoms*
- **Aorta Graft Surgery –** *for disease or trauma*
- **Aplastic Anaemia**
- **Arteriovenous Malformation (AVM) of the Brain** – *with specified treatment*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Bacterial Meningitis**
- **Benign Brain Tumour –** *resulting in permanent symptoms or requiring invasive surgery.*
- **Benign Spinal Cord Tumour**
- **Bladder Removal**
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Blindness –** *permanent and irreversible*
- **Cancer –** *excluding less advanced cases.*
- **Carcinoma in Situ of the Breast –** *requiring surgery to remove the tumour*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Carcinoma in situ of the Cervix** – *requiring treatment with hysterectomy*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.

- **Carcinoma in situ of the Testicle** – *requiring surgical removal of one or both testicles*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Cardiac Arrest –** *with insertion of a cardiac defibrillator*
- **Cardiomyopathy –** *of specified severity*
- **Cerebral Aneurysm** – *with specified treatment*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Coma –** *with associated permanent symptoms*
- **Coronary Artery By-Pass Grafts**
- **Creutzfeldt-Jakob Disease**
- **Crohn's Disease –** *treated with intestinal resection*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Deafness –** *permanent and irreversible*
- **Devic's Disease –** *with persisting clinical symptoms*
- **Encephalitis**
- **Heart Attack**
- **Heart Valve Replacement or Repair**
- **HIV Infection –** *caught in the European Union, North America, Australia or New Zealand from a blood transfusion, a physical assault or at work*
- **Intensive Care –** *requiring mechanical ventilation for 30 consecutive days*
- **Kidney Failure –** *requiring permanent dialysis*
- **Liver Failure**
- **Loss of Hand or Foot –** *permanent physical severance*
- **Loss of Independent Existence**
- **Loss of Speech –** *total, permanent and irreversible*
- **Low Grade Prostate Cancer –** *with specified treatment*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Major Organ Transplant –** *from another donor*
- **Motor Neurone Disease –** *resulting in permanent symptoms*
- **Multiple Sclerosis –** *with current symptoms*
- **Multiple System Atrophy**
- **Non-Malignant Pituitary Tumour –** *with specified treatment*
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Paralysis of a Limb –** *total and irreversible*
- **Parkinson's Disease before age 65 –** *resulting in permanent symptoms*
- **Pneumonectomy –** *removal of a complete lung*
- **Primary Pulmonary Hypertension –** *of specified severity*
- **Progressive Supranuclear Palsy**
- **Pulmonary Artery Surgery**
- **Removal of an Eyeball**
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Rheumatoid Arthritis –** *of specified severity*
- **Severe Lung Disease –** *of specified severity*
- **Significant Visual Impairment**
  Included as a separate benefit to the main plan providing a maximum of £20,000 or 20% of the critical illness cover, whichever is lower. See 'Additional Critical Illness Benefit' section below for further details.
- **Spinal Stroke –** *resulting in permanent symptoms*
- **Stroke**
- **Structural Heart Surgery**
- **Systemic Lupus Erythematosus –** *of specified severity*
- **Third Degree Burns –** *covering at least 20% of the body's surface area or covering at least 20% of the surface area of the face or head.*
- **Total Permanent Disability before age 65**
- **Traumatic Brain Injury –** *resulting in permanent symptoms*

Total Permanent Disability pays out if you become totally and permanently disabled before age 65 because of sickness or accident. The definition of disability we use will depend on your occupation and will not change unless you are not in paid employment immediately before the claim. You can find full descriptions of our definitions in the plan conditions and our 'Guide to critical illness' booklet. Please ask your financial adviser for a copy.

What else is included?

