



directtravel
insurance
BACKPACKER

Your travel insurance policy documentation



BrokerSure
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Essential



Essential Plus

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Introduction

Welcome to your Direct Travel Insurance policy

Please note: Terms shown in bold in this policy have the meanings given to them in the general definitions section on pages 18 and 19.

This policy wording is only valid when issued in conjunction with a Direct Travel Insurance **policy certificate** and provided the required insurance premium has been paid.

The following cover is provided for each **insured person**. It is important that **you** refer to the individual sections of cover for full details of what **you** are entitled to should **you** need to make a claim. The sum insured and the excess applicable to any claim made will depend upon the level of insurance **you** have purchased. **Your policy certificate** will show whether **you** have bought Essential Cover or Essential Plus cover.

Claims arising from alcohol - **We** do not expect **you** to avoid alcohol during **your trip**, but **we** will not cover any claim arising from excessive alcohol consumption by which **we** mean where **you** have drunk so much alcohol that a **medical practitioner** has stated that **your** alcohol consumption has caused or actively contributed to **your** injury or illness, the results of a blood test at the time of injury or illness shows that **your** blood alcohol level exceeds 0.19% that is approximately 1.5 litres of beer or four 175ml glasses of wine; a witness report of a third party that has advised that **you** have notably impaired **your** faculties and/or judgement. Please refer to general exclusions 27, 28 and 29 on page 22.

This is not a private medical insurance policy

Your Direct Travel insurance policy is not a private medical insurance policy and does not cover private medical treatment, private hospital costs or other related expenses incurred, unless these have been specifically agreed and authorised by the Medical Emergency Assistance Company as part of a medical emergency covered by this policy.

Claims for reimbursement of costs

This insurance policy will only respond to claims for irrecoverable losses once those principally responsible for reimbursing the cost have been exhausted. For example transport and accommodation costs – **You** should, in the first instance, contact **your** tour operator, airline, accommodation provider, credit or debit card providers to source a refund, as in most instances, either as a result of the Package Travel & Linked Arrangement Regulations 2018; EU Transport Regulations; Consumer Credit Act; or Debit card charge backs, a refund is legally due.

IMPORTANT INFORMATION

We draw **your** attention to the exclusions detailed in the 'General Exclusions' section, in particular, exclusions 39 and 40, as this policy will **NOT** provide cover for any claims directly or indirectly related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**.

Please note: general exclusion 39 applies to all sections of cover, whilst general exclusion 40 applies to all sections of cover with the exception of Section B1 – Medical and other expenses outside of the United Kingdom, Section B2 – Expenses within the United Kingdom, Section K1 - Cancelling your trip due to Coronavirus (Covid-19) and Section K2 – Cutting your trip short due to Coronavirus (Covid-19).

It is essential that **you** refer to the 'Important conditions relating to health' on pages 6, 7 and 8, as failure to comply with this including '**change in health**' may jeopardise **your** claim or cover.

If **you** are travelling to Australia and **you** require medical treatment **you** must enrol with a local Medicare office.

If **you** are travelling to countries within Europe (EU, EEA or Switzerland) **you** must obtain a European Health Insurance Card (EHIC) and take it with **you**. **You** can apply for an EHIC online at www.ehic.org.uk.

Eligibility

This policy is only available to **you** if:

- **You** are permanently resident in the **United Kingdom** and have **your** main **home** in the **United Kingdom**;
- **You** have been in the **United Kingdom** for a minimum of 6 months in the year prior to purchasing **your** insurance policy;
- **You** are registered with a **doctor** in the **United Kingdom**;
- **You** have a UK National Insurance number (where aged 16 years of age or older);
- **You** are in the **United Kingdom** at the time of purchasing this policy. Any **trip** that has begun when **you** purchase this insurance will not be covered;
- **You** are not travelling with the intention of receiving medical treatment;
- **You** are not travelling against the advice of a **doctor** or where **you** would have been if **you** had sought their advice before beginning **your trip**;
- **Your trip** starts and ends in the **United Kingdom**;
- **You** must be travelling with the intention to return to the **United Kingdom** within **your trip** dates unless an extension has been agreed with **us** and **we** have confirmed in writing.

Age Eligibility

All **insured persons** must be aged between 18 and 44 years of age inclusive at the date of buying this insurance. If **you** reach the age of 45 years during the **period of insurance**, cover will continue until the expiry of the policy.

Table of benefits

Section	Benefits	Essential Cover		Essential Plus Cover	
		Limit (per insured person)	Excess*	Limit (per insured person)	Excess*
A	Cancelling your trip	£1,000	£150 (£20 loss of deposit)	£2,000	£100 (£20 loss of deposit)
B1	Medical and other expenses outside of the United Kingdom	£5,000,000	£150	£10,000,000	£100
	Emergency dental treatment	£100	Nil	£200	Nil
B2	Hospital benefit	£10 for each 24 hour period up to £200	Nil	£25 for each 24 hour period up to £500	Nil
B3	Mugging benefit	Not Covered	N/A	£250	Nil
C	Cutting your trip short	£1,000	£150	£2,000	£100
D1	Missed departure	Not Covered	N/A	£500	£100
D2	Missed connection	Not Covered	N/A	£500	£100
E	Abandoning your trip	£1,000	£150	£3,000	£100
F1	Personal belongings and baggage	£750	£150	£1,500	£100
	Including: One item/pair or set of items limit	£150		£250	
	Including: Valuables and electronic/other equipment limit	£100		£150	
	Including: Property in a motor vehicle Limit	£100		£150	
F2	Delayed baggage	£25 for each 24 hour period up to £100	Nil	£50 for each 24 hour period up to £200	Nil
F3	Personal money Including:	£200	£150	£300	£100
	Cash limit	£125		£200	
F4	Passport and travel documents	£150	Nil	£250	Nil
G	Personal accident:				
	Death benefit if between 18 and 44 years of age inclusive	£7,500	Nil	£15,000	Nil
	Loss of limb or sight	£7,500	Nil	£15,000	Nil
Permanent total disablement	£7,500	Nil	£15,000	Nil	
H	Personal liability	£2,000,000	£150	£2,000,000	£100
I	Legal expenses	£5,000	£150	£10,000	£100
J	Hijack	Not Covered	N/A	£250	Nil

* Excess

Unless **you** have purchased excess waiver and this is shown on **your policy certificate**, if **you** need to make a claim under certain sections listed in the table above, **we** will deduct the amount shown in respect of the policy excess from the sum **we** pay **you** for any valid claim. The excess will apply to each person claiming, and to each incident and to each section of the policy under which a **claim** is made.

Table of benefits for extended cover for Coronavirus (Covid-19)

Please note: The following sections only apply if you have purchased an Essential Plus policy and this is shown on your policy certificate.

Section	Benefits	Essential Cover		Essential Plus Cover	
		Limit (per insured person)	Excess*	Limit (per insured person)	Excess*
K1	Cancelling your trip due to Coronavirus (Covid-19)	Nil	Nil	£2,000	£100
K2	Cutting your trip short due to Coronavirus (Covid-19)	Nil	Nil	£2,000	£100

General information about this insurance

Insurance provider

This insurance is underwritten by Chaucer Insurance Company DAC.

Chaucer Insurance Company DAC are authorised and regulated by the Central Bank of Ireland and registered in the Republic of Ireland. Registered office: 38 & 39 Baggot Street Lower, Dublin 2, D02 T938, Ireland.

This policy is sold and administered by Direct Travel Insurance. Direct Travel Insurance is a trading name of Brokersure Ltd which is authorised and regulated by the Financial Conduct Authority (FCA 501719). This can be checked by visiting the Financial Services Register (www.fca.org.uk).

Your travel insurance

This policy wording along with **your policy certificate** and any appropriate endorsements forms the basis of **your** contract of insurance with **us**. Together, these documents detail and explain what **you** are covered for and what **you** are not covered for.

Different levels of cover apply depending on whether **you** have bought an Essential or Essential Plus policy.

Please read this policy wording to make sure that the cover meets **your** needs and please check the details outlined within **your policy certificate** and any applicable endorsements to make sure that the information shown is correct.

Law and jurisdiction

This policy will be governed by English Law and **you, insured persons** and **we** agree to submit to the courts of England and Wales to determine any dispute arising under or in connection with it, unless agreed to the contrary by **you** and **us** before the commencement date. The Terms and Conditions of this policy will only be available in English and all communication relating to this policy will be in English.

Financial Services Compensation Scheme (FSCS)

We are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme (depending on the type of insurance and the circumstances of the claim) if **we** are unable to meet **our** financial obligations under this policy. A claim under this type of insurance is covered for 90% of the claim without any upper limit.

Further information about the compensation scheme is available from:

Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London EC3A 7QU Tel: 020 7741 4100 or 0800 678 1100 Website: www.fscs.org.uk

Important conditions relating to health

This policy contains conditions relating to **your** health. **You** must comply with the disclosure of **your medical conditions** as stated overleaf.

We are unable to provide cover for any claim arising as a result of an **existing medical condition** of a non-travelling **relative, business associate** or friend living abroad who **you** had planned to stay with, or any known or recognised complication of or caused by the **existing medical condition(s)**.

BE AWARE! We do not provide any cover for:

- Psychological conditions such as stress, anxiety, depression, eating disorders or mental instability unless agreed with **us** in writing.
- Any circumstances if **you** have received a terminal prognosis.
- Any **medical condition you** are aware of but for which **you** have not had a diagnosis or referred to a specialist or consultant.
- Any **medical condition** for which **you** are on a waiting list or referred to a specialist or consultant or have the knowledge of the need for surgery, treatment or investigation at a hospital, clinic or nursing home.
- Claims caused by an **existing medical condition** of a non-travelling close **relative**, close **business associate** or friend living abroad who **you** had planned to stay with, or any known or recognised complication of or caused by the **existing medical condition**.
- Any circumstances that are not specified in **your** policy.

You should also refer to 'General exclusions' on pages 21, 22 and 23 - applicable to all sections of the policy.

