

Whole of Life Insurance

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Individual Protection



Welcome to Aviva

The purpose of this document is to help you decide whether Whole of Life Insurance is right for you, featuring all the key bits you need to know. We've highlighted words and sections that'll help you understand how things work.

The full terms, conditions and exclusions of this cover can be found in the Cover Details and Cover Summary. The Cover Details gives you all the terms and conditions of the insurance and the Cover Summary will be a personalised summary of your cover if you decide to take it out. We'll let you know throughout this document when you might want to take a look at these.

The Cover Details are on our website [protection.aviva.com](https://www.protection.aviva.com) and you'll get a copy of the Cover Details and Cover Summary if you decide to buy from us.

Taking advice

You'll need to decide if this product meets your financial needs, so please read this document carefully and check it's right for you. You might want to get expert advice from a financial adviser who can look at your personal circumstances and help you make the decision that's right for you.

Giving us the right information

So that we can give you cover that matches your needs, it's really important that you provide us with information that's true, accurate and complete when you apply for your cover. If you don't, it can cause problems later on, like your policy being cancelled or a claim being rejected or reduced.

Who are we?

We're Aviva. We specialise in insurance in the UK that helps people experiencing tough times in life - such as life insurance, critical illness and income protection cover.



What is Whole of Life Insurance?

Whole of Life Insurance is designed to pay out a lump sum when the person covered dies or is diagnosed with a terminal illness. It only protects the person covered against events that happen during the lifetime of the cover.

This type of cover can be used to provide a legacy for a family member or friend, offer financial protection or help fund an inheritance tax liability. There's no maximum term, the cover will last throughout the life of the person covered.

What does terminal illness mean?

A terminal illness means that the illness either has no known cure, or has progressed to the point where it can't be cured.

A claim for terminal illness can be made where you've been diagnosed by a medical consultant with an illness that is expected to lead to death within 12 months. If the consultant can't diagnose this, or expects death to occur more than one year after diagnosis, we won't pay a terminal illness claim.

We'll only make a payment for a diagnosis of a terminal illness if you meet the definition in the Cover Details.

Who can buy Whole of Life Insurance?

To apply for this cover, you must be resident in the United Kingdom, Channel Islands, Isle of Man or Gibraltar, be at least 17 years old and no older than 84. You'll need a UK, Channel Islands, Isle of Man or Gibraltar bank account.

At the time you apply for this cover, both you and the person covered must:

- Be in the UK, the Channel Islands, the Isle of Man or Gibraltar with a legal right to live in that jurisdiction, and
- Consider your main home as being in the UK, the Channel Islands, the Isle of Man or Gibraltar and have no current intention of moving anywhere else permanently.

You can choose to cover:

- you alone – we call this 'single life' cover
- you and another person – we call this 'joint life' cover, or
- one or two people other than yourself – this can be either 'single' or 'joint life' cover

In this document, we assume that you're the owner of the cover and you're using it to cover yourself.

What does joint life cover mean?

Joint life cover is where two people need cover so if one person dies or is diagnosed with a terminal illness the other is provided with financial support. The cover is jointly owned so the policy will end after we've paid the full sum assured.

If you chose to insure two people under one cover, we'll ask you to choose whether you want the cover to pay out:

- when one of the people insured has died, or is diagnosed with a terminal illness (we call this 'joint life first event') – once we pay a claim, the policy stops and the other person is no longer insured under this cover, or
- when both of the people insured have died, or have been diagnosed with a terminal illness (we call this 'joint life second event').

Insurable interest

You can only cover someone else if you'd suffer financially were they to die or suffer from a terminal illness. We call this 'insurable interest'. You'll always have an insurable interest in your own life, or in the life of your spouse or civil partner. You may also have an insurable interest in another person. If you're not sure if you have an insurable interest in a particular person, you should ask your adviser for guidance.

The fundamentals

The amount of cover

You decide on how much cover you want. This is the amount we pay when you die or if you are diagnosed with a terminal illness. We call this the 'sum assured'.

Reviewing your cover

Make sure you review your policy in line with your earnings and lifestyle. If you don't, you may find you have more or less cover than you actually need.

Types of cover

You can choose whether you'd like the amount of your cover to stay the same or change over time.

- Level – a straight forward cover, where the amount of your insurance stays the same throughout the policy.
- Increasing – designed to keep up with rising costs over the years. The amount of your cover increases each year in line with the Retail Prices Index (RPI), up to a maximum of 10%.

RPI is a measure of inflation, published by the Office of National Statistics every month. It measures how the costs of goods and services change over time.

Protecting your insurance against inflation

Inflation will reduce the spending power of any money you're paid in the future. Choosing increasing insurance can help protect your insurance against this effect.

The amount you pay will increase each year to pay for the extra insurance. It'll increase by a higher percentage than the amount of your insurance, because you're more likely to claim as you get older.

If you need to take a break from the annual increase, you can choose to stop, skip and restart it. When you stop or skip it, the amount of your insurance and how much you pay will stay as it was when you made that change. If you restart it, it starts increasing again. We can't restart it if you've stopped your increase for three years in a row.

