



TAYSIDE POLICE FEDERATION INSURANCE SCHEME

SCHEME BENEFITS effective from 1 October 2009

Serving Member	Entry Level Scheme	Full Scheme
Life Insurance	£55,000	£110,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured	20% of sum insured
Permanent Total Disablement	£50,000	£100,000
Accidental Loss of Use Benefit		
One eye/limb/hearing in one ear	£10,000	£25,000
Two eyes/limbs/hearing in both ears	£25,000	£50,000
Hospitalisation Benefit up to 5 nights		
Accident/incident/emergency admission	£40 per night	£40 per night
Planned admission after first 3 nights	£40 per night	£40 per night
Critical Illness	£15,000	£25,000
Child Critical Illness	£3,000	£5,000
Child Death Grant	£2,000	£2,000
Red Arc Assistance	Family Cover	Family Cover
Reg 28 Sick Pay Benefit - Half Pay (for up to 26 weeks)	20% scale pay	20% scale pay
No Pay (for up to 26 weeks)	50% scale pay	50% scale pay
Legal Expenses including ID Theft Protection	Included	Included
Denplan Key Cover	Included	Included
Home Emergency Assistance	Included	Included
Family Travel Policy	Worldwide	Worldwide
CALENDAR MONTHLY SUBSCRIPTION		£30.85
Weeks of service 1-52	£Nil	
Weeks of service 53-104	£15.00	
Spouse or Cohabiting Partner of Serving Member		
Life Insurance	£27,500	£55,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured	20% of sum insured
CALENDAR MONTHLY SUBSCRIPTION		£4.00
Weeks of service 1-52	£Nil	
Weeks of service 53-104	£1.50	

RETIRED MEMBER BENEFITS with effect from 1 October 2009

Retired Member Aged Under 60

Life Insurance	£50,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Permanent Total Disablement	£10,000
Accidental Loss of Use Benefit	
One eye/limb/hearing in one ear	£5,000
Two eyes/limbs/hearing in both ears	£10,000
Critical Illness	£10,000
Child Critical Illness	£2,000
Red Arc Assistance	Family Cover
Legal Expenses including ID Theft Protection	Included
Home Emergency Assistance	Included
Denplan Key Cover	Included
Family Travel Policy	Worldwide
CALENDAR MONTHLY SUBSCRIPTION	£30.85

Retired Member Aged 60 to 64 inclusive

Life Insurance	£25,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Permanent Total Disablement	£10,000
Accidental Loss of Use Benefit	
One eye/limb/hearing in one ear	£5,000
Two eyes/limbs/hearing in both ears	£10,000
Critical Illness	£5,000
Child Critical Illness	£1,000
Red Arc Assistance	Family Cover
Legal Expenses including ID Theft Protection	Included
Home Emergency Assistance	Included
Denplan Key Cover	Included
Family Travel Policy	Worldwide
CALENDAR MONTHLY SUBSCRIPTION	£30.85

Retired Member Aged 65 to 69 inclusive

Life Insurance	£5,000
Red Arc Assistance	Family Cover
Legal Expenses including ID Theft Protection	Included
Home Emergency Assistance	Included
Denplan Key Cover	Included
Family Travel Policy	Worldwide
CALENDAR MONTHLY SUBSCRIPTION	£30.85

Spouse or Cohabiting Partner Aged under 60 of Retired Member

Life Insurance	£25,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
CALENDAR MONTHLY SUBSCRIPTION	£4.00

Spouse or Cohabiting Partner Aged 60 to 64 (inclusive) of Retired Member

Life Insurance	£12,500
Terminal Prognosis Advance on Life Insurance	20% of sum insured
CALENDAR MONTHLY SUBSCRIPTION	£4.00

Spouse or Cohabiting Partner Aged 65 to 69 (inclusive) of Retired Member

Life Insurance	£1,500
CALENDAR MONTHLY SUBSCRIPTION	£4.00

Explanation of Benefits

The benefits arranged under this insurance scheme are provided strictly under the terms of insurance policies taken out and owned by the Trustees of the scheme. Copies of the policies are available to view at the Police Federation Office. Subscription to the scheme entitles the member to the benefits provided by the scheme but confers no ownership of any of the underlying policies, which are vested in the Trustees.