- **Additional critical illness benefit**

Arteriovenous Malformation (AVM) of the Brain, Bladder Removal, Carcinoma in situ of the Breast, Carcinoma in situ of the Cervix, Carcinoma in situ of the Testicle, Cerebral Aneurysm, Crohn's Disease treated with intestinal resection, Low Grade Prostate Cancer, Non-Malignant Pituitary Tumour, Removal of an Eyeball and Significant Visual Impairment are included as extra cover to the main plan. We will pay the maximum of £20,000 or 20% of the critical illness cover, whichever is lower. Only one claim can be made for each of these benefits per life assured. Claims paid will not affect the amount that can later be claimed under Critical Illness Cover. This means that your insured amount remains in place in case you suffer from a critical illness defined in the plan in the future.

- **Children's benefit**

When you purchase Critical Illness cover from Aviva, any natural, step or legally adopted children and any future children of the life insured are also covered under children's benefit. We'll pay out 50% of the critical illness amount up to a maximum of £25,000 if your child is diagnosed with a critical illness or additional critical illness we cover (excluding Total Permanent Disability). If your child dies we'll pay £5,000. Cover will start from when the child is 30 days old and end on their 18th birthday or 21st birthday if they are in full time education as long as the plan is in force.

By full time education we mean attendance at a full time course at a school, college or university. This includes placements that are part of a full time course, but excludes breaks from education, for example a gap year.

The benefit is payable once for each child and the plan will continue after the payment has been made so your own cover or the cover of any other children is not affected.

What other benefits can I choose?

- For an extra cost, you can choose either premium protection or mortgage payment protection. To include these benefits, you must be aged between 16 and 54 at the start of the plan. Your financial adviser can give you full details.
- **Premium protection**

  This benefit helps cover the cost of your premiums if you're totally disabled by illness or injury. It's not available if you choose to take mortgage payment protection.

  – You will be covered if you are unable to follow your normal occupation as a result of illness or accident and not following any other occupation. Normal occupation means the occupation of the life insured immediately before the sickness or accident that resulted in the claim.

  – We will not start to pay the benefit until the deferred period you chose at the start of the plan has expired. This can be a period of one, three or six months. If you make a claim, the deferred period is the time that would elapse before we start making a payment to you.

  – If you've chosen critical illness on a reviewable premium basis, the cost of premium protection will change in line with each review. Please see the 'Critical Illness premiums' section for more information.

  If you are not in paid employment immediately before the sickness or accident that resulted in your claim, you will be covered under personal capability assessment instead. You can find more details about the personal capabilities and serious conditions in the plan conditions. Please ask your financial adviser for a copy.

- **Mortgage payment protection**

  Mortgage payment protection is a level benefit that is designed to cover the cost of your mortgage repayments and related costs if you are unable to work because of illness or injury and you suffer loss of earnings. To claim for this benefit, you must be totally incapacitated by illness or injury. Please ask your financial adviser for full definitions. These definitions relate to your occupation. Mortgage payment protection is not available if you choose to take premium protection.

  At the start of the plan, you choose a deferred period (the period before we will pay out on a claim) of one, three, six, 13 or 26 months. The benefit should not exceed:

  – 150% of the mortgage payment in total for both lives taking mortgage payment protection (both lives can not have 150% of their mortgage amount as mortgage payment protection individually)

  – 50% of the gross monthly earnings of each person covered by the mortgage payment protection at the time the application is made.

  Your financial adviser can give you more details.

We will reduce your benefit if any of the following take you over the maximum allowable:

- continuing payments from your employment – such as sick pay, benefits in kind or dividends
- continuing payments from your business
- pension payments, unless you would have received them if you were still working
- any income that arises because of your incapacity
- other insurance benefits such as loan or credit card protection, or other income protection benefits.

- Mortgage payment protection or premium protection pays out if you are unable to work due to illness or injury. The assessment of your claim will depend on your occupation and will not change unless you are not in gainful employment immediately before the claim, in which case you will be covered under the personal capability assessment. You can find more details about the personal capabilities and serious conditions in the plan conditions. Please ask your financial adviser for a copy.

Changes to mortgage payment protection premiums

Mortgage payment protection has reviewable premiums.

