



MOBILE PHONE SCREEN DAMAGE INSURANCE POLICY TERMS AND CONDITIONS

This insurance is arranged by Warranty & Creditor Services of 6 Faraday Office Park, Rankine Road, Basingstoke, RG24 8QB.

It is underwritten by UK General Insurance Limited on behalf of Great Lakes Insurance SE. Great Lakes Insurance SE is a German insurance company with its headquarters at Königinstrasse 107, 80802 Munich. UK Branch office: Plantation Place, 30 Fenchurch Street, London, EC3M 3AJ

Warranty & Creditor Services, is authorised and regulated by the Financial Conduct Authority. This can be checked on the FCA register by visiting the FCA website at www.fca.org.uk/register/ or by contacting them on 0800 111 6768.

UK General Insurance Limited is authorised and regulated by the Financial Conduct Authority. Firm Reference No. 310101. **You** can check **Our** details on the Financial Services Register <https://register.fca.org.uk/>.

Great Lakes Insurance SE, UK Branch, is authorised by Bundesanstalt für Finanzdienstleistungsaufsicht and subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority. Firm Reference No. 769884. Details about the extent of their regulation by the Financial Conduct Authority and Prudential Regulation Authority are available on request.

Intention of Cover

This Insurance provides cover for **Your Equipment** against **Accidental Damage**.

Definitions

The words or expressions detailed below have the following meaning wherever they appear in this policy and will appear in bold with a capital letter.

Accidental Damage	An accidental and unforeseen failure, breakage or destruction of Your Equipment , with visible evidence of an external force being applied
Administrator	Warranty & Creditor Services of 6 Faraday Office Park, Rankine Road, Basingstoke RG24 8QB Tel (01256) 471387.
Equipment	The front screen of the Equipment specified in the Schedule .
Monthly Premium	The agreed amount payable by You by Direct Debit each month in order that cover remains in force under the terms and conditions of this policy wording.
Period of Insurance	This is a rolling monthly contract and commences on the purchase of this policy as shown on Your Schedule and continues by periods of one month upon receipt of Your Monthly Premium Payment .
Schedule	The schedule shown on the certificate of insurance.
We/Us/Our/Insurers	Means UK General Insurance Limited on behalf of Great Lakes Insurance SE
You(r)	The Person who owns the Equipment as stated on the insurance Schedule or an immediate family member or other person named on the Schedule

What We will cover

Like all insurance policies, there are key exclusions and conditions. Please refer to these specific paragraphs below:

Accidental Damage: We will pay repair costs, if the front screen of **Your Equipment** is damaged as the result of an accident and is still in working condition.

Sum Insured

Our maximum liability in respect of any one claim for **Accidental Damage** will be the replacement cost of **Your Equipment** and in any event shall not exceed £300.

Exclusions

The Insurance does not cover:-

1. The cost of repair or replacement of any other part of the **Equipment** than the front screen
2. **Accidental Damage** covered by any other insurance or warranty.
3. **Accidental Damage** to the screen caused by water or any other liquid
4. **Accidental Damage** to the **Equipment** whilst left on any motor vehicle roof, bonnet or boot.
5. The first £15 of each and every claim.
6. **Accidental Damage** to the **Equipment** whilst on hire or loan to any third party
7. **Accidental Damage** through negligence, abuse or misuse of the **Equipment** including any incident where the **Equipment** is placed into a washing machine whether accidentally or otherwise
8. Accessories to Your **Equipment**.
9. The cost of any claim whatsoever relating to software or any data changes.
10. Cosmetic damage where the **Equipment** still functions normally.
11. Loss caused by a manufacturer's defect or recall of the **Equipment**, or any faults or issues that can be traced as being existing prior to the commencement of the policy.
12. The cost of repairs or replacement carried out by anyone not approved by the **Administrator** and the use of non-approved components.
13. Any loss of or damage to any data stored on or contained within the **Equipment**.
14. Any direct or indirect consequence of war, civil war, invasion, acts of foreign enemies (whether war be declared or not), rebellion, revolution, insurrection, military or usurped power, or confiscation, nationalisation, requisition, destruction of or damage to property by or under the order of any government, local or public authority.
15. Any direct or indirect consequence of terrorism as defined by the Terrorism Act 2000 and any amending or substituting legislation.
16. direct or indirect consequence of:
 - Irradiation, or contamination by nuclear material; or
 - The radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter; or
 - Any device or weapon which employs atomic or nuclear fission or fusion or other comparable reaction or radioactive force or matter.
17. Damage or destruction directly occasioned by pressure waves caused by aircraft or other aerial devices traveling at sonic or supersonic speeds.
18. Any consequence, howsoever caused, including but not limited to Computer Virus of Electronic Data being lost, destroyed, distorted, altered, or otherwise corrupted.
For the purposes of this Policy, Electronic Data shall mean facts, concepts and information stored to form useable data for communications, interpretations, or processing by electronic or electromechanical data processing or other electronically controlled hardware, software and other coded instructions for the processing and manipulation of data, or the direction and manipulation of such hardware.
For the purposes of this Policy, Computer Virus shall mean a set of corrupting, harmful, or otherwise unauthorised instructions or code, whether these have been introduced maliciously or otherwise, and multiply themselves through a computer system or network of whatsoever nature.
19. Any costs whatsoever arising from loss of any warranty or benefit on the **Equipment** caused by **Our** authorised repairer carrying out repairs under this Insurance.

