

Key Features of Mortgage Life Insurance

Mortgage Life Insurance

Key features

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

This Key Features document gives you the main points of your plan. Your illustration shows what premiums you'll pay for your chosen amount of life insurance and any extra benefits chosen. Please read them so that you understand what you're buying, and then keep them with your plan documents.

This Mortgage Life Insurance plan is provided and administered by Aviva.

Its aims

- **Your plan will provide you with life cover that decreases over the term of the plan and is intended to help pay the rest of your repayment mortgage if you die.**

For an additional premium you can also choose to include:

- **Integrated Critical Illness** cover (also referred to as life and Critical Illness cover) and/or
- **Independent Critical Illness** cover (also referred to as Critical Illness cover).

Further details can be found in the section entitled 'Questions and Answers' later in this document.

- **Life cover** – pays out a lump sum if you die
- **Life and Critical Illness cover** – pays out a lump sum if you either die or are diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others.
- Alternatively, the plan will pay out if you are diagnosed as suffering from a terminal illness before the last 18 months of the plan term.
- The plan will provide cover for the period of time that you choose, subject to your age, any options included and any terms of the plan. At the end of the term the plan will end and you will get nothing back.
- The plan ends if we pay out the cash sum on death or terminal illness or if we pay under the Integrated Critical Illness cover. It continues if we pay out under Independent Critical Illness cover.
- For an additional premium you can choose either of the following which can help protect you in case you can't work because of illness or injury and suffer a loss of earnings:
 - **Mortgage Payment Protection**
This helps to pay your mortgage repayments and related costs
 - or
 - **Premium Protection**
This helps to cover the cost of your premiums for this plan.

- You can find more details in the 'What other benefits can I choose?' section.

Your commitment

- To ensure you answer all the questions on your application fully, truthfully and accurately to the best of your knowledge. Failure to do so may invalidate any future claim you may make.
- To tell us if any of the medical or other information you give us changes in the time between when you sign the application and the start of your plan. Failure to do so may result in the cover you receive being inappropriate for your revised needs and may invalidate any future claim you may make. For the purpose of Critical Illness cover or Premium Protection, when you make a claim the occupation that you are following at the time will be taken into consideration when assessing your claim.
- If you choose Mortgage Payment Protection, to tell us if you retire, change jobs or duties or become unemployed. Failure to do so may invalidate any future claim you may make.
- To pay regular monthly or yearly premiums over the plan term. If you choose reviewable Critical Illness premiums your premium may change every five years. Further details can be found in the section entitled 'More about Critical Illness cover' later in this document. If you stop paying your premiums, your cover will end 30 days from the date your last premium was due.
- To tell us if you move outside the UK, Channel Islands and Isle of Man. If you do not inform us that you have moved outside of the UK, Channel Islands or Isle of Man we will be unable to determine if your plan is still appropriate for your needs.
- You should regularly review your plan to ensure that it is still adequate for your needs. As your needs change, the level of cover you require may also change. Therefore, if you do not regularly review your plan, you may have too little cover for your needs or be paying too much for the cover that you already have. Further details can be found in the section entitled 'How flexible is it?' later in this document.

Risks

- **If you don't pay your premiums, your plan and your cover will end 30 days after the last premium was due. You'll get nothing back.**
- This plan has no cash-in value at any time.
- If you choose Critical Illness cover, we'll only pay out if you're diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. All of the conditions that we cover are described in the Plan Conditions and our 'Guide to Critical Illness Cover' booklet.
- If you've chosen reviewable Critical Illness cover we'll review your premiums every five years:
 - we may increase your premiums. We'll tell you if we're going to do this
 - there is no maximum amount that your premium can be increased by. Plans with longer terms have a greater risk of premium increases as they have more reviews and are more likely to be affected by the factors that we take into consideration when reviewing the premium
 - if you decide to cancel the plan due to increased premiums you won't get any money back. Further details can be found under the heading 'More about Critical Illness cover'.
- If you've chosen Mortgage Payment Protection cover we'll review your premium at each review date (the fifth anniversary date and every anniversary date thereafter). Further details can be found under the heading 'Mortgage Payment Protection'.
- It is vital that you answer all the questions on your application fully, truthfully and accurately and that you tell us about your medical history in full. Failure to mention something could result in your plan being inappropriate for your protection needs and may invalidate any claim you may make later.
- If you don't provide any information we ask for when making a claim, we won't pay out under the plan.
- There are some exclusions which we apply to the plan. For more information about these exclusions please see the section 'When will the plan not pay out?'
- The mortgage repayment guarantee does not apply in all circumstances. You can find details of when the guarantee does apply in the 'What is Mortgage Life Insurance?' section.