This means that:

- we will review the part of the premium relating to this benefit before the fifth anniversary of the inclusion of mortgage payment protection in the plan and then before every plan anniversary
- we will not change your premium between reviews
- we will review premiums in a fair and reasonable way and, as a result of the review, your premium may increase, decrease or remain unchanged
- there is no limit to the change in premium that we could apply to your plan at review
- we will tell you of the outcome of the review at least 60 days before we make any change to your premium.

We will review your premium based on a range of factors:

- the possible impact of further medical advances
- claims experience and the experience of the rest of the industry
- expectation of future claims
- Investment returns
- changes in taxation, legislation and regulation
- the early cancellation of our plans which include mortgage payment protection cover.

We also have to consider any impact on our future claims which we could not reasonably have foreseen when our assumptions were last reviewed.

The review will apply to all planholders with similar policies and does not take account of the insured person's individual circumstances. This means we will not increase or decrease premiums because of a change in the health, age or lifestyle of the person covered nor as a result of the person's claims experience.

What are my options following a premium review?

If your premium needs to change following a review, we will tell you of the proposed change at least 60 days before the five year anniversary date or plan anniversary date, as applicable, unless the reason for the change is beyond our control and means only a shorter notice period is possible.

If your premium needs to increase, there are some options available to you. You can:

- accept the new premium and maintain your level of cover
- choose to continue paying the previous amount and reduce your benefit
- cancel your Mortgage Life Insurance plan and stop paying premiums – you will not get back any premiums you have already paid
- remove the mortgage payment protection cover – you will not get back any premiums you have already paid.

If you don't want to accept the higher premiums, you must tell us your chosen option at least 14 days before the five year anniversary date or plan anniversary date, as applicable. Otherwise we will assume you want to pay the higher premium.

When will the plan not pay out?

We won't pay any benefit:

- if you fail to provide medical evidence to support your claim
- if the date of birth of any person covered by the plan has been incorrectly stated and we would not have offered cover had we known the correct date of birth at the time of application.

We might not pay any benefit:

- if you did not tell us about an illness or condition at the application stage, which would have had an effect on the underwriting decision we made at the start of your plan.

We won't pay out the life insurance amount:

- if we have already accepted a claim for terminal illness benefit or integrated critical illness cover under the plan.
- if you die as a result of intentional self-inflicted injury or committing suicide within the first 12 months of taking out your plan

We won't pay the terminal illness benefit:

- if diagnosis of terminal illness occurs after the plan has ended or if you are expected to live longer than 12 months.

We won't pay a critical illness claim:

- if the diagnosis isn't for one of our described illnesses
- for total permanent disability unless we receive notice of disability within 13 weeks of the start of the condition
- if the cause of the claim is specifically excluded by any specific terms we apply to the plan when we accept the application (if applicable, we will show these in the acceptance letter and plan schedule)
- unless you are still alive 14 days after being diagnosed as suffering from a critical illness covered by the plan.

We won't pay out if a claim results from criminal acts or self-inflicted injury where the claim is for:

- Blindness
- Coma
- Deafness
- Loss of Hand or Foot
- Loss of Independent Existence
- Loss of Speech
- Paralysis of a Limb
- Third Degree Burns
- Total Permanent Disability before age 65
- Traumatic Brain Injury.

You can find full details of the exclusions in the plan conditions.

We won't pay out under the Additional Critical Illness Benefit:

- if the diagnosis isn't for one of our described illnesses or conditions
- unless you are still alive 14 days after being diagnosed as suffering from one or more of the illnesses or conditions covered by the plan
- if we have already accepted a claim for terminal illness benefit or critical illness cover under the plan
- if the cause of the claim is specifically excluded by any specific terms we apply to the plan when we accept the application (if applicable we will show these in the acceptance terms and plan schedule)

We won't pay out if a claim results from criminal acts or self-inflicted injury where the claim is for:

- Removal of an Eyeball

You can find full details of the exclusions in the plan conditions

We won't pay out under the children's benefit in respect of critical illness:

- if the diagnosis isn't for one of our described illnesses
- unless the child is still alive 14 days after being diagnosed as suffering from a critical illness covered by the plan
- if there is a successful claim on the main benefit within 14 days of diagnosis of the child's critical illness
- if the illness results from a condition the child had before he/she became covered by the plan.