For more information, take a look at section 3.3 in the Cover Details.

Paying for your cover

We'll collect monthly or annual premiums from you by direct debit until your cover ends. The amount you pay won't change, unless you choose increasing cover where the amount you pay will increase each year to pay for the extra cover.

The premiums paid over the lifetime of the insurance can exceed the sum assured.

If you miss a premium

If any premium remains unpaid for more than 30 days from the date it was due to be collected, we'll stop your policy and you'll no longer be covered. You may be able to reinstate your cover by paying any outstanding premiums up to 6 months after a missing premium.

For more information on reinstating your cover, take a look at the Cover Details.

Value of the cover

This isn't a savings or investment product. Your cover has no cash value unless a valid claim is made.

Additional option available at extra cost

Waiver of premium

If you're too ill or injured to work, Waiver of Premium means you won't have to make any payments.

We'll waive your premiums if you're incapacitated for longer than 26 weeks. Waiver of Premium will end when you reach your 70th birthday.

You can include Waiver of Premium if you're 54 and below when you buy the cover, for an additional cost. You can add Waiver of Premium for one or both people if you have a joint life cover.

We won't waive premiums if Waiver of Premium isn't included in the cover for that person (the Cover Summary will show who's covered by Waiver of Premium).

For more information about Waiver of Premium, take a look at section 2.2 of the Cover Details.

What does incapacitated mean?

Incapacitated means that you're too ill or injured to work. It depends on whether you're in paid work and what kind of work you do.

It'll either be based on your ability to be able to do your own occupation (the type of job you did before you stopped work), or certain work tasks (types of things people do in everyday life, like writing, walking or bending). We sometimes refer to work tasks as daily activities.

Which of these definitions applies to you will be agreed based on your circumstances when you apply – and will be confirmed in your Cover Summary. If your circumstances change before you became incapacitated, a different definition may apply to your claim.

Changing your policy

You can change your policy to ensure that it still meets your needs.

These options may not be available to everyone, for example if you have a particular medical condition when the cover is first taken out. For more information, including further limitations, take a look at section 3.3 in the Cover Details.

Life event changes

You're able to increase the amount of cover without the need to answer any more health and lifestyle questions up until and including your 55th birthday and you:

- get married or enter a civil partnership
- have a child (including adoption)
- get a promotion that results in a salary increase, or
- increase the amount of your mortgage.

There is a limit to how much you can increase your sum assured

- it can't be more than the lower of 100% of the original sum assured or £150,000.

You can also increase the amount of cover if your inheritance tax (IHT) liability increases, and you're aged 90 or under:

1. Where there is an increase in the value of your estate which causes an increase in prospective liability to IHT. The increase in sum assured allowed under this option can't exceed the increase in liability to IHT.

This option can be exercised any number of times, provided that the combined total increase is not more than the lower of:

- 100% of the original sum assured, or
 - £250,000.
2. Where there is a change to IHT legislation either by:
 - the UK Government announcing a legislative change in the rate, or rate bands, of IHT, or
 - the UK Government announcing a legislative change in the exemptions and reliefs from IHT.

The increase in sum assured allowed under this option isn't more than the lower of:

- the increase in the proportion of the liability covered immediately before the change
- £5million, or
- 100% of the original sum assured.

This option must be exercised within six months of the change in legislation.

More ways you can change

You can also:

- reduce the sum assured
- stop and restart annual increases if you've selected increasing cover
- add another person to single life cover
- change a joint life cover to one single life cover
- continue the cover after the first person dies on a joint life first event cover, or
- change your premiums from annual to monthly and vice versa.

More details about any of these changes including any limitations and conditions and other changes can be found in section 3.3 of the Cover Details.

Things you need to know

Making a claim

If you need to claim, you should get in touch as soon as you can using the contact details provided.

If you'd like to know more about how to claim you can find this in the Cover Details or visit our website [protection.aviva.com](https://www.aviva.com/uk/whole-of-life).

We'll pay the benefit to the person legally entitled to receive it. This will be confirmed when a claim is made. It'll depend on the nature and circumstance of the claim at the time, and whether the policy has been assigned or put under trust.

Where a claim can be made

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

For a terminal illness claim, you can be residing anywhere in the world, however the consultant must be in an eligible country.

For Waiver of Premium claims, you must be living in an eligible country when you become incapacitated. You must return to and remain in the UK, Channel Islands, Isle of Man or Gibraltar within 26 weeks of becoming incapacitated in order to receive the benefit.

For a list of eligible countries, take a look at section 5 of the Cover Details.

When we won't pay a claim

More claims are paid than aren't. Here are the reasons why we won't pay a claim.

- you stopped paying regular premiums throughout the term of your policy
- you provided inaccurate information when you applied for the cover
- you don't give us medical or other evidence that we ask for, or
- you didn't tell us if any of the information in the Cover Summary or Application Details we send you is wrong.

We won't pay a claim if the person covered dies as a result of their own actions within one year of the cover start date or the latest restart date. Once the cover has been active for more than 12 months, if the person covered has asked us to increase the sum assured in the 12 months prior to them dying as a result of their own actions, no benefit will be payable in respect of this increase.