Life Insurance

On death of a member or spouse/partner who are covered under the scheme the cash benefit detailed in the current benefits table becomes payable. The scheme is written in Trust so that if a member dies, the proceeds can be paid, by the Trustees, to the member's dependants quickly, free of tax and without having to wait for probate. Members should ensure that they have an up-to-date beneficiary nominated and have lodged the details with the Federation Office, to assist the Trustees in the event of a claim. If a beneficiary aged 63 or under receives a terminal prognosis of 12 months or less, they may apply to the Trustees for an advance of the death benefit of 20% of the relevant sum insured.

Permanent Total Disablement

This benefit is provided should the member suffer total permanent and irreversible disability due to accident such that the benefit member is unable to perform any gainful employment and such that the member is unable to exist independently and requires continual supervision and frequent attention of a third party for activities of daily living. Such disabilities must be established for a continuous period of twelve calendar months before the benefit can become payable.

Accidental Loss of Eye, Limb or Hearing

This benefit is payable should the Benefit Member suffer a permanent loss of sight of one or both eyes, the use of one or more limbs at or above the wrist or ankle or the permanent total loss of hearing in one or both ears. This benefit is payable only if the loss of use occurs as the result of an accident occurring during the currency of this policy.

Hospitalisation Benefit

Should a member be admitted to hospital in the UK immediately following an accident, incident or emergency, this benefit will pay £40 per night for up to 5 nights. Should a member be admitted to hospital in the UK for a planned procedure, a benefit of £40 per night will become payable after the first 3 nights for up to a further 5 nights.

Exclusions applicable to Permanent Total Disablement, Loss of Eye, Limb or Hearing and Hospitalisation Benefit

No exclusions apply due to injury incurred in the bona fide execution of police duty (including CBRN risks), whether or not the Benefit Member is formally on duty at the time. Otherwise no Benefit shall be payable under this Policy if a claim occurs directly or indirectly from any of the following causes:-

- 1) War (whether declared or not) other than civil war or any act incidental thereto
- 2) Whilst engaged as a passenger, or otherwise, in aeronautics (other than as a fare-paying passenger) or in underwater operations.
- 3) Any breach of the law by the Member.
- 4) Misuse of alcohol or drugs.
- 5) Taking part in any Hazardous Pursuit. Other than in the Bona Fide execution of police duty the following pursuits are deemed to be hazardous.
 - a) Diving or skin diving involving the use of underwater breathing apparatus.
 - b) Rock climbing or mountaineering involving the use of ropes or guides.
 - c) Potholing.
 - d) Aerial activity other than as a fare-paying passenger in a recognised airline.
 - e) Hunting on horseback.
 - f) Driving or riding in any form of race.
 - g) Bungee jumping.

Critical Illness

Serious illness can add financial worries to the emotional upset that accompanies it. This benefit provides cash in the event of a member being diagnosed with one of the listed critical illnesses and surviving for 28 days following diagnosis. No benefit will be payable for any illness where the condition or any related condition, or symptom existed before the member became insured for this benefit. Claims should be made within 90 days following diagnosis.

Child Critical Illness

This benefit is paid when a dependent child, of a member, who is aged between 6 months and 17 years attained is first diagnosed with one of the listed critical illnesses.

Child Death Grant

This benefit is paid upon the death of a child of a member, aged between 6 months and 17 years attained.

The listed illnesses are:-

- Alzheimer's Disease
- Aorta Surgery
- Benign Brain Tumour
- Cancer
- CJD
- Coma
- Coronary Artery (By-Pass) Surgery
- Heart Attack
- Heart Valve Replacement and repair
- H.I.V. (A.I.D.S.) and Hepatitis B Virus
(Contracted in a documented duty related situation or medical procedure)
- Total Loss of Hearing
- Total Loss of Sight
- Total Loss of Speech
- Major Organ Transplant
- Motor Neurone Disease
- Multiple Sclerosis
- Parkinson's Disease
- Paralysis
- Irreversible Renal Failure
- Severe Burns
- Stroke