Important conditions relating to health

Disclosure of your medical conditions

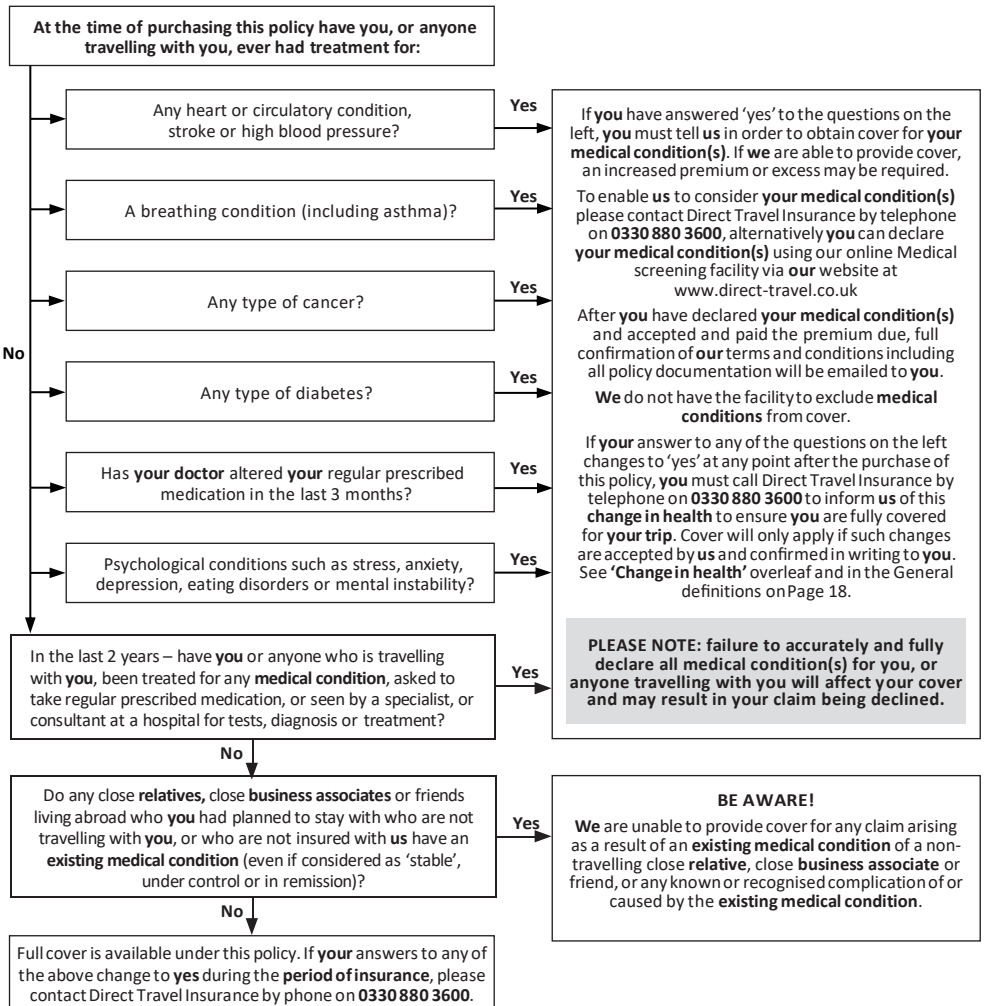
Your policy may not cover claims arising from **your medical conditions**.

If **you** answer 'yes' to any of the questions below then **you** must declare the relevant conditions to **us** at Direct Travel Insurance.

So that **we** can ensure **you** are provided with the best cover **we** can offer please read and answer the following questions accurately and carefully:

Please note: If **you** are answering the medical questions on behalf of someone else, **you** must make sure that **you** have their permission to do so and all of the required information to answer the medical questions fully and accurately. If **you** are not sure of any of the information **you** are giving **us** or do not know, the answers must be checked with the treating G.P.

Failure to accurately and fully declare all **medical condition(s)** for **you**, or anyone travelling with **you** will affect **your** cover and may result in **your** claim being declined.



Change in health

If **you** health changes, between the date **your** policy was purchased and the date of travel, **you** are referred to a specialist or a consultant, under investigation or awaiting treatment or surgery **you** must contact Direct Travel Insurance as soon as possible phoning **0330 880 3600**.

We will advise **you** if **we** are able to continue cover following **your change in health**. **We** reserve the right to increase the premium, increase the excess or withdraw the cover. If **we** cannot cover **your medical conditions** **we** will give **you** the choice of either:

- a. cancelling **your** policy and **we** will arrange a proportionate/partial refund providing **you** have not and will not make a claim or,
- b. if **you** haven't yet travelled, making a cancellation claim for **your** pre-booked trip.

You should also refer to 'General exclusions' on pages 21, 22 and 23 - applicable to all sections of the policy.

How we use personal information

We will use the information from **your** policy for the purpose of providing **you** with insurance services and additional products and services. **We** fully accept **our** responsibility to promote the privacy of customers and the confidentiality and security of information entrusted to **us**.

The information provided by or on behalf of **you** when the policy was taken out, together with other information, will be used by **us**, **our** Group companies and **our** service providers and agents. It will be used for administration, customer service and claims.

It may also be used for the purpose of fraud prevention including passing details to other insurers and regulatory bodies. **You** have provided information in connection with the purchase and performance of this insurance policy and **you** have consented to the processing of the personal data, including sensitive personal data and **you** have consented to the transfer of this information abroad.

Unless **you** have informed **us** otherwise, **we** or **our** service providers and agents may contact **you** by mail or telephone to let **you** know about any goods, services or promotions that may be of interest to **you** and/or share **your** information with organisations that are **our** business partners. Under the UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679, **you** have certain rights regarding access to **your** information. **You** have the right to see a copy of the personal information held about **you**, if **you** believe that any of the information **we** are holding is incorrect or incomplete, please let **us** know as soon as possible. Any information which is found to be incorrect will be corrected promptly.

We may monitor and/or record communication with **us** either directly or by reputable organisations selected by **us**, to ensure consistent servicing levels and account operation.

We will keep information about **you** only for as long as is appropriate.

In certain circumstances, **we** may need **your** consent to process certain categories of information about **you** (including sensitive details such as information about **your** health). Where **we** need **your** consent, **we** will ask **you** for it separately. **You** do not have to give **your** consent and **you** may withdraw **your** consent at any time. However, if **you** do not give **your** consent, or **you** withdraw **your** consent, this may affect **our** ability to provide the insurance cover from which **you** benefit and may prevent **us** from providing cover for **you** or handling **your** claims.

Want more details?

For more information about how **we** use **your** personal information please see **our** full privacy notice(s), which is/are available online on **our** website www.chaucerplc.com/privacy-cookie-policy/ or in other formats on request.

If **you** require details of Direct Travel Insurance's privacy policy, this can be found online at: <https://www.direct-travel.co.uk/privacy-policy/>.

UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679.

Residency

You and all other persons insured on this policy must have **your** main **home** in the **United Kingdom** and have a **United Kingdom** National Insurance number and be registered with a **doctor** in the **United Kingdom** at the time **you** buy this policy.

Residents of the Isle of Man must have their main **home** in the Isle of Man and be registered with a local **doctor**.

Health agreements

EU EEA or Switzerland

If **you** are travelling to a country in the European Union, **you** are strongly advised to take a European Health Insurance Card (EHIC) with **you**. Application forms to obtain an EHIC are available from **your** local post office or **you** can download an application form from the following website: www.ehic.org.uk. This entitles European citizens to benefit from the health agreements which exist between countries in the European Union. If **you** already hold an EHIC please check it is valid for **your** trip. In the event of liability being accepted for a medical expense which has been reduced as a direct result of **you** presenting **your** European Health Insurance Card to the medical facility at the time of treatment **we** will not apply the deduction of the excess under section B1 (Medical and other expenses outside of the United Kingdom).

Australia or New Zealand

If **you** require medical treatment in Australia **you** must enrol with a local MEDICARE office. **You** do not need to enrol on arrival but **you** must do this after the first occasion **you** receive treatment. In-patient and out-patient treatment at a public hospital is then available free of charge. Details of how to enrol and the free treatment available can be found by visiting the MEDICARE Website on www.humanservices.gov.au/medicare or by emailing: medicare@humanservices.gov.au.

If **you** require medical treatment in New Zealand, there are reciprocal agreements, but a person may not enrol with a Primary Health Organisation (PHO). They should get the same health subsidies as a New Zealand citizen visiting a general practitioner as a casual patient, if the **doctor** has decided the condition needs prompt attention. For more information, please go to www.health.govt.nz or email: info@health.govt.nz.

Alternatively, please call the Medical Emergency Assistance Company for guidance.

If **you** are admitted to hospital contact must be made with the Medical Emergency Assistance Company as soon as possible and their authority obtained in respect of any treatment NOT available under MEDICARE or a Primary Health Organisation (PHO).

In the event of liability being accepted for a medical expense which has been reduced by the use of either an EHIC, Medicare in Australia or private health insurance, **we** will not apply the deduction of the policy excess under section B1 (Medical and other expenses outside of the United Kingdom).

Travel delays - EC Regulations

This policy is not designed to cover costs which are met under the EC Regulation No. 261/2004. Under this Regulation if **you** have a confirmed reservation on a flight, and that flight is delayed by between 2 and 4 hours (length of time depends on the length of **your** flight) the airline must offer **you** meals, refreshments and hotel accommodation. If the delay is more than five (5) hours, the airline must offer to refund **your** ticket. The Regulations should apply to all flights, whether budget, chartered or scheduled, originating in the EU, or flying into the EU using an EU carrier.

If **your** flight is delayed or cancelled, **you** must in the first instance approach **your** airline and clarify with them what costs they will pay under the Regulation.

If **you** would like to know more about **your** rights under this Regulation, additional useful information can be found on the Civil Aviation Authority website (www.caa.co.uk).

Sports and activities

Any involvement in the following sports and/or activities is subject to **your** compliance with local laws and regulations and the use of recommended safety equipment (such as a helmet, harness, knee and/or elbow pads, life jacket etc...).

Please note: The policy terms and conditions will still apply in all other respects.

Please also refer to the 'General conditions' on pages 20 and 21 and the 'General exclusions' on pages 21, 22 and 23.

This policy automatically covers **you** to undertake the activities listed below on a recreational and amateur basis.

Animal sanctuary/Refuge work	Diving (indoor up to 5 metres)	Mountain biking (not downhill or freeriding)	Sleigh riding (reindeer, horses or dogs)
Archery	Elephant trekking (UK-booked)	Netball	Snooker
Athletics	Fell walking	Petanque	Snorkelling
Badminton	Flag football	Pigeon racing	Softball
Ballooning – Hot air	Flying a kite	Pony trekking	Squash
Banana boating	Football	Pool	Stoolball
Bar work	Fresh water/Sea fishing	Quoits	Surfing
Basketball	Frisbee	Rackets	Swim trekking
Beach games	Fruit or vegetable picking	Racquet ball	Swimming
Biathlon	Glass bottom boats	Rafting (Grade 1 rivers only)	Swimming with dolphins
Billiards	Golf	Rambling	Sydney Harbour Bridge
Bird watching	Gymnastics	Restaurant work	Table tennis
Body boarding	Highland games	Ringos	Ten Pin Bowling
Bowling	Hiking/Trekking/Walking up to 1,500m excluding the use of ropes or guides.	River walking	Tennis
Bowls	Horse riding (no hunting, jumping or polo)	Road cycling	Tubing
Bungee jumping (maximum of 2 jumps)	Ice skating	Rounders	Tug of war
Camel/Elephant riding	Jet boating	Rowing	Volleyball
Camping	Jet skiing	Running sprint/long distance	Wake boarding
Canoeing/Kayaking -cover included for white water rafting up to Grade 2 rivers.	Jogging	Safari (UK organised)	Water skiing
Catamaran sailing (In-shore)	Keep fit	Sail boarding	Whale watching
Clay pigeon shooting	Korfball	Sailing/Yachting inshore (recreational)	Windsurfing
Cricket	Manual labour (Office and clerical work, bar and restaurant work, music performance and singing, fruit picking (not involving the use of machinery)	Scuba diving to 30m if qualified and not diving alone or down to 18 metres if not qualified and must be accompanied by a qualified instructor	Working (non-manual)
Croquet	Marathons (Maximum of 2 and not extreme marathons)	Sea fishing	Yachting (inland and coastal waters)
Curling	Model flying	Shooting	Yoga
Dancing	Model sports	Shooting (target range-not hunting)	
Darts	Motorcycling (EU Only -on road wearing a helmet provided you hold an appropriate UK licence for the capacity of the motorcycle you are riding)		

Please note: There is no cover provided for winter sports.

If the activity in which **you** are participating is not listed or **you** are participating in anything other than on a recreational or amateur basis please contact Direct Travel Insurance on **0330 880 3600**.

Cruises

There is no cover provided for **cruises** or **your** travel on a cargo ship.

Cancellations and refunds

Important - Applicable to all policies:

We will not refund the premium if **you** have travelled on the policy, or if **you** have made or if **you** intend to make a claim or an incident has occurred which is likely to give rise to a claim.