It's important to be accurate and thorough when applying. If you don't take sufficient care and give us information that's untrue, incomplete or inaccurate, we may need to cancel or change your policy so that it fits what we should have been told about. So if you later spot an error in your documents, contact us as soon as possible to change it.

For more details on when we won't pay a claim, take a look at section 2.1 in the Cover Details.

Changing your mind about your cover

If you change your mind about having cover within 30 days of receiving your policy documents, we'll refund any payments you've made, unless we've already paid a benefit under your insurance.

If you don't cancel your policy within this time period, your policy will remain active as set out in your Cover Summary.

You can stop your policy at any time. Once you tell us, your policy will end on the day before your next monthly premium is due and you won't get any money back.

If you're paying annual premiums, your policy will end on the day before the next monthly anniversary of the policy.

We'll retain the cost of any full (or partial) months of cover up to the date of cancellation and will refund any balance of the annual premium.

The Law

This insurance is governed by the law of England and Wales.

All our standard communications with you now and throughout the term of your insurance will be in English. If you have specific communications needs, we'll do our best to support you. Just let us know.

Current tax rules

Under current legislation and HMRC practice, benefit(s) payable under this cover are normally free from Income Tax and Capital Gains Tax for UK residents, unless you assign your policy to someone else.

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

If your policy isn't placed in trust, the benefit we pay may form part of your estate for inheritance tax purposes.

If the amount we pay out forms part of your estate, it may be subject to inheritance tax. You may wish to place your insurance in trust to help mitigate the effect of inheritance tax. However, we can't advise whether a trust is suitable in any particular circumstance or give tax advice in relation to the use of trusts. We recommend that you take professional advice before setting up a trust.

Personal information we collect

Personal information we collect about you includes sensitive information such as your health and medical history. Where we collect this information, we'll rely either on your consent, or on a combination of the following justifications: performing a contract with you or preparing to enter into a contract with you; complying with regulatory requirements; or having a legitimate interest to request your personal information.

To give you a quicker decision about your insurance, we'll make decisions about your application using an 'automated decision-making tool'. An 'automated decision-making tool' doesn't involve human input and we sometimes use it to determine whether we're able to provide you with insurance and on what terms based on the answers you give us.

We may also use your personal information to detect, investigate and prevent crime (including fraud and money laundering).

Where permitted by applicable law, Aviva Protection UK Limited may share personal information with carefully selected third parties, for example, other insurers, reinsurers, and financial advisers.

Your personal information may be transferred outside the country in which you are located including to countries outside the UK.

As a data subject you have certain rights in relation to your personal information.

More details about Aviva Protection UK Limited's use of personal information and your rights as a data subject can be found at protection.aviva.com/privacy-policy

or you may request a copy using the following contact details:

The Data Protection Officer,
Aviva Protection UK Limited,
PO Box 12010,
Harlow,
CM20 9LG

or by email at DataProtectionOfficer@protection.aviva.com

About our business

Aviva Protection UK Limited operates in the UK, Channel Islands, Isle of Man and Gibraltar.

Information about our business, performance and financial position, and details on how we control our business and manage risks can be found in our Solvency and Financial Condition Report available on our website protection.aviva.com.

Making a complaint

If you have a complaint, you can get in touch with us using the contact details provided. We'll try to resolve complaints as quickly and fairly as possible. If we can't deal with your complaint promptly, we'll send you a letter to acknowledge it and give you regular updates until it's resolved.

If you're not happy with how we deal with your complaint, you can refer it to the Financial Ombudsman Service.

You can email them at:

complaint.info@financialombudsman.org.uk

Call **0800 023 4567** (calls to this number are free on mobile phones and landlines) or **0300 123 9123** (calls to this number cost no more than calls to 01 and 02 numbers) or write to:

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


Making a complaint to the Financial Ombudsman Service doesn't affect your right to take legal action.

What happens if Aviva got into financial trouble and couldn't pay out the money

The Financial Services Compensation Scheme (FSCS) is there to protect you if we can't meet our obligations. Whilst most customers will be covered under the FSCS, whether or not you can claim and the amount you can claim depends on the specific circumstances of your claim. You can get more information from www.fscs.org.uk or by calling **0800 678 1100**.


How to contact us

For any questions about your cover:

 0345 600 6820


Email us at: enquiries@protection.aviva.com

To make a complaint:

 0345 600 6813

Email us at: complaints@protection.aviva.com

To contact the claims Team:

 0345 600 6815

Email us at: claimsteam@protection.aviva.com

Write to us at:

Aviva Protection UK Limited, PO Box 12010, Harlow CM20 9LG

We're open Monday to Thursday, 8.30am to 6pm and Friday, 8.30am to 5.30pm, except for bank holidays. Please note our opening hours are UK local time.

Calls are charged at standard rates from a BT landline, but may cost more via mobiles and other networks. We may record or monitor calls. This is to make sure we have a record of any instructions we're given, help train our staff, improve the quality of our service and prevent or detect fraud.

For more information visit protection.aviva.com

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Please get in touch if you'd prefer this brochure (**EDCO1980**) in large font, braille, or as audio.

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protection.aviva.com