4

Conditions applicable to Critical Illness

1. All non-invasive cancers in situ, tumours in the presence of any human immunodeficiency virus and any skin cancer other than malignant melanoma are excluded.
2. Coronary artery bypass surgery means the undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of two or more coronary arteries with bypass grafts. Balloon angioplasty, laser relief or any other procedures are excluded.
3. Aorta Surgery means the thoracic and abdominal aorta but excludes its branches.
4. Major organ transplant includes actual undergoing as a recipient of a transplant of a heart, liver, lung, pancreas or bone marrow.
5. Benign Brain Tumour is a non-cancerous tumour in the brain, which has resulted in neurological deficit for a continuous period of six months. Cysts, granulomas, malformations in, or of, the arteries or veins in the brain, haematomas and tumours in the pituitary gland or spine are specifically excluded.
6. Coma is defined as an unconsciousness, with no reaction to stimuli, continuing for at least 96 hours. Life support systems must be required throughout the period of unconsciousness.
7. Stroke is defined as any cerebrovascular incident producing neurological sequelae lasting more than 24 hours and including infarction of brain tissue, haemorrhage and embolism from an extra cranial source. Evidence of permanent neurological deficit must be produced.
8. Parkinson's Disease caused by carbon monoxide self poisoning or drug induced Parkinson's Disease is not covered under this policy.
9. Severe burns constitutes First degree burns covering at least 60% of the total body surface area or Second Degree Burns covering at least 40% of the total body surface area or Third degree burns covering at least 20% of the total body surface area.
10. Heart Attack - Death of a portion of heart muscle as a result of inadequate blood supply to the relevant area. Diagnosis will be based on all of the following criteria:-
 - a) a history of chest pain
 - b) new electrocardiographic changes
 - c) elevation of cardiac enzymes.

11. Complete and Permanent Loss of Use of two or more limbs through paralysis. Disability must be established for a continuous period of 12 months and must be supported by neurological evidence.
12. Irreversible Renal Failure relates to end stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either renal dialysis or renal transplant as a recipient is initiated.

Red Arc Assistance

RED ARC is an independent care advisory service specialising in welfare-based added value services.

The diagnosis of a serious health condition such as cancer, a heart attack, stroke or MS invariably means a worrying time for everyone close to the patient. That's the time that you need access to someone who understands your condition and has the time to listen to your concern and allay your fears. That goes for your spouse, partner and children too. Advice and counselling are also available for other conditions such as stress and disability.

The cornerstone of the RED ARC service is the personal nurse adviser - highly experienced, registered nurses who will be the focal point for you and your family and tailor the support you need to your particular circumstances.

Your personal nurse adviser will be available to you by telephone in normal business hours, and will be able to provide information and support for as long as you need it. Where appropriate, they can commission additional services such as a home visit by a specialist nurse, counselling or therapy. RED ARC also has links with many charities specialising in your particular health condition, and can often direct you to self-help groups that will help you come to terms, and cope better, with your problem. Home adaptation and special equipment to aid everyday living are other important areas where we can provide guidance.

The Red Arc service is free of charge and confidential. If you think you may be eligible you should ring RED ARC on 01273 716700 in normal business hours.

Regulation 28 Cover (Sick Pay)

In the event of the Chief Officer cutting your pay to half pay or no pay as the result of absence through sickness or injury this benefit will pay you 20% of your scale pay for up to 26 weeks when on half pay, then 50% of your scale pay for up to a further 26 weeks when on no pay. When incapacity benefit and reductions in tax, NI, and pension contributions are taken into account, the member should receive income approximately equivalent to net pay.

Conditions applicable to Regulation 28 Cover (Sick Pay)

Benefits will cease after the benefit period or on early return to work or discharge. If a Benefit Member is offered recuperative duties and a return to full pay and such duties are declined without reasonable cause, the benefit will cease. Allowances are not included.