Questions and answers

What is Mortgage Life Insurance?

- It's an insurance plan designed to help cover your repayment mortgage, or just part of it.
- It provides life cover and for an additional premium you can also include Critical Illness cover.
 - **Life cover** – pays out a lump sum if you die
 - **Life and Critical Illness cover** – pays out a lump sum if you either die or are diagnosed with a critical illness that meets our plan definition and then survive for at least 14 days. We only cover the critical illnesses we define in our plan and no others.
- Alternatively, the plan will pay out if you are diagnosed as suffering from a terminal illness before the last 18 months of the plan term.
- It provides cover for the period of time that you choose, subject to your age, any options included and any terms of the plan. At the end of the term the plan will end and you will get nothing back.
- The plan provides two types of Critical Illness cover.
 - **Integrated Critical Illness cover**
This cover is linked to the amount of life cover that the plan is providing, and reduces each month in the same way in which the outstanding amount on a repayment mortgage would normally reduce.
 - **Independent Critical Illness cover**
This cover does not reduce in line with your mortgage and is not linked to the amount of life cover that the plan provides.
- If you choose Critical Illness cover your children will also be automatically covered, under the children's critical illness benefit, for the lower of £20,000 or 50% of the cover provided by the plan.
- For decreasing life insurance the cash sum is guaranteed to pay off the outstanding loan amount covered by the plan when you die, if all of the following apply:
 - the yearly loan interest rate at the time the plan is taken out is under 10%
 - the difference between the life insurance amount and the outstanding loan is due solely to a higher rate of interest being charged on the loan rather than the interest rate used in the calculation of the table of benefits in the plan schedule
 - the amount of cover at the start of the plan is at least the size of the loan (or the part of the loan the plan covers)
 - this plan does not end before your loan.This is called the repayment guarantee.

- Mortgage Payment Protection Option, if chosen, helps pay your mortgage repayments and related costs if you can't work due to illness or injury and you suffer loss of earnings. It covers up to half of your monthly earnings before deductions.
- Other income received during incapacity may affect the amount of benefit payable. You can find further details in the Plan Conditions.
- You can take out the plan on your own or with someone else. The cash sum is payable on the first claim only, unless you have taken out Independent Critical Illness cover as your plan may then continue.
- You can set up the plan with someone else as the person covered by it.
- You can take this plan out from age 16 but it can't go beyond your 76th birthday. The minimum term is three years, or six years if reviewable Critical Illness cover is chosen.
- If you choose Mortgage Payment Protection, the plan can't go beyond your 65th birthday and the minimum term is five years.
- The maximum term for Critical Illness cover is 40 years.

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

- The cash sum decreases over the term of the plan because it is intended to help pay the rest of your repayment mortgage.

How flexible is it?

- **You can make any of the following changes once the plan is a year old:**
 - **you can increase or reduce the cash sum we'll pay if a claim occurs**
 - **you can remove any of the plan options**
 - **you can attach any additional options with the exception of Premium Protection, which can only be included at the start**
 - **you can change when you pay your premiums, either monthly or yearly**
 - **You can increase or reduce the term.**

All increases and attachments of additional options (such as increasing the amount of Independent Critical Illness cover) are subject to you being in good health. You will receive the premium rates and terms and conditions available at that time.

■ Separation Option

Where the plan covers you and your partner and was accepted on our standard terms without any special terms, you can change the plan if you separate without having to provide more evidence of your health.

If one of you rearranges the mortgage in one name, or if one or both of you take out new mortgages on new houses, you can take out new plans. This can only be taken within three months of the mortgage being rearranged or a new mortgage being taken out.

Mortgage Payment Protection is not available under the new plan, even if it was included in the original plan.