To cancel **your** policy, **you** must contact Direct Travel Insurance by phoning **0330 880 3600**, or emailing **enquiries@direct-travel.co.uk** or by writing to **Direct Travel Insurance, Digital House, Threshelfords Business Centre, Feering, Kelvedon, Colchester, Essex CO5 9SE**.

1. If You wish to cancel the policy within the 14-day cooling off period

If **you** decide this policy is not suitable for **you** and **you** want to cancel **your** policy, **you** must contact Direct Travel Insurance within fourteen (14) days of buying the policy or the date **you** receive **your** policy documents. Any premium already paid will be refunded to **you** in full.

2. If You wish to cancel the policy outside the 14-day cooling off period

If **you** cancel the policy at any time after the fourteen (14) day cooling off period, **you** will be entitled to a refund of the premium paid, subject to a deduction of 30% for the cancellation cover **you** have received.

Our right to cancel the policy

We have the right to cancel this policy by giving at least thirty (30) days' notice in writing to the **policyholder** at their last known address where **we** have serious grounds for doing so, including any failure by **you** to comply with the conditions on pages 20 and 21 of this policy which is incapable of remedy or which **you** fail to remedy within fourteen (14) days of receiving a notice from **us** requiring **you** to remedy the breach. A proportionate refund of the premium paid will be made to the **policyholder** from the date **we** cancel the policy.

Cover options available

Types of cover and durations

This policy is for a single continuous **trip** made by **you** within the geographical areas as shown on **your policy certificate** if **you** are age between 18 and 44 years of age.

The maximum **trip** duration available is twelve (12) months.

Geographical areas

One of the following areas will be shown on **your policy certificate**. This describes the area of the world which this policy provides cover for **you** to travel to.

You will not be covered if **you** travel outside the area **you** have chosen, as shown on **your policy certificate**.

Europe - Albania, Algeria, Andorra, Armenia, Austria, Azerbaijan, Azores, Belarus, Belgium, Bosnia-Herzegovina, Bulgaria, Croatia, Czech Republic, Cyprus, Denmark (including Faroe Islands), Estonia, Finland, France (including Corsica), Georgia, Germany, Gibraltar, Greece (including Greek Isles), Greenland, Guernsey (including Alderney, Sark and Herm), Hungary, Iceland, Ireland, Italy (including Aeolian Islands, Sardinia, Sicily), Jersey, Kosovo, Lapland, Latvia, Liechtenstein, Lithuania, Luxembourg, Macedonia, Madeira, Malta, Moldova, Monaco, Montenegro, Netherlands, Norway (including Jan Mayen, Svalbard Is), Poland, Portugal, Romania, Russia (west of Ural mountains), San Marino, Sardinia, Serbia, Slovakia, Slovenia, Spain (including Balearic and Canary Islands), Sweden, Switzerland, Turkey, Ukraine and Vatican City.

Australia and New Zealand

Worldwide - excluding Canada, Caribbean, Mexico and USA

Worldwide - including Canada, Caribbean, Mexico and USA

- A stopover of up to a maximum of seventy two (72) hours is allowed in Worldwide – excluding Canada, Caribbean, Mexico and USA if travelling to Australia and New Zealand.
- A stopover of up to a maximum of seventy two (72) hours is allowed in Worldwide – including Canada, Caribbean, Mexico and USA if travelling to Worldwide – excluding Canada, Caribbean, Mexico and USA.

Please note:

No cover is provided for **your** travel to a specific country or to an area where, prior to **your trip** commencing, the Foreign, Commonwealth & Development Office (FCDO) have advised against all (or all but essential) travel.

It is **your** responsibility to check the latest advice from the FCDO prior to commencing **your trip**, which **you** can find at <https://www.gov.uk/foreign-travel-advice>.

Period of cover

Cover is provided for a single continuous **trip**. Cover for cancellation starts at the time **you** book the **trip** or pay the insurance premium, whichever is later. Cover for cancellation ends as soon as **you** start **your trip**.

Cover under all other sections starts when **you** leave **your home** address in the **United Kingdom** (but not earlier than twenty four (24) hours before the booked departure time) or from the first day of the **period of cover** as shown on **your policy certificate**, whichever is the later.

Unless **you** are complying with the 'return home visit extension' see page 13 for conditions, cover ends when **you** return to **your home** address in the **United Kingdom** (but not later than twenty four (24) hours after **you** return to the **United Kingdom**) or at the end of the **period of cover** as shown on **your policy certificate**, whichever is earlier.

All cover ceases if **you** have to return to the **United Kingdom** under section C (Cutting your trip short) or section B1 (Medical and other expenses outside of the United Kingdom), cover cannot be provided to resume **your trip** or for further **trips**.

No cover is provided for one-way **trips**.

Any **trip** that had already begun when **you** purchased this insurance will not be covered.

You must be aged between 18 and 44 years of age inclusive at the date of buying this policy. If **you** reach the age of 45 years during the **period of insurance**, cover will continue until the expiry of the policy.

Each **trip** must begin and end in the **United Kingdom**.

Trip extensions

Trip extensions if you decide you wish to extend your trip whilst overseas

If, once **you** have left the **United Kingdom** and before the end of the **period of cover**, **you** decide **you** want to extend **your** policy, please contact Direct Travel Insurance Customer Services on **0330 880 3600** or by e-mailing **enquiries@direct-travel.co.uk**. Extensions can usually only be considered if there has been no change in **your** health (or that of a **relative** or **business associate**) and no claim has been made or is intended to be made and no incident likely to give rise to a claim has occurred.

Trip extensions if you are unable to return home from your trip as planned

If, due to unexpected circumstances beyond **your** control, for example, due to illness or injury or unavoidable delays affecting **your** return flight or **public transport**, **your trip** cannot be completed within the **period of cover** outlined in **your policy certificate**, cover will be extended for **you** at no extra cost for up to thirty (30) days. This also applies to one person travelling with **you** who is authorised to stay with **you** by the Medical Emergency Assistance Company if the extension is due to medical reasons. All requests for more than thirty (30) days must be authorised by the Medical Emergency Assistance Company. Please see Medical and other emergencies on page 14 for details of how to contact the Medical Emergency Assistance Company.

Trip extensions – travel disruption caused by a pandemic/epidemic (including coronavirus (covid-19))

If, as a result of a **pandemic** and/or **epidemic** (including but not limited to **Coronavirus (Covid-19)**), **you** are unable to return to the **UK** as planned, due to:

- a) a country closing their borders and/or
- b) the cancellation or delay of **your** booked **public transport**

and as a result **you** wish to extend coverage under **your** current policy, please contact Direct Travel Insurance Customer Services on: **0330 880 3600** or e-mail: **enquiries@direct-travel.co.uk**. **We** will need full details of **your** circumstances, to allow **us** to consider any such request. Please be aware, that all such extension requests will be considered, but cannot be guaranteed.

Return home visit extension

For policies of 3-6 months duration **you** are permitted to make 1 return visit **home** during the **period of insurance**, or for policies of 6 months or more in duration **you** are permitted to make 2 return visits **home** during the **period of insurance** subject to the following conditions should **you** choose to use this extension:

- **You** are only allowed two return **trips** during the **period of cover**.
- Each visit can only be for a maximum of 21 days.
- If **your** visit exceeds 21 days, **your** policy terminates immediately and **you** will have to purchase a new policy should **you** wish to travel again.
- When using the 'return home extension', all cover is suspended on clearance of customs in **your home** country and cover will only recommence after the baggage check in at **your** international departure point for **your** return flight, international train or ferry back to **your** overseas destination.

Please Note: All cover ceases if **you** have to return to the **United Kingdom** under section C (Cutting your trip short) or section B1 (Medical and other expenses outside of the United Kingdom), cover cannot be provided to resume **your trip** or for further **trips**.

Medical and other emergencies

Your Direct Travel insurance policy is not a private medical insurance policy and does not cover private medical treatment, private hospital costs or other related expenses incurred unless these have been specifically agreed and authorised by the Medical Emergency Assistance Company.

The Medical Emergency Assistance Company will provide immediate help if **you** are ill, injured or die outside the **United Kingdom**. They provide a 24-hour emergency service 365 days a year. The contact details are as follows:

Phone: +44 (0) 20 3472 2388 E-mail: operations@emergencyassistance.co.uk

Please have the following information available when **you** (or someone on **your** behalf) contact the Medical Emergency Assistance Company so that **your** case can be dealt with swiftly and efficiently:

- **Your** name and address;
- **Your** contact phone number abroad including the hospital and treating doctors details;
- **Your** policy number shown on **your policy certificate**; and
- The name, address and contact phone number of **your** GP.
- Quote the scheme name which is: Direct Travel.

Please note: This is not a private medical insurance. If **you** go into hospital abroad and **you** are likely to be kept as an in-patient for more than twenty four (24) hours or if **your** outpatient treatment is likely to cost more than £500, someone must contact the Medical Emergency Assistance Company for **you** as soon as reasonably possible. If they do not, **we** may not provide cover or **we** may reduce the amount **we** pay for **your** in-patient or outpatient treatment.

In the event that **you** require in-patient hospital treatment and/or evacuation /repatriation, it is imperative that the Medical Emergency Assistance Company is contacted and authorisation obtained prior to such treatment and/or evacuation/repatriation taking place.

Failure to contact the Medical Emergency Assistance Company and obtain authorisation may prejudice the claim and could mean that some or all of the costs involved may not be paid. **You** should not attempt to find **your** own solution and then expect full reimbursement from **us** without prior approval first having been obtained from the Medical Emergency Assistance Company.

If **you** have to return to the **United Kingdom** under section C (Cutting your trip short) or section B1 (Medical and other expenses outside of the United Kingdom) the Medical Emergency Assistance Company must authorise this. If they do not, **we** may not provide cover or **we** may reduce the amount **we** pay for **your** return to the **United Kingdom**.

How to make a claim

You must register a claim under all sections by contacting the following company:

Claims Settlement Agencies

308-314 London Road, Hadleigh, Benfleet, Essex, SS7 2DD

Tel: 01702 553443, E-mail: info@csal.co.uk

To download a claim form please visit www.csal.co.uk

The fastest and easiest way to make a claim is online at www.submitclaim.co.uk/dti.

The process should take approximately 10-15 minutes to complete (depending on the type of claim), but before continuing **you** should ensure **you** have **your policy certificate, trip** dates, supporting documentation and details of the incident.

Please note: All claims must be notified as soon as it is reasonably practical after the event which causes **you** to submit a claim. Late notification of a claim may affect **our** acceptance of a claim or result in the amount **we** pay being reduced.

Claims Settlement Agencies are open Monday to Friday between 9am and 5pm.

A claim form will be sent to **you** as soon as **you** tell them about **your** claim.

We will ask the claimant to complete a claim form and to provide at their own expense all reasonable and necessary evidence required by **us** to support a claim. If the information supplied is insufficient, **we** will identify the further information which is required. If **we** do not receive the information **we** need, **we** may reject the claim. For further details about claims, please refer to 'General conditions' on pages 20 and 21.

To help **us** prevent fraudulent claims, **we** store **your** personal details on computer and **we** may transfer them to a centralised system. **We** keep this information in line with the conditions of the UK Data Protection Act 2018 which incorporates the General Data Protection Regulation (EU)2016/679.

How to make a complaint

We aim to provide the highest standard of service to every customer. If **our** service does not meet **your** expectations, **we** want to hear about it so **we** can try to put things right. All complaints **we** receive are taken seriously. The following will help **us** understand **your** concerns and give **you** a fair response.