Legal Expenses Policy Number 500018

Significant Features & Benefits	significant Exclusions or Limitations
<p>The Insurer will pay your Legal Costs & Expenses up to the Limit of Indemnity, including the cost of appeals, for claims reported during the period of insurance for the following insured Events.</p>	<p>It must always be more likely than not that the claim will be successful and it must be reported to us immediately after the Beneficiary first becomes aware that a claim has occurred. The Beneficiary always agree to use the Appointed Advisor nominated by us, prior to the issue of proceedings, or in any claim falling under the jurisdiction of the Small Claims Court</p>
<p>Legal Defence We will defend the member in respect of the following:</p> <ol style="list-style-type: none"> 1) a prosecution brought against you in a court of criminal jurisdiction 2) a civil action brought against you for compensation under section 13 of the Data Protection Act 1998 3) civil proceedings brought against you under legislation for unlawful discrimination 4) a motoring prosecution brought against you 5) a civil action brought against the Beneficiary as a trustee of a pension fund set up for the benefit of the Beneficiary's employer. <p>Cover applies to the Beneficiary (not to the Beneficiary's family).</p>	<p>We exclude any claim relating to:</p> <ol style="list-style-type: none"> 1) the defence of prosecutions not authorised by the Police Federation 2) driving without valid motor insurance 3) parking offences 4) fines, penalties, compensation or court orders
<p>Contract We will cover a dispute arising out of an agreement or alleged agreement which the Beneficiary has entered into including the buying or selling of the home.</p> <p>Cover applies to the Beneficiary and the spouse and other relatives permanently living with the Beneficiary.</p>	<p>We exclude any claim relating to:</p> <ul style="list-style-type: none"> • the letting, leasing or licensing of land or buildings where the Beneficiary acts as the landlord • loans, mortgages, endowments, pensions, or any other financial or investment product • the Beneficiary's business, venture for gain, profession or employment • a contract involving a motor vehicle • a settlement due under an insurance Policy • construction work on any land, or designing, converting or extending any building where the contract value exceeds £5,000 including VAT <p>The amount of the claim must exceed £250</p>
<p>Personal Injury We will cover an event causing the Beneficiary, or any other relative permanently living with the Beneficiary, personal injury</p>	<p>Any dispute relating to defending a claim other than defending a counter claim</p>
<p>Uninsured Loss Recovery & Injury We will cover an event causing:</p> <ol style="list-style-type: none"> 1) damage to the insured vehicle and/or personal property in or on it 2) death or personal injury to any driver or passenger whilst in or on the insured vehicle 	<p>Anyone claiming must be in or on the Beneficiary's vehicle with the Beneficiary's permission when the accident happened.</p>
<p>Employment We will cover a dispute with a current, former or prospective employer relating to the Beneficiary's contract of employment or related statutory rights.</p>	<p>Any claim solely relating to Personal Injury</p>

<p>Property We will cover a dispute relating to material property following; a) an event which causes or could cause physical damage to the Beneficiary's material property including the principal home b) A public or private nuisance or trespass</p>	The first £250 of each and every claim relating to public or private nuisance or trespass
<p>Tax We will cover: • A formal aspect or full enquiry into the Beneficiary's personal tax affairs</p>	Any claim relating to: • an investigation by the Special Investigation Section or the Special Compliance Office of HM Revenue and Customers • an investigation under the Civil Investigation of Fraud procedure • the submission of returns or accounts where the HM Revenue & Customers levy a penalty or claim for interest or which contain negligent misstatements • a tax avoidance or tax efficient scheme • a business or venture for gain of the Beneficiary
<p>Identity Theft We will cover a dispute arising from the use of personal information without the Beneficiary's permission to commit fraud or other crimes.</p>	Any claim relating to: Any money claimed, goods, choses in action, or other property or equivalent costs obtained as a result of the identity theft
<p>Representation at Public Enquiries We will cover legal costs incurred in respect of representing the Beneficiary at a public enquiry ordered by a District Auditor.</p>	
	<p>Territorial Limit In respect of Legal Defence, The United Kingdom, Channel Islands and the Isle of Man.</p> <p>In respect of all other Covers The United Kingdom, Channel Islands, the Isle of Man and countries in the European Union.</p> <p>Limit of Indemnity £100,000 is the maximum the Insurer will pay.</p> <p>Legal Costs and Expenses Cover applies for own side's costs disbursements and others sides costs where the court orders them to be paid.</p>

In addition the following 24 hour helplines are included:

For our Legal Document Max please use voucher code AFB3A2F86768

You are entitled to download legal documents from our website to assist you with day-to-day legal issues. These include a standard will, power of attorney, letting your home, consumer complaints and identity theft. Additionally, you will also have access to various law guides.

For our Legal & Tax Advice please telephone 0844 880 1764

Access to legal and tax experts 24 hours a day, 365 of the year.

For our Confidential Counselling Service please telephone 0844 477 1619

Provides support on any matter causing anxiety or upset.

Making a Claim

If you need to make a claim:

1. Under no circumstances should you instruct your own lawyer as we will not pay the costs incurred and it could invalidate your cover.
2. Please telephone 0117 917 1698 where we can either take the details over the telephone, or you can request a claims form for completion. Alternatively, you can find further details at www.arag.co.uk/newclaims.
3. Providing we accept a claim, we will arrange for a solicitor to quickly contact you with a view to progressing the case.

