

## Loan Payment Protection (LPPI)

This policy summary does not contain the full terms and conditions of the contract. The full terms & conditions are contained within the policy wording. You should read the full terms and conditions carefully to ensure that this cover is suitable for your needs. Please note this summary does not form part of the contract.

### TERMS

#### THE INSURER

(SEE POLICY SECTION 1)

The insurer of this policy, ALPHA INSURANCE A/S, is authorised and regulated by the Financial Services Authority.

#### TYPE OF INSURANCE AND COVER

(SEE POLICY SECTIONS 1 & 6)

This Loan Payment Protection insurance policy is designed to help you meet your monthly personal loan repayments in the event you are unable to work due to accident or sickness subject to certain terms and conditions being met.

The benefits applicable to you depend on the type of cover you select when applying for this insurance.

#### CHANGE TO POLICY TERMS AND CONDITIONS

(SEE POLICY SECTION 15)

The insurer reserves the right to amend the terms and conditions of this cover, including the monthly premium by giving you no less than 30 days notice.

#### PERIOD OF COVER

(SEE POLICY SECTION 5)

This is a monthly renewable policy which means that cover will continue for each month that you pay your premium, until you retire or reach the age of 65, when your loan agreement ends or when we or you cancel the policy.

#### COVER LIMITS

(SEE POLICY SECTION 5)

You can select the monthly benefit you need, to cover your personal loan payment. The maximum monthly benefit is the lesser of:

- 100% of your loan payment;
- 50% of your net monthly income; or
- €1,000

#### ELIGIBILITY

(SEE POLICY SECTION 2)

To be eligible for this policy at the start date you must:

- be at least 18 years of age and under 60 years;
- be in full-time employment or self employment for at least 6 continuous consecutive months immediately prior to the start date;
- be an Irish citizen or have been granted Residence Permission in Ireland;
- work in Ireland and permanently reside in the Republic of Ireland. You may also be eligible for cover if you work in Ireland and lived in the Republic of Ireland at the start date and you are subsequently posted to work outside the Republic of Ireland for the Irish Defence Forces or as a civil servant at an Irish Embassy or Consulate; and
- you have a personal loan agreement in place or are in the course of applying for one. Mortgages and Buy to Let mortgages are excluded.

#### CHANGE IN CIRCUMSTANCES

(SEE POLICY SECTION 4)

Your eligibility for cover under this policy may change if your circumstances change, for example if you take out a further advance on your loan, if this happens or is likely to happen you should contact the Insurer.

### SIGNIFICANT FEATURES AND BENEFITS

(SEE POLICY SECTIONS 6 & 8)

If an accident or sickness prevents you from working for longer than the waiting period (30 consecutive days), we will pay 1/30th of the monthly benefit for each continuous day you are unable to work after the waiting period.

The monthly benefit will be paid to you monthly in arrears provided you meet the policy terms and conditions. For accident or sickness claims, the benefits will be paid until the day you return to work or for the maximum number of monthly benefits.

## (SEE POLICY SECTIONS 6 & 8)

At the time you are certified unfit for work or self employment you must:

- have been in full-time employment or self employment for at least the time specified in your policy;
- satisfy the definition of accident or sickness set out in the Glossary;
- be under regular care and attendance of your doctor;
- not be in receipt of a monthly benefit for any other benefit;

## RETURN TO WORK BENEFITS

### (SEE POLICY SECTION 8)

You may be eligible to receive Return to Work benefits, if you are receiving less than your usual basic monthly salary from your employer. We will pay you the difference between 65% of the salary you received immediately before the incident date, and your new salary, less any State benefits, up to the maximum monthly benefit.

## SIGNIFICANT EXCLUSIONS

There are some situations that you are not covered for. These generally involve anything you already knew about when you took out this cover or that is caused by deliberate or illegal acts on your part. The most significant exclusions of this policy are set out below, but there may be other exclusions that may be significant to you, so you need to check the full Policy Terms and Conditions.

For full details of the exclusions please refer to the Policy Terms and Conditions, in particular the Accident and Sickness Exclusions (Section 7) and the Return to Work Exclusion (Section 9) for full details of what is and is not covered.

