

# INSURANCE SCHEDULE Part one

## Policy and cover details

**Policy Number:**

**Policyholder:**  
 ("You/Your")

**Address:**

**Business Description:**

**Period of cover:**                      **From**    **to**  
 (both dates inclusive and at Local Standard Time at **your** address)

**Geographical Area:**                      (example) Anywhere in the world other than:  
 Afghanistan, Chechnya, Democratic Republic of Congo, Iraq, Israel  
 (West Bank, Gaza and the Occupied Territories only), Somalia

**Age Limit:**                                      An **insured person** must be over 18 at the start of the **period of cover**  
 and under age 75 at the end of the **period of cover**.

**Gross premium:**  
**Insurance Premium Tax:**  
**Total Payable:**

**Event Limit:**                                      £xxxx for any one **event** (please see further information in Part Four of  
 this **insurance schedule**).

**Premium Adjustment Basis:**

**Endorsements applicable:**      XXXXXX as attached to this Insurance Schedule. (or None)

### THE SECTIONS OF COVER THAT APPLY TO THIS POLICY:

<b>PERSONAL ACCIDENT INSURANCE</b>	<b>Sums Insured</b>
<b>Lump Sum Benefits</b>	
Accidental Death	£
Permanent Partial Disablement (loss of limb(s), loss of sight, loss of speech, loss of hearing)	£
Permanent Total Disablement From (Usual/Suited/Any) Occupation	£
<b>Weekly Benefits for Temporary Disablement</b>	
Temporary Total Disablement	£
Temporary Partial Disablement	£
<b>BUSINESS TRAVEL INSURANCE</b>	<b>Sums Insured</b>
Overseas Medical & Emergency Expenses	£
Employee Replacement or Job Resumption Expenses	£
Property & Money	£
Personal Liability	£
Legal Expenses	£
Cancellation, Curtailment or Rearrangement Expenses	£
Travel Delay	£
Travel Disruption	£
Hi-jack, Kidnap & Hostage	£

# INSURANCE SCHEDULE Part Two

## Table of Benefits for Personal Accident

### Table of Benefits Personal Accident Insurance

This Table of Benefits applies to the category of insured persons, for the operative time and in the geographical area stated below.

Category of insured persons: (example) Directors and Senior Managers (example)

Operative Time: (example) 24 hours a day (example)

Lump Sum Benefit	Benefit per insured person	Maximum Benefit per insured person
<b>Accidental Death</b>		
<b>Permanent Partial Disablement</b>		
<ul style="list-style-type: none"> <li>Loss of two or more limbs or loss of sight in both eyes</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of one limb and loss of sight in one eye</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of sight in one eye or loss of one limb</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of speech</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of hearing in both ears</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of hearing in one ear</li> </ul>		
<ul style="list-style-type: none"> <li>Permanent Total Disablement From (Usual/Suited/Any) occupation</li> </ul>		

Note: We will only pay one lump sum benefit for the same insured person in respect of any one accident.

Weekly Benefits for Temporary Disablement	Benefit per week per insured person	Maximum Benefit Period	Waiting Period	Maximum Benefit per insured person
1. Temporary Total Disablement	£XXX	xxx weeks	X days	
2. Temporary Partial Disablement	£XXX	xx weeks	X days	

Note: Any weekly benefit paid will be deducted from any subsequent lump sum benefit we pay as a result of the same accident.

# INSURANCE SCHEDULE Part Two (continued)

## Table of Benefits for Personal Accident

### Table of Benefits

#### Personal Accident Insurance

This Table of Benefits applies to the category of insured persons, for the operative time and in the geographical area stated below.

**Category of insured persons:** (example) Factory workers and delivery staff (example)

**Operative Time:** (example) Whilst an **insured person** is engaged in their occupation with **you**, including daily travel between normal residence and normal place of work.

Lump Sum Benefit	Benefit per insured person	Maximum Benefit per Insured Person
<b>Accidental Death</b>		
<b>Permanent Partial Disablement</b>		
<ul style="list-style-type: none"> <li>Loss of two or more limbs or loss of sight in both eyes</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of one limb and loss of sight in one eye</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of sight in one eye or loss of one limb</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of speech</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of hearing in both ears</li> </ul>		
<ul style="list-style-type: none"> <li>Loss of hearing in one ear</li> </ul>		
<ul style="list-style-type: none"> <li>Permanent Total Disablement From (Usual/Suited/Any) occupation</li> </ul>	x	

Note: We will only pay one lump sum benefit for the same **insured person** in respect of any one **accident**.

Weekly Benefits for Temporary Disablement	Benefit per week per insured person	Maximum Benefit Period	Waiting Period	Maximum Benefit per insured person
1. Temporary Total Disablement	£ XXX	xxx weeks	X days	
2. Temporary Partial Disablement	£ XXX	xx weeks	X days	

Note: Any weekly benefit paid will be deducted from any subsequent lump sum benefit we pay as a result of the same **accident**.

# INSURANCE SCHEDULE Part Three

## Table of Benefits for Business Travel

### Table of Benefits

#### Business Travel Insurance

This Table of Benefits applies to the category of insured persons and for the operative time stated below.