1. Does your complaint relate to a claim?

- a) In the first instance, please contact:

The Complaints Officer
Claims Settlement Agencies,
308-314 London Road,
Hadleigh,
Benfleet,
Essex
SS7 2DD
United Kingdom

Email: info@csal.co.uk

Tel: 01702 553443

When **you** make contact please provide the following information:

- **Your** name, address and postcode, telephone number and e-mail address (if **you** have one)
- **Your** policy and/or claim number, and the type of policy **you** hold
- The reason for **your** complaint.

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

If **we** are unable to resolve **your** complaint immediately, **we** will send **you** a written acknowledgement within two (2) days of receipt. **We** will then investigate **your** complaint and, in most cases, send **you** a full response in writing within two (2) weeks of receipt.

In exceptional cases, where **we** are unable to complete **our** investigations within two (2) weeks, **we** will send **you** a full written response as soon as **we** can, and in any event within four (4) weeks of receipt of **your** complaint.

- b) If **you** are dissatisfied with **our** response, then **you** can raise the matter with the Financial Services and Pensions Ombudsman (FSPO), an independent body that adjudicates on complaints, at the following address:

Financial Services and Pensions Ombudsman
Lincoln House
Lincoln Place
Dublin 2
D02 VH29

Telephone: +353 1 567 7000

Email: info@fspoi.ie

Website: www.fspoi.ie

2. Does your complaint relate to your policy?

a) In the first instance, please contact:

Direct Travel Insurance,
Digital House,
Threshelfords Business Centre,
Feering,
Kelvedon,
Colchester,
Essex
CO5 9SE.

Tel: 0330 880 3600

Email: enquiries@direct-travel.co.uk

When **you** make contact please provide the following information:

- **Your** name, address and postcode, telephone number and e-mail address (if **you** have one).
- **Your** policy number and the type of policy **you** hold.
- The reason for **your** complaint.

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

If **we** are unable to resolve **your** complaint immediately, **we** will send **you** a written acknowledgement within two (2) days of receipt. **We** will then investigate **your** complaint and, in most cases, send **you** a full response in writing within two (2) weeks of receipt.

In exceptional cases, where **we** are unable to complete **our** investigations within two (2) weeks, **we** will send **you** a full written response as soon as **we** can, and in any event within four (4) weeks of receipt of **your** complaint.

b) If **you** are dissatisfied with **our** response, then **you** can raise the matter with the Financial Ombudsman Service (FOS).

The FOS is an independent body that arbitrates on complaints about general insurance products. **You** have six (6) months from the date of **our** final response to refer **your** complaint to the FOS.

If **we** cannot resolve **your** complaint, **you** may refer it to Financial Ombudsman Service (FOS) at the following address:

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: 0800 023 4567 – From **UK** Landline

Telephone: 0300 123 9123 – From **UK** Mobile

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

Website: www.financial-ombudsman.org.uk

If **you** purchased **your** policy online, **you** are also able to use the EC On-line Dispute Resolution (ODR) platform at <http://ec.europa.eu/consumers/odr/> who will notify the Financial Services and Pensions Ombudsman on **your** behalf.

Please note: This can only be used for complaints about purchases made online.

Complaints about non-insured events and **your** travel arrangements must be referred to **your** travel organiser.

Making a complaint does not affect **your** right to take legal action.

General definitions

Wherever the following words or phrases appear in the policy wording they will always have the meanings shown under them. Please also refer to the section details on pages 33 and 34 for further definitions.

Business associate

Any employee whose level of responsibility in the business is such that if both **you** and they were absent from the business for a period of five (5) full working days or more this would have a detrimental impact on the running of the business.

Change in health

Any deterioration or change in **your** health between the date the policy was purchased and the date of travel, this includes, new medication, change in regular medication, deterioration of a previously stable condition, referral to a specialist, investigation of an undiagnosed condition or awaiting treatment/consultation.

Child/Children

A person who is 17 years of age or under.

Coronavirus (Covid-19)

Coronavirus disease (Covid-19), including any related and/or similar conditions howsoever called, or any mutation of these.

Cruise

A voyage on a ship/vessel sailing on the seas or oceans that includes stopping at various ports.

Doctor

A registered medical practitioner who is not **you** or related to **you**, who is currently registered with the General Medical Council in the **United Kingdom** (or foreign equivalent) to practice medicine.

Existing medical condition(s)

Any serious or ongoing or recurring **medical condition(s)** which have been previously diagnosed or been investigated or treated in any way, at any time prior to travel, even if this condition is currently considered to be stable and under control.

Epidemic

A widespread occurrence of an infectious disease in a community at a particular time.

Home

An **insured person's** usual place of residence within the **United Kingdom**.

Insured person

The person or persons shown on the **policy certificate**.

Information technology system

Any computer, hardware, software, information technology and communications system or electronic device, including any associated input, output or data storage device, networking equipment or back up facility.

Manual labour

Work involving physical labour (which does not include office and clerical work, bar and restaurant work, music performance and singing, or fruit picking which does not involve machinery).

Medical condition(s)

Any disease, illness or injury, including any psychological conditions.

Natural catastrophe

Volcanic eruption, **flood**, tsunami, earthquake, landslide, hurricane, tornado or wildfire.

Pair or set of items

Items of personal property which are substantially the same, complementary or designed to be used together.

Pandemic

An **epidemic** that has spread across a large region.

Parent

A person with parental responsibility including a legal guardian acting in that capacity.

Partner

A person who is either an **insured person's** husband or wife, civil **partner**, fiancé or fiancée, boyfriend or girlfriend and who permanently lives at the same address and has done so for a minimum of 6 continuous months before the **trip** is booked and before the **trip** commences.

Period of cover

As defined in the **policy certificate**.

Policyholder

The person who has paid for this policy and is shown on the **policy certificate**.

Policy certificate

The document showing details of the cover and which should be read with this policy wording.

Public transport

A bus, coach, ferry, sea-vessel or train operating according to a published timetable.

Relative

Husband or wife (or **partner** with whom **you** are living at the same address), **parent**, **step-parent**, grandparent, parent-in-law, brother, sister, step-brother, step-sister, **child**, grandchild, brother-in-law, sister-in-law, son-in-law, daughter-in-law or fiancé(e) or next of kin.

Terrorism

An act(s), including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or governments, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear.

Trip

Your holiday or journey starting from the time that **you** leave **your home** in the **United Kingdom** or from the start date shown on **your policy certificate**, whichever is the later, until arrival back at **your home** address in the **United Kingdom**.

Unattended

When **you** do not have full view of **your** property or where **you** are not in a position to prevent the unauthorised taking of **your** property unless it is left in a locked room or a locked safety deposit facility. Property left in a motor vehicle is considered to be **unattended** even when the motor vehicle is locked and the property is out of view in an enclosed storage compartment, boot or luggage space.

United Kingdom

England, Scotland, Wales, Northern Ireland and the Isle of Man.

Utilisation of Nuclear, Chemical or Biological weapons of mass destruction

The use of any explosive nuclear weapon or device; or the emission, discharge, dispersal, release or escape of: fissile material emitting a level of radioactivity, or any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesised toxins), or any solid, liquid or gaseous chemical compound which, when suitably distributed; which is capable of causing incapacitating disablement or death amongst people or animals.

Valuables and electronic/other equipment

Photographic, audio, video, electronic, electrical equipment (including cds, dvds, video and audio tapes and electronic games), MP3 players, computer equipment (but not mobile or smart phones or tablet computers), binoculars, antiques, jewellery, watches, furs, silks, precious stones and articles made of or containing gold, silver or precious metals.

War

Military action, either between nations or resulting from civil war or revolution.

We, us, our

Chaucer Insurance Company DAC.

You, your, yourself

An **insured person**

General conditions

The following conditions apply to all sections of this insurance.

1. **You** must tell **us** if **you** know about anything which may affect **our** decision to accept **your** insurance (for example, if **you** are planning to take part in a dangerous activity while **you** are on holiday).
2. **You** must comply with the 'Important conditions relating to health' and '**Change in health**' on page 6, 7 and 8.
3. **You** must take all reasonable steps to avoid or reduce any loss which may mean that **you** have to make a claim under this insurance. (For example, if **you** receive hospital treatment in a European Union country, **you** should produce **your** European Health Insurance Card (EHIC), if **you** have one).
4. **You** must give Claims Settlement Agencies all the documents they need to deal with any claim. **You** will be responsible for the costs involved in doing this. For example, in the event of a cancellation claim **you** will need to supply proof that **you** were unable to travel, such as a medical certificate completed by **your** doctor.
5. **You** must help **us** get back any money that **we** have paid from anyone or from other insurers (including the Department for Work and Pensions) by giving **us** all the details **we** need and by filling in any forms.
6. This insurance policy will only respond to claims for irrecoverable losses once those principally responsible for reimbursing the cost have been exhausted. For example transport and accommodation costs – **You** should, in the first instance, contact **your** tour operator, airline, accommodation provider, credit or debit card providers to source a refund, as in most instances, either as a result of the Package Travel & Linked Arrangement Regulations 2018; EU Transport Regulations; Consumer Credit Act; or Debit card charge backs, a refund is legally due.
7. Any fraud, deliberate mis-statement or hiding of information in connection with the application for this policy or when making a claim will make this policy invalid for the **insured person** who has committed the fraud, deliberate mis-statement or hid information. In this event, any benefit due to the **insured person** who has committed the fraud, deliberate mis-statement or hiding of information under this policy will be forfeited and any benefit that has previously been paid to them must be repaid to **us** in full. **We** will also under such circumstances not refund any premium paid on behalf of the **insured person** who has committed the fraud, deliberate mis-statement or hiding of information.
8. The **insured person** must give **us** permission to obtain any medical reports or records needed from any **doctor** who has treated the **insured person**; otherwise **we** may not pay any claim.
9. **We** may ask the **insured person** to attend one or more medical examinations. If **we** do, **we** will pay the cost of the examination(s) and for any medical reports and records and the **insured person's** reasonable travelling expenses to attend (and any person required to travel with them), if these expenses are agreed by **us** in advance. If the **insured person** fails to attend without reasonable cause, **we** may reject the claim.
10. If an **insured person** dies, **we** have the right to ask for a post mortem examination at **our** expense.
11. **You** must pay **us** back any amounts that **we** have paid to **you** which are not covered by the insurance. This could include any overpayments and payments which **you** are not entitled to, for example, if **your** claim for lost luggage has been paid but **your** suitcase is subsequently returned to **you** by the airline.
12. After a claim has been settled, any damaged items which **you** have sent into Claims Settlement Agencies will become **our** property.
13. This policy may not be assigned or transferred unless agreed by **us** in writing.
14. **We** will not pay any interest on any amount payable under this policy.
15. **We** will deal with claims under section G (Personal accident) in respect of accidental death as follows:
For an **insured person** is 18 years of age or over any sums payable will be made to the executor or personal representative of the deceased **insured person's** estate.
16. **We** may also contact third parties who have or who were to provide services to the **insured person** (for example, an airline, travel company or hotel) to verify the information provided.
17. Only the **policyholder**, an **insured person** (or their executor or personal representative in the event of the **death** of an **insured person**) or **us** may enforce the terms of this policy.
18. All claims must be notified as soon as is reasonably practical after the event which causes the claim. Failure to do so may result in **our** rejection of the claim if it is made so long after the event that **we** are unable to investigate it fully or may result in **you** not receiving the full amount claimed for if the amount claimed is increased as a result of the delay.

19. Several Liability Notice. The subscribing (re)insurers' obligations under contracts of (re)insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing (re)insurers are not responsible for the subscription of any co-subscribing (re)insurer who for any reason does not satisfy all or part of its obligations.