Denplan Key Cover

Key Dental Cover from Denplan provides the member with cover for treatment necessary as a result of a dental injury or emergency anywhere in the world.



• Worldwide dental injury

Cover for up to £2,500 of treatment per dental injury (for up to four incidents per policy year) to the teeth or supporting structures which is directly caused suddenly and unexpectedly by means of a direct external impact/blow to the mouth.

• Worldwide emergency dental treatment

In the UK: up to £200 of treatment per incident for up to four incidents per policy year. Outside the UK: up to £400 of treatment per incident for up to two incidents per policy year. A dental emergency is dental treatment provided at the initial emergency appointment urgently required for the relief of severe pain, arrest of haemorrhage, the control of acute infection or a condition which causes a severe threat to your general health. There is an overall maximum of £800 per policy year for this benefit.

• Hospital cash benefit

£50 for each night you stay overnight in hospital, up to £1000 per policy year, for dental treatment under the care of a consultant specialising in dental or maxillofacial surgery in relation to a head or neck condition.

• Dentist call-out fees

Up to £100 per incident for up to two incidents per policy year for a dentist in the UK to re-open the practice between the hours of 6.00pm and 8.00am on weekdays or weekend and bank holidays or outside the UK, outside the practice's normal working hours to provide emergency dental treatment or treatment in the event of an accidental dental injury.

• Mouth cancer cover

Up to £12,000 towards one course of treatment for up to eighteen months following diagnosis (smokers are included).

• 24 hour worldwide emergency helpline,

Access a dental emergency helpline anywhere in the world

Key Dental Cover provides you with a 24-hour dental emergency helpline to help you find a dentist anywhere in the world if you need one as a result of a dental injury or emergency. Just call 0800 7315 052 (in the UK) or +44(0)1962 844571 (outside the UK).

Receive treatment from all types of dentists

You can enjoy the benefits of Key Dental Cover whether you are treated by a Denplan, private or NHS dentist.

Claiming couldn't be simpler

Claiming is easy as you are not required to gain authorisation from us prior to receiving treatment. Simply pay your dentist for all treatment received, obtain proof of treatment and a receipt, complete a simple claim form and you should receive settlement within 10 working days. Claim forms are available by calling Denplan free on 0800 838 951 and are also available to download from the Federation internet and intranet sites.

Summary of main exclusions

- Treatment prescribed, planned, advised or taking place on or before the commencement date of the policy or for claims under the injury or emergency benefit for treatment required as a result of an incident that occurred prior to the commencement date of the policy.
- Dental Injury caused in the consumption of food (including foreign bodies contained within the food). Please note that cover for emergency dental treatment for the relief of pain, is not excluded if caused in the consumption of food.
- Treatments in connection with dental injuries must commence within a period of 6 months and must be completed within 24 months of the date of the original incident.
- Any treatment relating to damage or injury caused whilst participating in contact sports (including training) unless the recommended mouth protection is worn.
- Any treatment not deemed to be clinically necessary including tooth whitening and orthodontics unless the treatment is specifically related to a dental injury covered by this policy.
- Implants and all costs associated with the preparation and fitting of such a device.
- Treatment for mouth cancer diagnosed before or within 90 days after you joined Denplan or for which tests or consultations began within those 90 days, even if the diagnosis is not made until later.

Should you wish to supplement the Key Dental Cover detailed earlier, you may upgrade your cover as detailed below:

UPGRADE OPTIONS FOR YOUR EMERGENCY AND INJURY DENTAL COVER

Benefits	Elementary Dental Cover	Essential Dental Cover	Essential Plus Dental Cover	Extensive Plus Dental Cover
Routine examinations (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £50 per policy year	Up to £50 per policy year	Up to £100 per policy year
Hygiene treatments (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £60 per policy year	Up to £60 per policy year	Up to £120 per policy year
Dental x-rays (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £40 per policy year	Up to £40 per policy year	Up to £80 per policy year
Remedial or restorative treatments (and NHS band 2 & 3 treatment) Including, but not limited to, fillings, crowns, bridges and dentures	100% reimbursement for NHS treatment	80% of the cost up to £200 per policy year	80% of the cost up to £1000 per policy year	80% of the cost up to £2000 per policy year
Member	£7.85	£12.30	£15.35	£27.90
Member/Partner	£14.45	£22.75	£28.35	£51.70
Member & Children	£12.50	£19.65	£24.60	£44.65
Family	£19.35	£30.45	£38.15	£69.30

Rates are per person per month payable by direct debit. There are no forms to fill in and acceptance is guaranteed.