**Category of insured persons:** (example) Directors and Senior Managers (example)

**Operative Time:** (example) Any trip commencing during the **period of insurance** in connection with **your** business outside the **United Kingdom** and shall start from the time of leaving home or the normal place of business (whichever is left first) and continue until arrival back at home or the normal place of business (whichever is reached last). (example)

**Maximum trip:** 180 days

Cover Section	Maximum Benefit per insured person per trip	Excess
<b>Overseas medical &amp; emergency expenses</b>	£	
• Overseas medical and repatriation expenses		
• Funeral expenses		
• Hospitalisation	XX per day up to a maximum of 100 days	
<b>Employee replacement or job resumption expenses</b>	£	
<b>Property, passport and money, delayed baggage</b>	£	
• Property		
• Valuables	£1,000	
• Single item	£1,000	
• Pair/set or part of a pair/set	£1,000	
• Passport		
• Money		
• Delayed Baggage	£500	
<b>Personal liability</b>	<b>£ 2,000,000</b>	
<b>Legal expenses</b>	<b>£ 50,000</b>	
<b>Cancellation, curtailment or rearrangement expenses</b>	£	
Jury service	£25 per day up to a maximum of 10 days	
<b>Travel delay</b>	£	
First 12 hours	£50	
Each further 12 hours	£25	
Forfeit advance deposits	£1,000	
<b>Travel Disruption</b>	£	
<b>Hijack, kidnap &amp; hostage</b>	XX per complete day up to a maximum of 200 days	First 10 days

# INSURANCE SCHEDULE Part Three (continued)

## Table of Benefits for Business Travel

### Table of Benefits

#### Business Travel Insurance

This Table of Benefits applies to the category of insured persons and for the operative time stated below.

**Category of insured persons:** Factory workers and delivery staff (example)

**Operative Time:** Any trip commencing during the **period of insurance** in connection with **your** business outside the **United Kingdom** and shall start from the time of leaving home or the normal place of business (whichever is left first) and continue until arrival back at home or the normal place of business (whichever is reached last). (example)

**Maximum trip:** 180 days

Cover Section	Maximum Benefit per insured person per trip	Excess
<b>Overseas medical &amp; emergency expenses</b>	£	
• Overseas medical and repatriation expenses		
• Funeral expenses		
• Hospitalisation	Xxx per day up to a maximum of 100 days	
<b>Employee replacement or job resumption expenses</b>	£	
<b>Property, passport &amp; money, delayed baggage</b>	£	
• Property		
• Valuables	£1,000	
• Single item	£1,000	
• Pair/set or part of a pair/set	£1,000	
• Passport		
• Money		
• Delayed Baggage	£500	
<b>Personal liability</b>	<b>£ 2,000,000</b>	
<b>Legal expenses</b>	<b>£ 50,000</b>	
<b>Cancellation, curtailment or rearrangement expenses</b>	£	
Jury service	£25 per day for a maximum of 10 days	
<b>Travel delay</b>		
First 12 hours	£50	
Each further 12 hours	£25	
Forfeit advance deposits	£1,000	
<b>Travel Disruption</b>	£	
<b>Hijack, kidnap &amp; hostage</b>	XX per complete day up to a maximum of 200 days	First 10 days

## INSURANCE SCHEDULE Part Four

### Description of an “event”

#### EVENT

The limit shown in Part One of this **insurance schedule** applies to the total of all individual personal accident losses due to, and directly caused by, one **event**. For the purposes of this policy an **event** means an incident which happens by chance during the **operative time** and within the **cover period** and results in **bodily injury**.

The length and extent of any **event** is limited to twenty four consecutive hours and within a ten mile radius. **We** will not consider any loss which happens outside that time limit or radius to be part of the same **event**.

**You** can choose when the twenty four hour period starts provided that no such period starts before the time of the first individual insured loss and also the specific ten mile radius in which the event is said to happen. If the event continues for longer than twenty four hours **you** can opt for two or more **events** provided that no two periods overlap.

If the total amount of all benefits payable under the personal accident part of this policy is more than the **event** limit, **we** will reduce the benefits payable to each **insured person** proportionally until the total of all the personal accident benefits payable equals the **event** limit.

## INSURANCE SCHEDULE Part Five

### Who to Contact

#### Overseas Medical Emergency Claims

For any Overseas Medical Emergency please contact the **assistance company**:

**Phone:** +44 (0)2920 468 795 **Fax:** +44 (0)845 070 1756 **Email:** [jubilee@global-response.co.uk](mailto:jubilee@global-response.co.uk)

#### All Other Claims

For all other claims please contact the appointed **scheme administrator**, Jubilee Service Solutions Limited.

**Phone:** 01444 450550 **Fax:** 01444 458234 **Email:** [jss.enquiries@jubilee-insurance.com](mailto:jss.enquiries@jubilee-insurance.com)

Or write to them at:

Jubilee Service Solutions Limited  
21 Perrymount Road  
Haywards Heath, West Sussex  
RH16 3TP

**Full details about claiming can be found in the policy booklet in the section called How to Make a Claim.**

#### Policy enquiries

Please contact Jubilee Service Solutions Limited at the address above if **you** have any questions about the policy documents or if **you** wish to cancel the policy.

## INSURANCE SCHEDULE Part Six

### Certification of Cover

This **insurance schedule** together with the policy booklet certifies that insurance has been effected between **you** (the **policyholder**) and **us** (the Insurer). In return for payment of the premium specified in the **insurance schedule**, **we** agree to insure **you** in accordance with the terms and conditions contained in or endorsed on these documents.

**We** have entered into a Binding Authority Contract (reference 6025/TP160) with Jubilee Service Solutions Limited under which **we** have authorised Jubilee Service Solutions Limited to sign and issue these documents on **our** behalf. Signed on **our** behalf by:

Jane Nicholson,  
Managing Director,

SPECIMEN