General exclusions

General exclusions apply to all sections of this policy. In addition to these General exclusions, please also refer to 'What you are not covered for' under each policy section and 'Important conditions relating to health' on pages 6, 7 and 8, as these set out further exclusions which apply to certain sections.

We will not cover the following:

1. Any claim arising as a direct or indirect result of an **existing medical condition(s)** of a non-travelling **relative, business associate** or friend living abroad who **you** had planned to stay with, or any known or recognised complication of or caused by the **existing medical condition(s)**.
2. **You** are travelling with the purpose of receiving medical treatment abroad.
3. Any claim arising from **you** acting in a way which goes against the advice of a **doctor**, or **you** travelling against the advice of **doctor** or where **you** would have been if **you** had sought their advice before beginning **your trip**.
4. Any claim relating to an incident or circumstances which were in the public domain or **you** were aware of, at the time **you** purchased this insurance, or at the time of booking any **trip**, which could reasonably be expected to lead to a claim.
5. Any claim if **you** are on any official government or police database of suspected or actual terrorists, members of terrorist organisations, drug traffickers or illegal suppliers of nuclear, chemical or biological weapons.
6. Any claim arising out of **war**, hostilities or warlike operations (whether war be declared or not), civil war, invasion, revolution or any similar event.
7. Any claim arising from **terrorism** but this exclusion shall not apply to losses under Section B1 (Medical and other expenses outside of the United Kingdom), Section B2 (Hospital benefit) and Section G (Personal accident).
8. Any claim arising from civil riots, blockades, strikes or industrial action of any type (except for strikes or industrial action which were not existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**).
9. Loss or damage to any property, or any loss, expense or liability arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel or the radioactive toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of it, or being exposed to the **utilisation of nuclear, chemical or biological weapons of mass destruction**.
10. Any claim if **you** already have a more specific insurance covering this (for example, if an item **you** are claiming for under section F1 (Personal belongings and baggage) is a specified item on **your** household contents insurance policy).
11. Any loss that is insured or guaranteed by any other existing protection, specifically Package Travel Regulations, Air Passenger Rights, ATOL (including Civil Aviation Authority requirements), or ABTA protection, or from **your** credit card provider under section 75 of the Consumer Credit Act, or any other specific legislation for transport or travel providers.
12. Any costs already accepted or offered by **your** transport and/or accommodation provider, even if this is a credit note or alternative travel arrangements.
13. Any costs if **you** are unable to prove **your** financial loss.

14. Any claim arising as a result of **your** use of a two-wheeled motor vehicle unless:
 - a) as a passenger **you** wear a crash helmet and it is reasonable for **you** to believe that the driver holds a licence to drive the two-wheeled motor vehicle under the laws of the country in which the accident occurs; or
 - b) **you** are in the EU and as a rider **you** wear a crash helmet and **you** hold an appropriate UK licence which permits **you** to drive the capacity of the two-wheeled motor vehicle and **you** comply with the licencing laws of the country in which the accident occurs.

There is no cover for off-roading.

15. Any claims arising from winter sports.
16. Any claims arising from **your** use of a quad bike.
17. Any claim where **you** are not wearing a seatbelt when travelling in a motor vehicle, where a seatbelt is available.
18. Any indirect losses, costs, charges or expenses (meaning losses, costs, charges or expenses which are not listed under the headings 'What you are covered for' in sections A to K, for example, loss of earnings if **you** cannot work after **you** have been injured or the cost of replacement locks if **your** keys are stolen).
19. Any claim arising from the tour operator, airline or any other company, firm or person becoming insolvent, or being unable or unwilling to fulfil any part of their obligation to **you**.
20. Any claim arising where **you** have travelled to a specific country or to an area where, prior to **your trip** commencing, the Foreign, Commonwealth & Development Office (FCDO) have advised against all (or all but essential) travel.
21. Any claim arising from **you** being involved in any deliberate, malicious, reckless, illegal or criminal act.
22. Motor racing, rallying or vehicle racing of any kind.
23. Any claim involving **you** taking part in **manual labour**.
24. Any claim involving **you** taking part in any sport or activity unless the **policyholder** has paid the necessary premium (if applicable) to extend **your** policy to provide cover for this. Please see the Sports and activities section on page 10 of this policy wording for further details.
25. Any claim arising from:
 - **your** suicide or attempted suicide; or
 - **you** injuring **yourself** deliberately or putting **yourself** in danger (unless **you** are trying to save a human life).
26. **Your** use of drugs.
27. **Your** excessive consumption of alcohol by which **we** mean where **you** have drunk so much alcohol that a **medical practitioner** has stated that **your** alcohol consumption has caused or actively contributed to **your** injury or illness, the results of a blood test at the time of injury or illness shows that **your** blood alcohol level exceeds 0.19% that is approximately 1.5 litres of beer or four 175ml glasses of wine or a witness report of a third party that has advised that **you** have notably impaired **your** faculties and/or judgement.
28. **Your** alcohol intake whilst taking any combination of medication or drugs known (or would reasonably be suspected) to cause drowsiness, impaired vision or judgment when combined with alcohol whether such drugs are prescribed or not.
29. Any claim which is as a result of **you** having been diagnosed as suffering from acute alcohol intoxication, alcohol dependency or alcohol withdrawal.
30. Any costs which **you** would have had to or would have chosen to pay had the reason for the claim not occurred (for example, the cost of food which **you** would have paid for in any case).
31. Any claim arising as a result of **you** failing to get the inoculations and vaccinations that **you** need in relation to **your trip**.
32. Any loss, damage, liability, cost or expense caused deliberately or accidentally by:
 - i. the use of, or inability to, use any application, software, or programme in connection with any electronic equipment (for example a computer, smartphone, tablet or internet-capable electronic device);
 - ii. any computer virus;
 - iii. any computer related hoax relating to i and/or ii above.

33. Any claim arising from a **cruise** or travel on a cargo ship.
34. Flying (other than as a passenger in a fully licensed aircraft).
35. **We** shall not provide any cover or pay any claim or provide any benefit to the extent that this cover, payment of a claim or benefit would expose **us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, **United Kingdom** or the United States of America.
36. Any claim arising from **natural catastrophe**.
37. Any **trips** once **you** have to return to the **United Kingdom** under section C (Cutting your trip short) or section B1 (Medical and other expenses outside of the United Kingdom).
38. Anything shown as not covered in the **Important Conditions relating to Health** on pages 6, 7 and 8.
39. Any claim directly or indirectly related to the fear or threat of a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**.
40. Any claims directly or indirectly related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**. In the event of a conflict between this general exclusion and any other term in **your** policy terms and conditions, this general exclusion takes precedence.

This general exclusion applies to all sections of cover with the exception of Section B1 - Medical and other expenses outside of the United Kingdom, Section B2 - Expenses within the United Kingdom, Section K1 - Cancelling your trip due to Coronavirus (Covid-19) and Section K2 - Cutting your trip short due to Coronavirus (Covid-19); as long as; prior to **your trip** commencing, the Foreign, Commonwealth & Development Office (FCDO) had NOT advised against all (or all but essential) travel to **your** intended destination.

Sections of cover

Section A1 – Cancelling your trip

(See Section K1 for Coronavirus (Covid-19) cover)

What you are covered for under section A1

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for and which **you** cannot get back; and
- the cost of visas which **you** have paid for and which **you** cannot get back.

Please note: If payment has been made using frequent flyer points, avios, airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cancellation of **your trip** is necessary and unavoidable as a result of the following:

1. **You** dying, becoming seriously ill or being injured.

Please note, there is no cover if this is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**, as this is excluded - see General Exclusion 40 on page 23.

2. The death, serious illness or injury of a **relative, business associate**, a person who **you** have booked to travel with, or a **relative** or friend living abroad who **you** had planned to stay with during **your trip**.

Please note, there is no cover if this is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**, as this is excluded - see General Exclusion 40 on page 23. The incident giving rise to the claim must have been unexpected and not something **you** were aware of when **you** purchased this insurance. Please see 'Important conditions relating to health' on pages 6, 7 and 8 and the 'General exclusions' on pages 21, 22 and 23 for further details.

3. **You** being made redundant, as long as **you** had been working at **your** current place of employment for a minimum continuous period of two years, and that at the time of booking the **trip** or the date **you** purchased this insurance cover, whichever is earlier, **you** had no reason to believe that **you** would be made redundant. This cover would not apply if **you** are self-employed or accept voluntary redundancy.

4. **You** or a person who **you** have booked to travel with being called for jury service (and **you** request to postpone **your** service has been rejected) or attending court as a witness (but not as an expert witness).
5. If the police or relevant authority need **you** to stay in the **United Kingdom** after a fire, storm, burglary or vandalism to **your home** or place of business within seven (7) days before **you** planned to leave on **your trip**.
6. If **you** are a member of the armed forces or police, fire, nursing or ambulance services which results in **you** having to stay in the **United Kingdom** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.
7. If after the time **you** booked **your trip** or purchased **your** policy, whichever is later, the Foreign, Commonwealth & Development Office (FCDO) advises against all (or all but essential) travel to **your** intended destination.

Please note, there is no cover if this is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**, as this is excluded - see General Exclusion 40 on page 23.

8. If **you** become pregnant after the date **you** purchased this insurance cover (or booked **your trip** whichever is later) and **you** will be more than 26 weeks pregnant at the start of or during **your trip**. Or, if **you** become pregnant after the date **you** purchased this insurance cover and **your doctor** advises that **you** are not fit to travel due to complications in **your** pregnancy.

What you are not covered for under section A

1. The excess as shown in the table of benefits. The excess will apply for each **trip** that **you** have booked and for each **insured person**. Unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Cancelling **your trip** because of a **medical condition** or an illness related to a **medical condition** which **you** knew about and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any claim under 'What you are covered for under section A1' point 1, 2 or 7 above, that is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**.
4. **You** not wanting to travel.
5. Any extra costs resulting from **you** not telling the company with whom **you** have made **your** booking with as soon as **you** know **you** have to cancel **your trip**.
6. **You** being unable to travel due to **your** failure to obtain the passport, visa or other required documentation that **you** need for the **trip**.
7. Airport taxes and credit or debit card fees included in the cost of **your** holiday.
8. Costs that have not been incurred by or on behalf of an **insured person**.
9. Any costs **you** would have still had to pay even if **you** had not been due to travel such as time share management fees or holiday club membership fees.
10. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important condition relating to health' on pages 6, 7 and 8.

Claims evidence required for section A may include

- Proof of travel cost (confirmation invoice, travel tickets, unused excursion, tour or activity tickets).
- Cancellation invoice or letter confirming whether any refund is due.
- A medical certificate which **we** will supply for the appropriate **doctor** to complete.
- An official letter confirming: redundancy, emergency posting overseas, the need for **you** to remain in the **United Kingdom**.
- Summons for jury service.

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section B1 – Medical and other expenses outside of the United Kingdom

Please note: If you are admitted into hospital as an in-patient for more than twenty four (24) hours someone must contact the Medical Emergency Assistance Company on your behalf as soon as reasonably possible (please see the Medical and other emergencies section on page 14 for further details).