For further details call **0845 230 1654**

Home Emergency Assistance

Home Emergency Insurance is a cost-effective insurance product that provides immediate assistance in the event of a domestic emergency. Home emergencies can be stressful and sometimes difficult to resolve, but with Home Emergency Insurance you will have peace of mind knowing that we are with you every step of the way, by not only appointing a suitably qualified contractor to attend your home but also meeting the costs associated with this.

Cover is provided 24 hours a day, 365 days a year for:

- Call-out charge
- Labour up to a maximum of 2 hours
- Parts and materials up to a maximum of £100 (inc VAT)
- Alternative accommodation up to a maximum of £250 (inc VAT)

The maximum payable per claim is £1,000 (inc VAT)

Emergencies covered are:

- Breakdown of the heating system
- Plumbing and drainage problems
- Home security including locks and windows
- Breakage or failure of your sole toilet unit
- Loss of domestic power supply
- Lost keys
- Vermin infestation

*For breakdown of the heating system, it is a requirement under the terms and conditions that the boiler is under 15 years old and subject to an annual service. The cost of this service is NOT covered under this policy. You are free to determine who you use for an annual service. For your convenience and peace of mind, we have sourced a local firm Hornby Utilities Ltd as a reliable provider of boiler servicing for a fixed fee of £50. To arrange a service please call 01382 770129.

Claims Procedure

In the event of an emergency in the home, please telephone 0844 249 8454 as soon as possible providing us with your name, address, postcode, and the nature of the problem. It is important you notify us as soon as possible and do not appoint your own contractors as we will not pay the costs incurred and it could invalidate your cover. If the incident is not covered by this policy then we can still provide assistance which will be at your own cost. This may also be an event covered by your main buildings &/or contents insurance and we will seek to advise you accordingly. Please note that you should report any major emergency which could result in serious damage to the home or injury, to the Emergency Services or the company that supplies the service.

Significant Features & Benefits

The Insurer will pay Costs & Expenses up to the Limit of Indemnity for claims reported during the period of insurance for the insured events shown below

Significant Exclusions or Limitations

You always agree to use the Contractor nominated by us and the claim must be reported to us immediately after you first become aware of circumstances which could give rise to a claim under this policy

Limit of Indemnity

The Insurer will pay the following:

- a) Call-out charge, and/or
- b) Labour up to a maximum of 2 hours, and/or
- c) Parts and materials up to a maximum of £100, and/or
- d) Alternative accommodation costs up to a maximum of £250

The maximum payable per claim is £1,000

<p>1 MAIN HEATING SYSTEM The total failure or breakdown of the main heating system in your home</p>	<p>Any claim</p> <ul style="list-style-type: none"> relating to the central heating boiler which <ul style="list-style-type: none"> is more than 15 years old and/or has not been subject to an annual service relating to LPG fuelled, oil fired, warm air, solar and un-vented heating systems or boilers with an output over 60Kw/hr
<p>2 PLUMBING & DRAINAGE The sudden damage to, or blockage or breakage or flooding of, the drains or plumbing system likely to cause damage to the home or its contents</p>	
<p>3 HOME SECURITY Damage to or the failure of external doors, windows or locks which compromises the security of the home</p>	
<p>4 TOILET UNIT Breakage to or mechanical failure of the toilet bowl or cistern resulting in the loss of function providing there is no other toilet in the home</p>	
<p>5 DOMESTIC POWER SUPPLY The failure of the domestic electricity or gas supply</p>	<p>Any claim relating to the interruption, failure or disconnection of the mains electricity, mains gas or mains water supply</p>
<p>6 LOST KEYS The loss of the only available keys, if you cannot replace them, to gain access to the home</p>	<p>Any claim relating to damage incurred in gaining access to the home</p>
<p>7 VERMIN INFESTATION Vermin causing damage inside your home or a health risk to you</p>	
<p>8 ALTERNATIVE ACCOMMODATION COSTS Your overnight accommodation costs including transport to such accommodation up to a maximum of £250 (including VAT) following a home emergency which renders the home uninhabitable</p>	<p>Exclusions Applicable to All Sections Any claim</p> <ul style="list-style-type: none"> where costs have been incurred before we accept a claim where there is no one at home when the contractor arrives involving a pre-existing problem arising from any wilful or negligent act or faulty workmanship (including any attempted repair or DIY) for effecting permanent repairs once the emergency situation has been resolved arising out of the failure to maintain any system or equipment or the replacement of parts that gradually wear and tear over time relating to garages (except where boilers are housed in a garage), outbuildings, boundary walls, fences, hedges, cess pits, fuel tanks or septic tanks where the property has been left unoccupied for more than 30 days consecutively covered by a manufacturer's, supplier's or installer's warranty
	<p>Territorial Limit The United Kingdom, Channel Islands and the Isle of Man.</p>