We won't pay out under the children's benefit in respect of a death claim:

- if there is a successful claim on the main benefit prior to the child's death

We won't pay out if a claim for children's critical illness results from criminal acts or self-inflicted injury where the claim is for:

- Blindness
- Coma
- Deafness
- Loss of Hand or Foot
- Loss of Independent Existence
- Loss of Speech
- Paralysis of a Limb
- Removal of an Eyeball
- Third Degree Burns
- Traumatic Brain Injury.

You can find full details of the exclusions in the plan conditions.

Full details of what is covered, and any limits to the cover, are given in the 'Guide to Critical Illness Cover' booklet. Please ask your financial adviser for a copy.

We won't pay benefits for mortgage payment protection:

- until the deferred period listed in the plan schedule has expired
- if we receive written notice of the incapacity more than three months after the incapacity started and, due to the delay, we are unable to verify there is a valid claim

- unless you are under the regular supervision and treatment of a registered medical practitioner for your incapacity
- if the claim is due to criminal acts, self-inflicted injury or alcohol or drug abuse.

You can find full details of the exclusions in the plan conditions.

We may not pay the full benefit for mortgage payment protection if you travel for an extended period outside the EU or if you are subject to a custodial sentence. You can find full details of the exclusions in the plan conditions.

We won't pay benefits for premium protection:

- until the deferred period listed in the plan schedule has expired
- if the cause of the incapacity is specifically excluded in the plan schedule
- if the claim is due to criminal acts or self-inflicted injury, or
- if you're living outside the European Union for more than 13 consecutive weeks in any 12 months.

You can find full details of the exclusions in the plan conditions.

Mortgage payment protection and premium protection will end when one of the following happens:

- the plan term ends
- the person covered dies
- the incapacity ends
- the person covered no longer suffers a loss of earnings (if claiming under mortgage payment protection)
- we pay the cash sum on diagnosis of a terminal illness
- we pay the cash sum on diagnosis of a critical illness, under the terms of integrated critical illness cover (if chosen).

What will my premiums be?

- Your illustration gives an indication of the premium you'll need to pay for your chosen level of decreasing cover. This amount may change after we've completed the underwriting process.
- Your premiums are based on the cover you choose and your personal circumstances.
- You can pay your premiums monthly by direct debit or yearly by cheque or direct debit.
- The minimum premium is £5 a month or £50 a year.
- Remember, if you choose critical illness on a reviewable premium basis your premium may increase. Please see the 'Critical Illness premiums' section for more information about how this may affect you.
- If you choose to include mortgage payment protection cover in your plan, the part of your premium relating to this benefit may increase following a review. Please see the 'Changes to your mortgage payment protection premiums' section for more information about how this may affect you.

What are the charges?

- We make a charge for managing your plan. The charge covers your life insurance, any extra benefits you've chosen and our expenses. We include these in your premium.

What if I stop paying?

- Your plan and cover will end 30 days from the date the last unpaid premium was due. You won't get back any premiums you've paid.

What about tax?

- The cash sum we pay on death, terminal illness and critical illness is currently free from income and capital gains tax.
- It may be subject to inheritance tax unless you put your plan in trust. Please ask us for details on our trusts and for an explanatory booklet.
- Mortgage payment protection benefits will be free of income tax provided that the premiums were paid by the person covered by the plan.
- Tax rules may change.
- Your adviser can give you more details about your tax position.

Can I change my mind?

- You can change your mind within 30 days from the later of:
  - the day you are advised that the contract is concluded
  - the day you receive the contract.

  Your plan will continue if we don't receive your cancellation notice within the 30 days.
- If you change your mind and cancel your plan within 30 days, we'll give you your money back.
- The cancellation notice includes the address you must send it to if you change your mind about your plan. Alternatively, you can contact us at the address given below.