What you are covered for under section B1

We will pay up to the amount shown in the table of benefits for the necessary and reasonable costs as a result of **you** dying, becoming ill (including with symptoms of or testing positive for **Coronavirus (Covid-19)**) or being injured during **your trip**. This includes:

1. Emergency medical, surgical and hospital treatment and ambulance costs.
2. Emergency dental treatment as long as it is for the immediate relief of pain only (please see the table of benefits for details of the sum **you** are entitled to claim).
3. The cost of **your** return to the **United Kingdom** earlier than planned if approved by the Medical Emergency Assistance Company and this is deemed to be a medical necessity.
4. If **you** cannot return to the **United Kingdom** as **you** originally planned and the Medical Emergency Assistance Company agrees **your** extended stay is medically necessary, **we** will pay for:
 - Extra accommodation (room only) and travel expenses (economy class unless a higher grade of travel is confirmed as medically necessary and authorised by the Medical Emergency Assistance Company) to allow **you** to return to the **United Kingdom**. A maximum amount of £2,000 per **insured person** applies if **you** have to extend **your trip** because **you** have tested positive for **Coronavirus (Covid-19)**; and
 - Extra accommodation (room only) for someone to stay with **you** and travel **home** with **you** if this is necessary due to medical advice; or
 - Reasonable expenses for one **relative** or friend to travel from the **United Kingdom** to stay with **you** (room only) and travel **home** with **you** if this is necessary due to medical advice.
5. Up to £5,000 for the cost of returning **your** body or ashes to the **United Kingdom** or up to £2,000 for the cost of the funeral and burial expenses in the country in which **you** die if this is outside the **United Kingdom**.

Please note: In the event of **your** injury or illness **we** reserve the right to relocate **you** from one hospital to another and/or arrange for **your** repatriation to the **United Kingdom** at any time during the **trip**. **We** will do this if in the opinion of the **doctor** in attendance or the Medical Emergency Assistance Company **you** can be moved safely and/ or travel safely to the **United Kingdom** to continue treatment.

If the claim relates to **your** return travel to the **United Kingdom** and **you** do not hold a return ticket, **we** will deduct from **your** claim an amount equal to **your** original carrier's published one-way airfare (based on the same class of travel as that paid by **you** for **your** outward **trip**) for the route used for **your** return.

What you are not covered for under section B1

1. The excess as shown in the table of benefits for each **insured person** and for each incident unless **you** have purchased excess waiver and this is shown on **your policy certificate**. The excess will be reduced to nil if **your** medical expenses have been reduced by **you** using the European Health Insurance Card, Medicare or equivalent schemes (please refer to the 'Health agreements' section on page 9 for further details).
2. Any medical treatment that **you** receive because of a **medical condition** or an illness related to a **medical condition** which **you** knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any treatment or costs incurred in the **United Kingdom**.
4. Any costs relating to pregnancy or childbirth, if **you** are more than 26 weeks pregnant at the start of or during **your trip**.
5. Any treatment or surgery which the Medical Emergency Assistance Company thinks is not immediately necessary and can wait until **you** return to the **United Kingdom**. The decision of the Medical Emergency Assistance Company is final.

6. In-patient or private treatment which has not been notified as soon as possible to and agreed by **us** or the Medical Emergency Assistance Company.
7. The extra cost of a single or private hospital room unless this is medically necessary and authorised by the Medical Emergency Assistance Company.
8. Treatment in a private hospital or private clinic where suitable state facilities are available.
9. Any costs of **Coronavirus (Covid-19)** testing, unless **you** are admitted to hospital as an in-patient as a result of an accident or illness that is covered under section B1 (Medical and other expenses outside of the United Kingdom).
10. Any search and rescue costs (costs charged to **you** by a government, regulated authority or private organisation connected with finding and rescuing **you**. This does not include medical evacuation costs by the most appropriate transport).
11. Any costs for the following:
 - telephone calls (other than the first call to the Medical Emergency Assistance Company to notify them of the medical problem);
 - taxi fares (unless a taxi is being used in place of an ambulance to take **you** to or from a hospital); or
 - food and drink expenses (unless these form part of **your** hospital costs if **you** are kept as an in-patient).
12. Any costs **you** have to pay when **you** have refused to come back to the **United Kingdom** and the Medical Emergency Assistance Company considered **you** were fit to return **home**.
13. Any treatment or medication of any kind that **you** receive after **you** return to the **United Kingdom**.
14. If **you** become injured or die as a result of a **winter sports** activity.
15. Treatment in a private hospital or private clinic unless authorised and agreed by **us**.
16. Damage to dentures.
17. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on page 6, 7 and 8.

Section B2 – Hospital benefit

Please note: This section does not apply to trips taken within the United Kingdom.

What you are covered for under section B2

We will pay up to the amount shown in the table of benefits if, as a result of an accident or illness that is covered under section B1 (Medical and other expenses outside of the United Kingdom) of this insurance, **you** go into hospital as an in-patient. **We** will pay a benefit for each complete twenty four (24) hour period that **you** are kept as an in-patient.

Please note: This benefit is only payable for the time that **you** are kept as an in-patient abroad and ceases if **you** go into hospital upon **your** return to the **United Kingdom**. This amount is meant to help **you** pay any extra expenses such as taxi fares and phone calls.

What you are not covered for under section B2

1. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on pages 6, 7 and 8.

Section B3 – Mugging benefit

Please note: This section only applies if you have purchased an Essential Plus policy.

What you are covered for under section B3

We will pay up to the amount shown in the table of benefits if **you** are injured as a result of a mugging and **you** go into hospital overseas as an in-patient for more than twenty four (24) hours. A mugging is a violent, unprovoked attack by someone not insured on this policy which results in physical bodily harm, as shown in the police report.

Please note: **You** must report the incident to the local police within twenty four (24) hours of the attack and get a written police report. Payment under this section is in addition to the benefit payable under section B3 (Hospital benefit).

What you are not covered for under section B3

1. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on pages 6, 7 and 8.

Claims evidence required for sections B1 to B3 may include

- Proof of travel (confirmation invoice, traveltickets).
- Invoices and receipts for **your** expenses.
- Proof of **your** hospital admission and discharge dates and times (for claims under sections B3).
- A police report to confirm the incident (for claims under section B3 only).

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section C – Cutting your trip short

(See Section K2 for Coronavirus (Covid-19) cover)

Please note: If you need to return home to the United Kingdom earlier than planned, you must contact the Medical Emergency Assistance Company as soon as reasonably possible (please see the Medical and other emergencies section on page 14 for further details).

What you are covered for under section C

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for either before **you** left the United Kingdom or those paid for locally upon arrival at **your** holiday destination and which **you** cannot get back; and
- reasonable additional travel costs to return back to the United Kingdom (or costs to return home if **your** trip is within the United Kingdom) if it is necessary and unavoidable for **you** to cut short **your** trip.

Please note: If payment has been made using frequent flyer points, avios airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of **your** trip is necessary and unavoidable as a result of the following:

1. **You** dying, becoming seriously ill or being injured.

Please note, there is no cover if this is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**, as this is excluded - see General Exclusion 40 on page 23.

2. The death, serious illness or injury of a **relative, business associate**, a person who **you** are travelling with, or a **relative** or friend living abroad who **you** had planned to stay with during **your trip**.

Please note, there is no cover if this is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**, as this is excluded - see General Exclusion 40 on page 23.

The incident giving rise to the claim must have been unexpected and not something **you** were aware of when **you** purchased this insurance. Please see 'Important conditions relating to health' on pages 6, 7 and 8 and the 'General exclusions' on pages 21, 22 and 23.

3. **Your** inability to use, or participate in, pre-paid activities, excursions or tours due to **you** becoming temporarily ill or injured during **your trip**.
4. If the police or relevant authority need **you** to return to **your home** in the **United Kingdom** after a fire, storm, burglary or vandalism to **your home** or place of business.
5. If **you** are a member of the armed forces, police, fire, nursing or ambulance services which results in **you** having to return to **your home** in the **United Kingdom** due to an unforeseen emergency or if **you** are posted overseas unexpectedly.

Please note: We will calculate claims for cutting short **your trip** from the day **you** return to the **United Kingdom** begins or the day **you** go into hospital overseas as an in-patient. **Your** claim will be based on the number of complete days **you** have not used.

What you are not covered for under section C

1. The excess as shown in the table of benefits for each **insured person** and for each incident, unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Cutting short **your trip** because of a **medical condition** or an illness related to a **medical condition** which **you** knew about at the time of purchasing this insurance and / or at the time of commencing travel and which could reasonably be expected to lead to a claim unless declared to **us** and accepted for cover in writing.
3. Any claim under 'What you are covered for under section C' point 1 or 2 above, that is related to a **pandemic** and/or **epidemic**, including but not limited to **Coronavirus (Covid-19)**.
4. Any claims where the Medical Emergency Assistance Company have not been contacted to authorise **your** early return back to the **United Kingdom**.
5. Any additional expenses incurred should **you** decide to travel to any destination other than the **United Kingdom** in the event of cutting short **your trip**. If **you** have to cut short **your trip** and **you** do not return to the **United Kingdom** we will only be liable for the equivalent costs which **you** would have incurred had **you** returned to the **United Kingdom**.
6. **You** being unable to continue with **your** travel due to **your** failure to obtain the passport or visa **you** need for the **trip**.
7. The cost of **your** intended return travel to the **United Kingdom** if **we** have paid additional travel costs for **you** to cut short **your trip**.
8. Costs where **your** inability to use pre-paid activities, excursions, or tours due to temporarily illness or injury is not verified in writing by **your** treating **doctor**.
9. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on pages 6, 7 and 8.

Claims evidence required for section C may include

- Proof of travel cost (confirmation invoice, flight tickets).
- Invoices and receipts for **your** expenses.
- An official letter confirming: the need for **your** return to the **United Kingdom**, emergency posting overseas.
- An official letter from **your** treating **doctor** to confirm **your** temporary illness or injury.

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section D1 – Missed departure

Please note: This section only applies if you have purchased an Essential Plus policy.

This section does not apply to trips taken solely within the United Kingdom.

What you are covered for under section D1

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation **you** incur to reach **your** booked holiday destination if **you** cannot reach the final international departure point on the outward or return journey from or to the **United Kingdom** because:

- **public transport** services fail due to poor weather conditions (but not including weather conditions defined as **natural catastrophe**), a strike, industrial action or mechanical breakdown; or
- the vehicle in which **you** are travelling is directly involved in an accident or suffers a mechanical breakdown (this would not include **your** vehicle running out of fuel, oil or water or suffering a flat tyre, puncture or flat battery).

Claims evidence required for sections D may include

- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- An official letter confirming the reason for **your** late arrival and the length of the delay

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section D2 – Missed connection

Please note: This section only applies if you have purchased an Essential Plus policy.

This section does not apply to trips taken solely within the United Kingdom.

What you are covered for under section D2

We will pay up to the amount shown in the table of benefits for the reasonable extra costs of travel and accommodation **you** incur to enable **you** to continue with **your** pre-booked journey in accordance with **your** itinerary should **you** miss a flight connection due to:

- The airline with whom **you** are booked to travel being unable to deliver **you** in sufficient time to **your** connecting airport to meet **your** connecting flight due to poor weather conditions (but not including weather conditions defined as **natural catastrophe**), a strike, industrial action or mechanical breakdown.

What you are not covered for under sections D1 and D2

1. The excess as shown in the table of benefits for each **insured person** and for each incident unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Any claims arising due to a **natural catastrophe** or volcanic ash carried by the wind.
3. Any claims where **you** have not allowed enough time to reach **your** initial departure point or check in, at or before the recommended time.
4. Any claims where **you** have not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.
5. Any claims relating to **your** own vehicle suffering a mechanical breakdown if **you** are unable to provide evidence that the vehicle was properly serviced and maintained and that any recovery or repair was made by a recognised breakdown organisation.
6. Claims arising from strike or industrial action if the strike or industrial action was existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
7. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Claims evidence required for sections D2 may include

- Proof of travel cost (confirmation invoice, flight tickets).
- Invoices and receipts for **your** expenses.
- An official letter confirming the reason for **your** late arrival and the length of the delay.