■ Moving House and Home Improvement Option

If you increase your mortgage to move house or for home improvements, you can, within three months of increasing your mortgage, take out a new plan without providing more evidence of your health. There are some limits and the new plan must not have any options that were not in the original plan. You can find more information about this option in the 'Mortgage Life Insurance a plan designed to fit your life' leaflet. Please ask your financial adviser for a copy.

When does the plan pay out the cash sum?

- With the exception of the cover provided by Independent Critical Illness, the cash sum reduces broadly in line with your mortgage. We'll pay out what the plan is worth if you:
 - die during the plan term,
 - are diagnosed as suffering from a terminal illness and you aren't likely to live more than 12 months. This only applies before the last 18 months of the plan term, or
 - are diagnosed, during the plan term, as having a critical illness that meets our Plan definition (if Critical Illness cover is chosen).

■ What is Critical Illness cover?

For an extra cost you can choose one or both types of Critical Illness cover.

The maximum amount of Critical Illness cover you can have is £2,000,000. This includes any other Critical Illness cover you already have with us and/or any other provider.

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

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

Integrated Critical Illness cover

Integrated Critical Illness cover is linked to your life cover amount and provides you with Life and Critical Illness cover.

Integrated Critical Illness cover is designed to help pay off the outstanding amount of the mortgage covered by the plan. If we pay a claim for Integrated Critical Illness cover, the plan will end. This means that no further payment will be made if you die.

If you choose Integrated Critical Illness cover, the maximum amount of life cover you can have is £2,000,000.

Independent Critical Illness cover

With Independent Critical Illness you can choose the amount we'll pay out up to the limit of £2,000,000, as detailed above. This benefit is independent of your life cover. Therefore, the amount of cover stays the same throughout the plan term and can be more than the amount of the mortgage covered by the plan. This could allow you to pay off your mortgage and have some money left over for adapting your home, for example, if you become disabled. On payment of a claim, the plan will continue.

If we pay a claim for Independent Critical Illness cover, the plan will not end. This means that a further payment would be paid if you die within the plan term. If you choose Independent Critical Illness cover there is no maximum amount of life cover you can have.

Full details of the illnesses covered by the plan are available within the 'Guide to Critical Illness Cover' booklet. Please ask your financial adviser for a copy.

What are the Critical Illness premium options?

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

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

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

How will the Critical Illness premium be reviewed?

If you choose a Critical Illness plan on a reviewable basis it means that:

- we will review the part of the premium relating to this benefit prior to the fifth anniversary of the inclusion of critical illness in the plan

- your premium will not be changed in between reviews
- premiums will be reviewed in a fair and reasonable way and as a result of the review your premium may increase, decrease or remain unchanged
- there is no limit to the change in premium that could be applied to your plan at review
- we will inform you of the outcome of the review at least 60 days before we make any change to your premium.

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

- The possible impact of further medical advances
- Claims experience and the experience of the rest of the industry
- Expectation of future claims
- Investment returns
- Changes in taxation, legislation and regulation
- The early cancellation of our plans which include Critical Illness cover.

What are the options following a review?

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

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

- Accept the higher premium and maintain your level of cover
- Continue to pay the existing premium but reduce the amount of life and critical illness cover on the plan accordingly
- Reduce the amount of independent Critical Illness cover, if included in your plan (your level of life cover will remain unaffected)
- Remove the Critical Illness Cover – you will not get back any premiums you have already paid
- Cancel the plan and stop paying premiums – you will not get back any premiums you have already paid.

If you do not wish to accept the higher premiums, you must confirm your chosen option to Aviva at least 14 days prior to the five year anniversary date. Otherwise, we will assume you wish to pay the higher premium.

■ What conditions are covered by Critical Illness Cover?