How to contact us

- Your adviser will normally be your first point of contact. They'll have provided you with information that contains their contact details.
- If you have any questions at any time, you can phone, e-mail or write to us.

Call us on **08000 686 800**
Monday to Friday 8.30am – 5.30pm
Saturday 8.30am – 2.00pm

Outside of these hours, you can use the same number and leave a message on our answerphone. We may monitor calls to improve our service.

E-mail
helpdesk@aviva.co.uk

Office address:

Aviva
PO Box 520
Norwich
NR1 3WG

How to make a claim

- You can make a claim by contacting our Life Claims Department on 0800 015 1142

Other Information

How to complain

- If you ever need to complain, you can contact us at:

  Aviva
  Customer Relations
  PO Box 3182
  Norwich
  NR1 3XE
  Telephone number: 08000 686 800
  Email: helpdesk@aviva.co.uk

- If you are not satisfied with our response, you may be able to take your complaint to the Financial Ombudsman Service.

  The Financial Ombudsman Service can look at most complaints and is free to use. You do not have to accept their decision and will still have the right to take legal action. Their contact details are:

  The Financial Ombudsman Service
  Exchange Tower
  London
  E14 9SR
  Telephone number: 0800 023 4567
  Email: complaint.info@financial-ombudsman.org.uk
  Website: www.financial-ombudsman.org.uk

Terms and conditions

- This key features document only gives a summary of our Mortgage Life Insurance plan. You should also see the full plan conditions. You may already have a copy or you can get one from your adviser or you can contact us direct. Alternatively, if you are buying online, you can obtain a copy from the website.
- Unless otherwise stated, your illustration assumes that we accept your proposal at our normal rates.
- We won't be liable to pay any benefit until:
  - you've completed our proposal form
  - we've issued acceptance terms
  - we've received your first premium or an acceptable method of collecting it.

The Association of British Insurers

- This key features document complies with the Association of British Insurers (ABI) Statement of Best Practice for Critical Illness Cover. It is a guide to our Mortgage Life Insurance plan and is based on our understanding of current laws and tax rules. You can find further details in the plan schedule and the plan conditions. If you'd like a copy of the 'ABI Guide to critical illness cover', which provides general information about Critical Illness cover, please write to The Association of British Insurers, 51 Gresham Street, London EC2V 7HQ.

Law

- The law of England will apply in legal disputes and your contract will be written in English. We'll always write and speak to you in English.

  We're regulated by the Financial Conduct Authority:

  The Financial Conduct Authority
  25 The North Colonnade
  Canary Wharf
  London
  E14 5HS

  We're also regulated by the Prudential Regulation Authority:

  The Prudential Regulation Authority
  20 Moorgate
  London
  EC2R 6DA

Client classification

- The Financial Conduct Authority has defined three categories of customer. You've been classed as a 'retail client', which means that you'll be provided with the highest level of protection provided by the Financial Conduct Authority rules and guidance.

Compensation

- Qualified advisers will recommend that you buy products suitable for your needs. You have legal rights to compensation if at any time it's decided that you've bought a plan that wasn't suitable for your needs at that time.
- The Financial Services Compensation Scheme covers your plan. If Aviva becomes insolvent and we are unable to meet our obligations under this plan, the scheme may cover you for 100% of the total amount of your claim. For further information, see www.fscs.org.uk or telephone 0800 678 1100.

Potential Conflicts of Interest

- Occasions can arise where Aviva plc group Companies, or their appointed officers, will have some form of interest in business which is being transacted.
- If this happens, or the Aviva Group becomes aware that its interests, or those of its officers, conflict with your interests, we will take all reasonable steps to manage that conflict of interest, in whatever manner is considered appropriate in the circumstance. This will be done in a way which ensures all customers are treated fairly and in accordance with proper standards of business.

Braille, large font, audio material

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Just call **08000 686 800** or email **helpdesk@aviva.co.uk** and tell us:

- the format you want
- your name and address
- the name or code of the document. The code is usually in the bottom left hand corner on the back of most documents.

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