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section E – Abandoning your trip

What you are covered for under section E

We will pay up to the amount shown in the table of benefits for the following costs which **you** have already paid for and cannot get back:

- travel and accommodation expenses;
- excursions, tours and activities; and
- visas.

If it is necessary for **you** to cancel **your trip** if **your** final international departure from the **United Kingdom** by aircraft, sea vessel, coach or train is delayed for more than twenty four (24) hours due to poor weather conditions (but not including weather conditions defined as **natural catastrophe**), a strike, industrial action or mechanical breakdown.

Please note: If payment has been made using frequent flyer points, avios, airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

What you are not covered for under sections E

1. The excess as shown in the table of benefits for each **insured person** and for each incident **unless you** have purchased an excess waiver and this is shown on **your policy certificate**.
2. Any claims arising due to a **natural catastrophe** or volcanic ash carried by the wind.
3. Any claims where **you** have not checked in for **your trip** at the final international departure point at or before the recommended time. (However, if **you** are unable to check in, **you** may still be eligible to make a claim dependent upon the circumstances which have prevented **you** from checking in. Please contact Claims Settlement Agencies to discuss **your** circumstances and to obtain a claim form so **your** claim can be considered).
4. Any claims where **you** have not obtained written confirmation from the appropriate transport company or authority stating the reason for the delay and how long the delay lasted.
5. Claims arising from strike or industrial action if the strike or industrial action was existing or publicly announced by the date **you** purchased this insurance or at the time of booking any **trip**.
6. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Claims evidence required for sections E may include

- Proof of travel (confirmation invoice, flight tickets).
- An official letter confirming the cause and length of the delay.
- Official confirmation that **your** pre-paid expenses cannot be refunded.

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section F1 – Personal belongings and baggage

What you are covered for under section F1

We will pay for items which are usually carried or worn by **you** for **your** individual use during a **trip**. We will pay up to the amount shown in the table of benefits for items owned (not borrowed or rented) by **you** which are lost, stolen or damaged during **your trip**.

Please note:

- Payment will be based on the value of the property at the time it was lost, stolen or damaged. A deduction will be made for wear, tear and loss of value depending on the age of the property.
- The maximum amount **we** will pay for any one item, **pair or set of items** is shown in the table of benefits. Please refer to the definition of **'pair or set of items'** on page 18.
- The maximum amount **we** will pay for **valuables and electronic/other equipment** in total is shown in the table of benefits. Please refer to the definition of **'valuables and electronic/other equipment'** on page 19.

The maximum **we** will pay for property which is lost or stolen from an **unattended** motor vehicle is £100 for each **insured person** if the property was kept in a locked boot, a locked and covered luggage compartment or a locked glove compartment and there was evidence of forced and violent entry to the vehicle.

Section F2 – Delayed baggage

Please note: No cover is provided under this section if you have purchased a Budget policy.

What you are covered for under section F2

We will pay up to the amount shown in the table of benefits for buying essential items if **your** baggage is delayed in reaching **you** on **your** outward international journey for more than twelve (12) hours.

Please note: You must get written confirmation of the length of the delay from the appropriate airline or transport company and **you** must keep all receipts for the essential items **you** buy.

If **your** baggage is permanently lost **we** will deduct any payment **we** make for delayed baggage from the payment **we** make for **your** overall claim for baggage.

Section F3 – Personal money

What you are covered for under section F3

We will pay up to the amount shown in the table of benefits for the loss or theft of the following if **you** can provide evidence **you** owned them and provide evidence of their value (this would include receipts, bank statements or cash- withdrawal slips):

- Cash; and
- Travellers cheques (if these cannot be refunded by the provider).

Please note: The maximum amount **we** will pay for cash carried by one **insured person**, whether jointly owned or not, is the cash limit as shown in the table of benefits.

Section F4 – Passport and travel documents

What you are covered for under section F4

We will pay up to the amount shown in the table of benefits for the cost of replacing the following items belonging to **you** if they are lost, stolen or damaged during **your trip**:

- Passport;
- Travel tickets; and
- Visas.

Please note: The cost of replacing **your** passport includes the necessary and reasonable costs **you** pay overseas associated with getting a replacement passport to allow **you** to return back to the **United Kingdom** (this would include travel costs to the Consulate as well as the cost of the emergency passport itself). A claim for the lost or stolen passport would be calculated according to its expiry date - depending upon how many years there were left to run on the original passport, an unused proportionate refund would be made of its original value.

What you are not covered for under sections F1, F2, F3 and F4

1. The excess as shown in the table of benefits for each **insured person** and for each incident (this does not apply if **you** are claiming under section F2 or section F4) unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Property **you** leave **unattended** in a public place.
3. Any claim for loss or theft to personal belongings and baggage, personal money or passports and travel documents which **you** do not report to the police within twenty four (24) hours of discovering it and which **you** do not get a written police report for.
4. Any claim for loss, theft, damage or delay to personal belongings and baggage which **you** do not report to the relevant airline or transport company within twenty four (24) hours of discovering it and which **you** do not get a written report for. In the case of an airline, a property irregularity report will be required from the airline. If the loss, theft or damage to **your** property is only noticed after **you** have left the airport, **you** must contact the airline in writing with full details of the incident within seven (7) days of leaving the airport and get a written report from them.
5. Any loss or theft of **your** passport which **you** do not report to the consular representative of **your home** country within twenty four (24) hours of discovering it and get a written report for.
6. Any loss, theft or damage to **valuables and electronic/other equipment** which **you** do not carry in **your** hand luggage while **you** are travelling on **public transport** or on an aircraft.
7. Money, passports and travel documents which **you** do not carry with **you** unless they are being held in a locked safety deposit facility.
8. Claims arising due to an authorised person fraudulently using **your** credit or debit cards.
9. Claims where **you** are unable to provide receipts or other reasonable proof of ownership wherever possible for the items being claimed.
10. Breakage of fragile objects or breakage of sports equipment while being used.
11. Damage due to scratching or denting unless the item has become unusable as a result of this.
12. Loss due to variations in exchangerates.
13. If **your** property is delayed or detained by Customs, the police or other officials.
14. Loss of jewellery (other than wedding rings) while swimming or taking part in sports and activities.
15. Losses caused by mechanical or electrical breakdown or damage caused by leaking powder or fluid carried within **your** baggage.
16. Loss, theft or damage to mobile phones (including smart phones and tablet computers), contact or corneal lenses, sunglasses, prescription glasses or spectacles, dentures, hearing aids, artificial limbs, paintings, household equipment, bicycles and their accessories, motor vehicles and their accessories (this would include keys), marine craft and equipment or items of a perishable nature (meaning items that can decay or rot and will not last for long, for example, food).
17. Any claim for loss, theft, damage or delay to **winter sports equipment** or **golf equipment**.
18. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Important information:

- **You** must act in a reasonable way to look after **your** property as if uninsured and not leave it **unattended** or unsecured in a public place;
- **You** must carry **valuables and electronic/other equipment** and money with **you** when **you** are travelling. When **you** are not travelling, keep **your** money, passport, **valuables and electronic/other equipment** with **you** at all times or leave them in a locked safety deposit box;
- **You** must report all losses, thefts or delays to the relevant authorities and obtain a written report from them within twenty four (24) hours of the incident; and
- **You** must provide Claims Settlement Agencies with all the documents they need to deal with **your** claim, including a police report, a property irregularity report, receipts for the items being claimed as applicable.

Claims evidence required for sections F1 to F4 may include

- Loss or theft of property or money - police report.
- Loss, theft or damage by an airline - property irregularity report, flight tickets and baggage check tags.
- Delay by an airline - written confirmation of the length of delay from the airline, flight tickets, baggage check tags, receipts for emergency purchases.
- Loss or theft of a passport - police report, consular report, receipts for additional expenses to get a replacement passport overseas.
- Proof of value and ownership for property and money.

Please note: If **you** are unable to provide any of the reports referred to above, **you** may still be eligible to make a claim dependent upon the circumstances which have prevented **you** from obtaining the necessary documentation. Please contact Claims Settlement Agencies to discuss why **you** have been unable to obtain the relevant reports and to obtain a claim form so **your** claim can be considered.

Section G – Personal accident

Special definitions relating to this section

Accident

A sudden, unexpected and specific event, external to the body, which occurs at an identifiable time and place.

Loss of limb

- a) In the case of a lower limb, loss by physical severance at or above the ankle, or
- b) Permanent and total loss of and/or total and irrecoverable loss of use of an entire leg or foot which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement, or
- c) In the case of an upper limb, loss by physical severance of the entire four fingers through or above the meta carpo phalangeal joints or permanent and total loss of and/or total and irrecoverable loss of use of an entire arm or hand which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement.

Loss of sight

- a) Permanent and total loss of sight in both eyes where an **insured person's** name has been added to the Register of Blind Persons on the authority of a qualified ophthalmic specialist; or
- b) Permanent and total loss of sight, if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (seeing at least three feet what an **insured person** should see at sixty feet), which lasts twelve (12) calendar months and at the expiry of that period being beyond hope of improvement.

Permanent total disablement

Irrecoverable disablement arising from accidental bodily injury, which permanently and totally incapacitates the **insured person** for a continuous period of twelve (12) months from carrying out at least two (2) of the following activities of daily living:

- a) Transfer and Mobility – the ability to move from one room to an adjoining room or from one side of a room to another or to get in and out of a bed or chair,
- b) Dressing – putting on and taking off all necessary items of clothing,
- c) Toileting – getting to and from the toilet, transferring on and off the toilet and associated personal hygiene,
- d) Eating – all tasks of getting food into the body once it has been prepared,

and at the expiry of that period being beyond hope of improvement sufficient to carry out at least three of the previously described activities of daily living ever again.

What you are covered for under section G

We will pay up to the amount shown in the table of benefits to **you** (or to **your** executors or administrators if **you** die) if **you** are involved in an **accident** during **your trip** which solely and independently of any other cause results in one or more of the following within twelve (12) months of the date of the **accident**:

- **Loss of limb** (a limb means an arm, hand, leg or foot);
- **Loss of sight**;
- **Permanent total disablement**; or
- Accidental death.

Please note: We will only pay for one personal accident benefit for each **insured person** during the **period of cover** shown on **your policy schedule**.

What you are not covered for under section G

1. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on pages 6, 7 and 8.

Claims advice for section G

- Please phone Claims Settlement Agencies on **01702 553443** to ask for advice as soon as **you** need to make a claim or see page 15, 'How to make a claim'.

Section H – Personal liability

Please note: This section does not apply to trips taken within the United Kingdom.

What you are covered for under section H

We will pay up to the total amount shown in the table of benefits if, during an insured **trip**, **you** are legally liable for accidentally:

- injuring someone; or
- damaging or losing someone else's property.

What you are not covered for under section H

1. The excess as shown in the table of benefits for each **insured person** and for each incident unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Any liability arising from an injury or loss or damage to property:
 - a. owned by **you**, a member of **your** family or household or a person **you** employ; or
 - b. in the care, custody or control of **you** or of **your** family or household or a person **you** employ (other than temporary holiday accommodation occupied but not owned by **you**).
 - c. any claim assumed by **you** under any contract or agreement unless such liability would have attached in the absence of such contract or agreement.