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

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

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

- **Alzheimer's Disease or Pre-Senile Dementia (before age 65)** – *resulting in permanent symptoms*
- **Aorta graft surgery** – *for disease or trauma*
- **Aplastic Anaemia**
- **Bacterial Meningitis**
- **Benign Brain Tumour**
- **Blindness** – *permanent and irreversible*
- **Cancer** – *excluding less advanced cases*
- **Cardiomyopathy**
- **Coma** – *resulting in permanent symptoms*
- **Coronary artery by pass grafts** – *with surgery to divide the breastbone*
- **Creutzfeldt-Jakob Disease**
- **Deafness** – *permanent and irreversible*
- **Encephalitis**
- **Heart Attack** – *of specified severity*
- **Heart Valve replacement or repair**
- **HIV infection** – *caught in the European Union, North America, Australia or New Zealand from a blood transfusion, a physical assault or at work*
- **Kidney failure** – *requiring dialysis*
- **Liver Failure**
- **Loss of Hands or Feet** – *permanent physical severance*
- **Loss of Independent Existence**
- **Loss of Speech** – *permanent and irreversible*
- **Major Organ Transplant**
- **Motor Neurone Disease** – *resulting in permanent symptoms*
- **Multiple Sclerosis** – *with persisting symptoms*
- **Paralysis of Limbs** – *total and irreversible*
- **Parkinson's Disease before age 65** – *resulting in permanent symptoms*

- **Progressive Supranuclear Palsy**
- **Stroke** – *resulting in permanent symptoms*
- **Third Degree Burns** – *covering at least 20% of the body's surface area or covering at least 50% of the surface area of the face*
- **Total Permanent Disablement before attaining age 65**
- **Traumatic Head Injury** – *resulting in permanent symptoms*

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

Children's Benefit

When you purchase Critical Illness cover from Aviva, all of your natural, step or legally adopted children and any future children are also covered for some of the conditions listed above. Children's cover applies for children between the ages of 30 days and 18 years old on the date of diagnosis and as long as the plan is in force. The maximum we will pay for a child is £20,000 or 50% of the life insurance amount, whichever is the lower.

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

Your child(ren) will be covered for the illnesses listed above but not:

- Total Permanent Disablement (before attaining age 65).

What other benefits can I choose?

- For an extra cost you can choose either Premium Protection or Mortgage Payment Protection. To include these benefits you must be aged between 16 and 54 at the start of the plan. Your financial adviser can give you full details.

■ Premium Protection

This benefit will help to cover the cost of your premiums if you're totally disabled by illness or injury. It's not available if Mortgage Payment Protection is selected.

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

- We will not start to pay the benefit until the “deferred period” chosen by you at the start of the plan has expired. This can be a period of one, three or six months. In the event of a claim the deferred period is the time that would lapse before we started making a payment to you.
- If you’ve chosen critical illness on a reviewable premium basis, the cost of Premium Protection will change in line with each review. Please see the ‘Critical Illness premiums’ section for more information.

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

■ Mortgage Payment Protection

Mortgage Payment Protection, if chosen, helps pay your mortgage repayments and related costs if you can’t work due to illness or injury and you suffer loss of earnings. It covers up to half of your monthly earnings before deductions.

Other income received during incapacity may affect the amount of benefit payable. You can find further details in the Plan Conditions.

To claim for this benefit you must be totally disabled by illness or injury. Please ask your financial adviser for full definitions. These definitions relate to your occupation. Mortgage Payment Protection is not available if Premium Protection is selected.

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

- 150% of the mortgage payment in total for both lives taking Mortgage Payment Protection (i.e. both lives can not have 150% of their mortgage amount as Mortgage Payment Protection individually)
- 50% of the gross monthly earnings of each person covered by the Mortgage Payment Protection at the time the application is made.

Your financial adviser can give you more details.

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

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

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

■ Changes to your Mortgage Payment Protection premiums

Mortgage Payment Protection has reviewable premiums.

Which means that:

- we will review the part of the premium relating to this benefit prior to the fifth anniversary of the inclusion of Mortgage Payment Protection in the plan and then prior to every plan anniversary
- your premium will not be changed in between reviews
- premiums will be reviewed in a fair and reasonable way and as a result of the review your premium may increase, decrease or remain unchanged
- there is no limit to the change in premium that could be applied to your plan at review
- we will inform you of the outcome of the review at least 60 days before we make any change to your premium.

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

- The possible impact of further medical advances
- Claims experience and the experience of the rest of the industry
- Expectation of future claims
- Investment returns
- Changes in taxation, legislation and regulation
- The early cancellation of our plans which include Income Protection cover.

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

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

■ What are the options following a premium review?