### (SEE POLICY SECTIONS 7, 9 & 10)

The main instances where you will not be covered for ;

- **Accident, sickness** claims which result from:
  - any medical condition, injury, illness, disease, sickness or related condition which you knew about (or ought reasonably to have known about) at the policy start date; or for which you sought or received advice, treatment or counselling from any doctor during the 24 months immediately before the start date;
  - This exclusion does not apply if you have been continuously insured and you have been symptom free and have not consulted a doctor or received treatment for the condition in the 24 months immediately prior to your claim;
- Self-inflicted injury, being under the influence of, alcohol or drugs;
- Any condition of a mental or nervous origin, unless certified and under the continuing care of a consultant psychiatrist; and
- Backache or related conditions unless there is supporting medical evidence. Such evidence may be a report from an appropriate consultant or from your doctor, in either case an MRI, CT scan, or equivalent, may be required.
- Seasonal, casual temporary work or work of less than 16 hours per week.

In addition, in the case of an accident or sickness claims you must:

- be under the regular care and attendance of your doctor; and
- be prevented from working only as a result of the accident or sickness.

---

## WHEN COVER ENDS

### (SEE POLICY SECTION 13)

Cover under this policy will end, the earliest of:

- the date you die;
- the date you reach 65 years of age or permanently retire
- the date you or we cancel your insurance;
- if you no longer permanently reside in the Republic of Ireland;
- the date your personal loan agreement terminates; or
- the date you fail to pay the monthly premium when due.

## Important

You should periodically review the level of benefit provided by your loan payment protection to ensure it remains sufficient for your needs.

---

## YOUR RIGHT TO CANCEL

If you decide you do not want the cover and wish to cancel your policy, you can do so by contacting us within 30 days of the start date or the date you receive the policy documents, whichever is later. You will receive a full refund of any monthly premium paid provided no claim has been made under the terms of this policy. If you have not made a claim against this policy and cancel outside the initial 30 day "cooling off period", no refund of monthly premium will be payable and no further premium shall be collected. Should you wish to cancel this policy, please contact: BBH Shelter Limited (t/a Trent Services), Trent Lodge, Stroud Road, Cirencester, Gloucestershire GL7 6JN United Kingdom. Telephone: +44 1285 626020. Email: [admin@trent-services.co.uk](mailto:admin@trent-services.co.uk)

## HOW TO MAKE A CLAIM

Please contact us as soon as reasonably possible and at least within 30 days following the end of the waiting period by telephone on +44 1285 626020 and one of our agents will talk you through the claims process. Alternatively, you can e-mail us at [admin@trent-services.co.uk](mailto:admin@trent-services.co.uk) or write to us at: Claims Department, BBH Shelter Limited (t/a Trent Services), Trent Lodge, Stroud Road, Cirencester, Gloucestershire GL7 6JN United Kingdom..

You will need to give us any evidence we require in order to prove your claim is valid.

## HOW TO MAKE A COMPLAINT

Any complaint you have regarding your policy, a claim or the service you receive should be addressed to The Complaints Manager  
Alpha Insurance A/S, Amaliegade 12st DK-1256, Copenhagen ,Denmark. Email [info@alphagroup.dk](mailto:info@alphagroup.dk)

If, having followed this procedure, you remain dissatisfied, you may refer your complaint to the Financial Ombudsman Service (FOS). Their address is: South Quay Plaza, 183 Marsh Wall, Docklands, London, E14 9SR, Tel: +44 845 080 1800. You must send your complaint to them within 6 months of the date of our final letter to you.

#### COMPENSATION

We are covered by the Financial Services Compensation Scheme (FSCS). In the unlikely event that we cannot meet our obligations, the FSCS will meet the first £2,000 (or the equivalent amount in Euros at the prevailing exchange rate) of your claim in full plus 90% of the balance. Further details can be obtained from [www.fscs.org.uk](http://www.fscs.org.uk)

#### FURTHER INFORMATION

You should read the Policy Schedule and Terms and Conditions carefully to ensure that the insurance fully meets your requirements. It gives you full details of what is and is not covered and the conditions of the cover.

**WE CAN PROVIDE A COPY OF THIS DOCUMENT IN ANOTHER FORMAT ON REQUEST.**

---