3. Any liability for death, disease, illness, injury, loss or damage:
 - a. to members of **your** family or household, or a person **you** employ;
 - b. arising in connection with **your** trade, profession or business;
 - c. arising in connection with a contract **you** have entered into;
 - d. arising due to **you** acting as the leader of a group taking part in an activity;
 - e. arising due to **you** owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals (other than domestic cats or dogs), firearms or weapons; or
 - f. as a result of a **winter sports** activity.
4. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Important information:

- **You** must give Claims Settlement Agencies notice of any cause for a legal claim against **you** as soon as **you** know about it, and send them any documents relating to a claim;
- **You** must help Claims Settlement Agencies and give them all the information they need to allow them to take action on **your** behalf;
- **You** must not negotiate, pay, settle, admit or deny any claim unless **you** get Claims Settlement Agencies permission in writing; and
- **We** will have complete control over any legal representatives appointed and any proceedings, and **we** will be entitled to take over and carry out in **your** name **your** defence of any claim or to prosecute for **our** own benefit any claims for indemnity, damages or otherwise against anyone else.

Claims advice for section H

- Do not admit liability, offer or promise compensation.
- Give details of **your** name, address and travel insurance.
- Take photographs and videos, and get details of witnesses if **you** can.
- Tell Claims Settlement Agencies as soon as reasonably possible about any claim that is likely to be made against **you** and send them all the documents that **you** receive see page 15, 'How to make a claim'.

Section I – Legal expenses

Please note: This section does not apply to trips within the United Kingdom.

What you are covered for under section I

We will pay up to the amount shown in the table of benefits for legal costs and expenses arising as a result of dealing with claims for compensation and damages resulting from **your** death, illness or injury during **your trip**.

What you are not covered for under section I

1. The excess as shown in the table of benefits for each **insured person** and for each incident unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Any legal costs and expenses which **we** have not agreed to accept beforehand in writing.
3. Any claim where **we** or **our** legal representative believe that an action is not likely to be successful or if **we** believe that the costs of taking action will be greater than any award.
4. The costs of making any claim against **us**, Direct Travel Insurance, **our** agents or representatives, or against any tour operator, travel agent, accommodation provider, carrier or any person who **you** have travelled with or arranged to travel with, pursuing any claim for compensation against the manufacturer, distributor or supplier of any drug, medication or medicine.

5. Any fines, penalties or damages **you** have to pay.
6. The costs of making any claim for bodily injury, loss or damage caused by or in connection with **your** trade, profession or business.
7. Any claims arising out of **you** possessing, using or living on any land or in any buildings.
8. Any claims arising out of **you** owning, possessing or using mechanically-propelled vehicles, watercraft or aircraft of any description, animals, firearms or weapons.
9. Any claim reported more than 180 days after the incident took place.
10. Any claims from **you** becoming injured or dying as a result of a **winter sports**.
11. The costs incurred in the defence against any civil claim or legal proceedings made or brought against **you**.
12. The costs incurred after **you** have not accepted an offer from a third party to settle a claim or legal proceeding where the offer is considered by all parties to be reasonable or **you** not accepting an offer from **us** to settle a claim.
13. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Important information:

- **We** will have complete control over any legal representatives appointed and any proceedings;
- **You** must follow **our** advice or that of **our** agents in handling any claim; and
- **You** must use reasonable efforts to get back all of **our** expenses where possible. **You** must pay **us** any expenses **you** do get back.

All claims or legal proceedings including any appeal against judgement resulting from the same original cause, event, or circumstance, will be regarded as one claim.

We may at **our** discretion offer to settle a claim **with you** instead of initiating or continuing any claim or legal proceedings for damages and or compensation from a third party, and any such settlement will be full and final in respect to the claim.

We may at **our** discretion offer to settle a counter-claim against **you** instead of continuing any claim or legal proceedings for damages and or compensation from a third party.

Claims advice for section I

- Please phone Claims Settlement Agencies on **01702 553443** to ask for advice as soon as **you** need to make a claim or see page 15 'How to make a claim'.

Section J – Hijack

Please note: This section only applies if you have purchased an Essential Plus policy.

What you are covered for under section J

We will pay up to the amount shown in the table of benefits if the aircraft or sea vessel in which **you** are travelling is hijacked for more than twenty four (24) hours.

Please note: You must get written confirmation from the appropriate transport company stating how long the hijack lasted.

What you are not covered for under section J

1. The excess as shown in the table of benefits for each **insured person** and for each incident unless **you** have purchased excess waiver and this is shown on **your policy certificate**.
2. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Claims evidence required for section J may include

- Proof of travel (confirmation invoice, flight tickets).
- An official letter confirming the length of the hijack.

Please note: We may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Extended cover for Coronavirus (Covid-19)

Please note: The following sections only apply if you have purchased an Essential Plus policy and this is shown on your policy certificate.

There is no cover for Sections K1 and K2 if you have selected Essential cover.

Section K1 – Cancelling your trip due to Coronavirus (Covid-19)

What you are covered for under section K1

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for and which **you** cannot get back; and
- the cost of visas which **you** have paid for and which **you** cannot get back.

Please note: If payment has been made using frequent flyer points, avios, airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cancellation of **your trip** is necessary and unavoidable, as a result of:

1. **You** testing positive for **Coronavirus (Covid-19)** within fourteen (14) days of **your trip** departure date, or
2. **You** being admitted to hospital due to testing positive for **Coronavirus (Covid-19)** since **you** purchased **your** policy.

What you are not covered for under section K1

1. The excess as shown in the table of benefits. The excess will apply for each **trip** that **you** have booked and for each **insured person**.
2. **You** not wanting to travel.
3. Any claims arising directly or indirectly from **Coronavirus (Covid-19)**:
 - a) if **you** do not have an official positive test result confirming **your** diagnosis within fourteen (14) days of **your trip** departure date, or **you** have not been admitted to hospital due to testing positive for **Coronavirus (Covid-19)** since **you** purchased **your** policy;
 - b) if **you** are advised to quarantine or **you** choose to self-isolate due to a person **you** have come into contact with having **Coronavirus (Covid-19)**;
 - c) if a medical professional advises **you** not to travel as **you** have underlying health conditions that place **you** 'at a higher risk' from **Coronavirus (Covid-19)**;
 - d) as a result of Foreign and Commonwealth Office (FCO) advice against all (or all but essential) travel to **your** intended destination;
 - e) as a result local government restrictions or directives prohibiting or restricting entry (for example, self-isolation, quarantine or lockdown measures) to **your** intended destination or on **your** return **home**;
 - f) any costs of **Coronavirus (Covid-19)** testing.
4. Any extra costs resulting from **you** not telling the company with whom **you** have made **your** booking with as soon as **you** know **you** have to cancel **your trip**.
5. Airport taxes and credit or debit card fees included in the cost of **your** holiday.

6. Costs that have not been incurred by or on behalf of an **insured person**.
7. Any costs **you** would have still had to pay even if **you** had not been due to travel such as timeshare management fees or holiday club membership fees.
8. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

Claims evidence required for section K1 may include

- Proof of travel cost (confirmation invoice, travel tickets, unused excursion, tour or activity tickets)
- Cancellation invoice or letter confirming whether any refund is due
- A medical certificate which **we** will supply for the appropriate **doctor** to complete
- **You** must provide at **your** own expense a positive official test result confirming **your** diagnosis of **Coronavirus (Covid-19)**

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Section K2 – Cutting your trip short due to Coronavirus (Covid-19)

Please note: If you need to return home to the United Kingdom earlier than planned, you must contact the Medical Emergency Assistance Company as soon as reasonably possible (please see the Medical and other emergencies section on page 14 for further details).

What you are covered for under section K2

We will pay up to the amount shown in the table of benefits for:

- travel and accommodation expenses which **you** have paid or have agreed to pay under a contract and which **you** cannot get back;
- the cost of excursions, tours and activities which **you** have paid for either before **you** left the **United Kingdom** or those paid for locally upon arrival at **your** holiday destination and which **you** cannot get back; and
- reasonable additional travel costs to return back to the **United Kingdom** (or costs to return home if **your** trip is within the **United Kingdom**) if it is necessary and unavoidable for **you** to cut short **your** trip.

Please note: If payment has been made using frequent flyer points, avios airmiles, loyalty card points or similar loyalty card schemes, settlement of **your** claim will be based upon the lowest available published flight fare for the flight originally booked if they are non-transferable.

We will provide this cover if the cutting short of **your** trip is necessary and unavoidable as a result of:

1. **You** testing positive for **Coronavirus (Covid-19)** and becoming seriously ill or dying.

Please note: **We** will calculate claims for cutting short **your** trip from the day **you** return to the **United Kingdom** begins or the day **you** go into hospital overseas as an in-patient. **Your** claim will be based on the number of complete days **you** have not used.

What you are not covered for under section K2

1. The excess as shown in the table of benefits for each **insured person** and for each incident.
2. Any claims where the Medical Emergency Assistance Company have not been contacted to authorise **your** early return back to the **United Kingdom**.
3. Any claims arising directly or indirectly from **Coronavirus (Covid-19)**:
 - a) if **you** do not have an official positive test result confirming **your** diagnosis, unless agreed by the Medical Emergency Assistance Company;
 - b) if **you** are advised to quarantine or **you** choose to self-isolate due to a person **you** have come into contact with having **Coronavirus (Covid-19)**;

- c) any costs of **Coronavirus (Covid-19)** testing unless **you** are admitted to hospital as an in-patient as a result of an accident or illness that is covered under section B1 (Medical and other expenses outside of the United Kingdom).
4. Any additional expenses incurred should **you** decide to travel to any destination other than the **United Kingdom** in the event of cutting short **your trip**. If **you** have to cut short **your trip** and **you** do not return to the **United Kingdom** **we** will only be liable for the equivalent costs which **you** would have incurred had **you** returned to the **United Kingdom**.
5. The cost of **your** intended return travel to the **United Kingdom** if **we** have paid additional travel costs for **you** to cut short **your trip**.
6. Costs where **your** inability to use pre paid activities, excursions, or tours due to temporarily illness is not verified in writing by **your** treating **doctor**.
7. Anything mentioned in 'General exclusions' on pages 21, 22 and 23.

You should also refer to 'Important conditions relating to health' on pages 6, 7 and 8.

Claims evidence required for section K2 may include

- Proof of travel cost (confirmation invoice, flight tickets)
- Invoices and receipts for **your** expenses
- **You** must provide at **your** own expense a positive official test result confirming **your** diagnosis of **Coronavirus (Covid-19)**

Please note: **We** may require other evidence to support **your** claim dependent upon the circumstances, in which case **we** will contact **you**.

Summary of important contact details

CUSTOMER SERVICE FOR EXISTING POLICYHOLDERS

Phone: 0330 880 3600 E-mail: enquiries@direct-travel.co.uk

**Phone lines are open Monday to Friday 8.30am to 6pm, Saturdays 8.30am to 5pm
and Sundays 10.00am to 3pm**

SALES – Direct Travel Insurance

Website: www.direct-travel.co.uk Phone: 0330 880 3600

**Phone lines are open Monday to Friday 8.30am to 6pm, Saturdays 8.30am to 5pm
and Sundays 10.00am to 3pm**

THE MEDICAL EMERGENCY ASSISTANCE COMPANY

Phone: +44 (0) 20 3472 2388 E-mail: operations@emergencyassistance.co.uk

Phone lines are open 24 hours a day, 7 days a week

CLAIMS SETTLEMENT AGENCIES

Address: 308-314 London Road, Hadleigh, Benfleet, Essex SS7 2DD

Phone: 01702 553443

E-mail: info@csal.co.uk

Fastest simplest way to submit a claim is by going to:

www.submitclaim.co.uk/dti



BrokerSure insurance brokers

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