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

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

- Accept the new premium and maintain your level of cover
- Choose to continue paying the previous amount and reduce your benefit accordingly
- Cancel your Mortgage Life Insurance plan and stop paying premiums – you will not get back any premiums you have already paid
- Remove the Mortgage Payment Protection Cover - you will not get back any premiums you have already paid.

If you do not wish to accept the higher premiums, you must confirm your chosen option to Aviva at least 14 days prior to the five year anniversary date or plan anniversary date, as applicable. Otherwise we will assume you wish to pay the higher premium.

When will the plan not pay out?

We won't pay any benefit:

- if you fail to provide medical evidence to support your claim
- if the date of birth of any person covered by the plan has been incorrectly stated and we would not have offered cover had we known the correct date of birth at the time of application
- if you did not disclose an illness or condition at the application stage, which would have had an effect on the underwriting decision we made at the start of your plan.

We won't pay out the life insurance amount:

- if a claim for terminal illness benefit or Integrated Critical Illness cover has already been accepted under the plan.

We won't pay the terminal illness benefit:

- if diagnosis of terminal illness benefit occurs within the last 18 months of the plan.

We won't pay a critical illness claim:

- if the diagnosis isn't for one of our described illnesses
- unless you tell us about your claim within 26 weeks of the diagnosis
- in respect of Total Permanent Disablement unless we receive notice of disablement within 13 weeks of the commencement of Total and Permanent Disablement
- if the cause of the claim is specifically excluded by any specific terms we apply to the plan when we

accept the application. If applicable, we will show these in the acceptance letter and plan schedule

- unless you are still alive 14 days after being diagnosed as suffering from a critical illness covered by the plan.

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

- Blindness
- Coma
- Deafness
- Loss of Hands or Feet
- Loss of Independent Existence
- Loss of Speech
- Paralysis of Limbs
- Third Degree Burns
- Total Permanent Disablement before age 65
- Traumatic Head Injury

Full details of the exclusions can be found in the Plan Conditions.

We won't pay out under the children's cover:

- if the diagnosis isn't for one of our described illnesses
- unless you tell us about your child's claim within 26 weeks of the diagnosis
- unless the child is still alive 14 days after being diagnosed as suffering from a critical illness covered by the plan
- if there is a successful claim on the main benefit within 14 days of diagnosis of the child's critical illness
- if the illness results from a condition the child had before he/she became covered by the plan.

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

- Blindness
- Coma
- Deafness
- Loss of Hands or Feet
- Loss of Independent Existence
- Loss of Speech
- Paralysis of Limbs
- Third Degree Burns
- Traumatic Head Injury

Full details of the exclusions can be found in the Plan Conditions.

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

If the amount of Critical Illness cover you have with us and/or any other provider is more than £2 million, we may refuse to offer you cover or reduce the cover we are prepared to offer you.

We won't pay benefits for Mortgage Payment

Protection:

- until the deferred period listed in the Plan Schedule has expired
- if written notice of incapacity is received more than 3 months after the incapacity started and, due to the delay, we are unable to verify there is a valid claim
- if a claim for Integrated Critical Illness cover has been paid
- unless you are under the regular supervision and treatment of a Registered Medical Practitioner in respect of your incapacity
- if the claim is due to alcohol or drug abuse or self-inflicted injury.

Full details of the exclusions can be found in the Plan Conditions.

Payment of Mortgage Payment Protection may also be affected if you travel for an extended period outside the EU, or if you are subject to a custodial sentence.

Full details of these exclusions can be found in the Plan Conditions

We won't pay benefits for Premium Protection:

- until the deferred period listed in the Plan Schedule has expired
- if written notice of incapacity is received more than 3 months after the incapacity started and, due to the delay, we are unable to verify there is a valid claim
- if the cause of the incapacity is specifically excluded in the Plan Schedule
- if the claim is due to alcohol or drug abuse, criminal acts, self-inflicted injury, or
- if you're living outside the European Union for more than 13 consecutive weeks in any 12 months.

Full details of the exclusions can be found in the Plan Conditions.

Mortgage Payment Protection and Premium Protection will end when one of the following happens:

- the plan term ends
- the person covered dies
- the incapacity ends
- the person covered no longer suffers a loss of earnings (if claiming under Mortgage Payment Protection)
- the cash sum is paid on diagnosis of a terminal illness
- the cash sum is paid on diagnosis of a critical illness, under the terms of Integrated Critical Illness cover (if chosen).