Family Travel Policy

This policy covers the member, their partner and dependant children under 21 years, all normally residing together in their family home, for any number of trips in any year up to 31 days per trip. It covers travel worldwide and also in the United Kingdom.

The main sections of cover are:

- Cancellation and curtailment up to £3,000
- Emergency medical expenses up to £5,000,000
- Personal Baggage up to £1,500
- Personal Money up to £500
- Personal liability up to £2,000,000
- Personal Accident up to £20,000

Other benefits are included. Please see travel policy for full details.

Main Conditions and Exclusions to Family Travel Policy

The policy contains an important Warranty and exclusions relating to existing health conditions.

Please follow the instructions in the policy document and contact the Medical Pre-Screening service on **0845 218 1649** (9.00 am-5.00 pm Mon-Sat). You must quote reference **Tayside**

02124, if you have any medical condition or circumstance which may affect your ability to travel.

An excess of £50 is applicable for most policy sections. The excess is payable per person, per section, per insured incident subject to a maximum of £100.

There are significant limitations and exclusions of cover for property, including valuables and money, that is left unattended or out of your immediate control and supervision. Please also note the requirements for notifications of loss/theft and the need for reports.

Full policy terms and conditions have been made available. If you require further copies please contact the Federation Office.

Insurer: This travel insurance is underwritten by UK Underwriting Ltd on behalf of Fortis Insurance Limited, arranged through Voyager Insurance Services Ltd.

Travel Legal Advice & Assistance Helpline

Should you have an accident abroad or require legal advice and assistance you should telephone Thompsons Solicitors on +44 (0)845 218 5472. Thompsons have offices in Manchester, Leeds, Birmingham and Newcastle. They will arrange up to 30 minutes of advice to be given to you by a lawyer.



Feel better with Your Federation Family Healthplan

We're here to help you stay healthy

- Get prompt medical treatment when you need it from the UK's leading provider of private medical treatment
- Cover for treatment at a nationwide network of over 180 hospitals
- Simple Claims service, usually with no forms to complete
- 24-7 BUPA Healthline for advice and information from fully qualified nurses

Administered through



Call us today for further information on:

0845 230 1654

(Opening times vary - Spm Member - Friday Calls are recorded)

Cover provided by BUPA Insurance Limited, Registered in England and Wales No. 13064127
BUPA Insurance Services Limited, Registered in England and Wales No. 08239077
*Authorised and regulated by the Financial Services Authority
Registered Office: 10th Floor, 75 St. Broadbury Way, London, N1C 4AA

Don't Forget!

Your Police Federation Insurance Scheme

now has cover for dental
accidents & emergencies!

Should you or a covered partner have an accident, or simply a toothache that requires an urgent or emergency appointment with a dentist, you can claim costs back. This cover applies even if you visit your usual dentist. If you do not have a dentist or are away from home, Denplan will find you a dentist anywhere in the World. Claim forms are available by calling 0800 7315 052 or by contacting the Federation Office.

If you wish to upgrade your cover to include routine and remedial treatment Philip Williams & Co on **0845 230 1654**



NOTES

A series of horizontal blue lines for writing notes, with a vertical red margin line on the left side. Two circular punch holes are visible on the left edge of the page.

Complaints Procedure

The Federation Insurance Scheme is arranged on behalf of the Trustees by Philip Williams and Company who are authorised and regulated by the Financial Services Authority registration number 308860. The Trustees are responsible for dealing with the insurance broker and organising the Policies. Any complaints about any aspect of the Federation Insurance Scheme should in the first instance be directed to the Trustees. We will then investigate any complaint; identify the appropriate person to speak to and then either resolve the matter with that organisation and the Member or arrange for the appropriate organisation to resolve it directly with the Member.

Therefore if you have any complaints about the Federation Insurance Scheme please contact the Federation Office on:

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