What will my premiums be?

- Your illustration shows an indication of the premium you'll need to pay for your chosen cover. This amount may change following completion of the underwriting process.
- Your premiums are based on a number of factors. These include:
 - your age
 - your sex
 - your occupation
 - your pastimes
 - whether you smoke
 - your medical history
 - the term of your plan
 - our chargesas well as:
 - the amount of cover you choose
 - the options you choose
 - the deferred period you choose for Mortgage Payment Protection and Premium Protection.
- You can pay your premiums monthly by direct debit or yearly by cheque or direct debit.
- The minimum premium is £5 a month or £50 a year.
- Remember if you choose critical illness on a reviewable premium basis your premium may increase. Please see the 'Critical Illness premiums' section for more information about how this may affect you.
- If you choose to include Mortgage Payment Protection cover in your plan, the part of your premium relating to this benefit may increase following a review. Please see the 'Changes to your Mortgage Payment Protection premiums' section for more information about how this may affect you.

What are the charges?

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

What if I stop paying?

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

What about tax?

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

Can I change my mind?

- You can change your mind within 30 days from the later of:
 - the day you are advised that the contract is concluded
 - the day you receive the contract.Your plan will continue if we don't receive your cancellation notice within the 30 days.
- If you change your mind and cancel your plan within 30 days, Aviva will give you your money back.
- The cancellation notice will include the address you must send it to if you change your mind about your plan. Alternatively, you can contact us at the address given overleaf.

How to contact us

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



Call us on **0845 9000 813**

Monday to Friday 8.30am – 5.30pm

Outside of these hours, you can use the same number and leave a message on our answerphone.

We may monitor calls to improve our service.



E-mail

helpdesk@aviva.co.uk



Office address:

Aviva

PO Box 520

Norwich

NR1 3WG

How to make a claim

- A claim can be made by contacting our Life Claims Department on 01904 723520

Other Information

How to complain

- If you ever need to complain, you can contact us at:
Aviva
Customer Relations
PO Box 3182
Norwich
NR1 3XE

Telephone number: 08000 686 800
Email: helpdesk@aviva.co.uk
- If you are not satisfied with our response, you can write to:
Financial Ombudsman Service
South Quay Plaza
183 Marsh Wall
London
E14 9SR

Telephone number: 0845 080 1800
Email: complaint.info@financial-ombudsman.org.uk

This won't affect your legal rights.

Terms and conditions

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

Please note

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

Law

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

Client classification

- The FSA has defined three categories of customer. You have been treated as a 'retail client', which means that you will be provided with the highest level of protection provided by the FSA rules and guidance.

Compensation

- Qualified advisers will recommend that you buy products suitable for your needs. You've legal rights to compensation if at any time it's decided that you've bought a plan that wasn't suitable for your needs at that time.
- The Financial Services Compensation Scheme covers your plan. It'll cover you if Aviva becomes insolvent and is unable to meet its obligations under this plan.

For this type of plan, the scheme will cover you for 90% of the total amount of an existing claim. If you are not in the process of making a valid claim or do not have a valid claim already in payment the scheme will provide a refund of 90% of the premiums that have not been used to purchase cover.

For example if you pay your premiums annually in advance and Aviva UK life were declared in default after 6 months you would be entitled to a refund to the value of 90% of half of your premium. If you pay by regular premiums you would not be entitled to a refund as the premiums paid so far would have already been used to purchase cover. For further information, see www.fscs.org.uk or telephone 020 7892 7300.

Braille, large font, audio material

You can order our literature in Braille, large font or audio.

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

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

The Customer Call Centre is open Monday to Friday, 8 am to 8 pm, and Saturday from 8.30 am to 5 pm.

Aviva Life & Pensions UK Limited. Financial Services Authority Registration No 185896.
Registered in England No 3253947. 2 Rougier Street, York, YO90 1UU.
Aviva Life & Pensions UK Limited is authorised and regulated by the Financial Services Authority.
Member of the Association of British Insurers.
www.aviva.co.uk

Aviva – the team behind  UNITED KINGDOM ATHLETICS