Conditions

1. **Your Equipment** must be in good working condition and have suffered no accidents prior to cover being put in place.
2. If **Your Equipment** is subject to **Accidental Damage** We will pay for the cost of repairs by a qualified engineer authorised by the **Administrator**.
3. Cover is only available if **Your Monthly Premium Payment** has been paid from the start date of this insurance and there are no outstanding payment defaults.
4. **We** may alter the premiums by giving **You** thirty days notice to proportionately reflect legitimate cost increases or reductions associated with insuring **Your Equipment**. This does not affect **Your** statutory rights under this insurance contract. In the event of any increase in premiums **You** have the right to immediately cancel this contract

5. **We** may take legal action against any third party responsible for a loss.
6. **You** must take all reasonable steps to protect and preserve **Your Equipment** and minimise **Our** liability.
7. Unless some other law is agreed in writing, this policy is governed by English law. If there is a dispute, it will only be dealt with in the courts of England or of the country within the United Kingdom in which **Your** main residence is situated.
8. **You** must not act in a fraudulent way. If **You** or anyone acting for **You**:
 - fails to reveal or hides a fact likely to influence whether **We** accept **Your** proposal, **Your** renewal, or any adjustment to **Your** policy;
 - fails to reveal or hides a fact likely to influence the cover **We** provide;
 - makes a statement to **Us** or anyone acting on **Our** behalf, knowing the statement to be false;
 - sends **Us** or anyone acting on **Our** behalf a document, knowing the document to be forged or false;
 - makes a claim under the policy, knowing the claim to be false or fraudulent in any way;
 - makes a claim for any loss or damage **You** caused deliberately or with **Your** knowledge; or
 - If **Your** claim is in any way dishonest or exaggerated,

We will not pay any benefit under this policy or return any premium to **You** and **We** may cancel **Your** policy immediately and backdate the cancellation to the date of the fraudulent claim. **We** may also take legal action against **You** and inform the appropriate authorities.
9. This insurance will not cover any **Equipment** other than that shown on the **Schedule**. If **You** wish to transfer the cover to any other **Equipment** **You** must notify the **Administrator** who will consider **Your** request and advise **You** in writing if cover may be transferred

Your responsibility

You must take reasonable care to:

- a) supply accurate and complete answers to all the questions **Your** (administrator / agent) may ask as part of **Your** application for cover under the policy
- b) to make sure that all information supplied as part of **Your** application for cover is true and correct
- c) tell **Your** (administrator / agent) of any changes to the answers **You** have given as soon as possible.

You must take reasonable care to provide information that is accurate and complete answers to the questions **Your** (administrator / agent) ask when **You** take out, make changes to and renew **Your** policy. If any information **You** provide is not accurate and complete, this may mean **Your** policy is invalid and that it does not operate in the event of a claim or **We** may not pay any claim in full.

If **You** become aware that information **You** have given **Your** (administrator / agent) is inaccurate or has changed, **You** must inform them as soon as possible.

If **We** obtain evidence which suggests that **You** were careless in providing **Us** with the information **We** have relied upon in setting the terms and premium of this insurance and if **Your** carelessness causes **Us** to provide **You** with insurance cover which **We** would not otherwise have offered or would have offered on different terms and premium, **We** may:

- Give **You** notice in writing that **You** must pay more for **Your** insurance;
- Give **You** notice in writing that the terms of **Your** insurance have changed; or

Cancel this contract of insurance by giving **You** thirty days' notice and return any premium paid for the balance of the remaining term.

If **We** give **You** notice that the terms of **Your** insurance have changed or that **You** must pay more for **Your** insurance, then **You** may give **Us** thirty days' notice in writing if **You** wish to terminate the contract. Any return premium due to **You** will depend on how long this contract has been in force and whether **You** have made a claim.

If **We** establish that **You** deliberately or recklessly provided **Us** with false information **We** may:

- Treat this insurance as if it never existed;
- Decline all claims; and
- Retain the premium (all or part, unless it would be unfair to do so)

Claims Procedure:

In the event of **Accidental Damage** **You** must within 48 hours of discovery of the incident notify the **Administrator** on (01256) 471387 and complete a claim over the telephone, or complete a claim form online at <https://wcsinsurance.co.uk/screenclaim> or request a claim form by email: claims@wcsinsurance.co.uk

Please ensure **You** have **Your** policy number and IMEI number ready when calling the **Administrator** **Your** excess must be received and a completed claim form in place before **Your** claim can be agreed and authorization to repair is provided.

Claims will only be considered if **Your Monthly Premium Payment** has been paid from the start date of this insurance, up to and including the month in which the claim occurred and there are no outstanding payment defaults.

You must supply the **Administrator** with any receipts or documentation requested in the event of a claim.

Cancellation

If **You** decide that for any reason, this Policy does not meet **Your** insurance needs then please return it to the **Administrator** within 14 days from the day of purchase or the day on which **You** receive **Your** policy documentation, whichever is the later. On the condition that no claims have been made or are pending, **We** will then refund **Your** premium in full.

Thereafter **You** may cancel the insurance cover at any time by informing the **Administrator** however no refund of premium will be payable

We shall not be bound to accept renewal of any insurance and may at any time cancel any insurance document by giving 14 days notice in writing where there is a valid reason for doing so. A cancellation letter will be sent to **You** at **Your** last known address. Valid reasons may include but are not limited to:

- a) Where we reasonably suspect fraud
- b) Non-payment of premium
- c) Threatening and abusive behaviour
- d) Non-compliance with policy terms and conditions
- e) **You** have not taken reasonable care to provide complete and accurate answers to the questions we ask.

If **We** cancel the policy and/or any additional covers **You** will receive a refund of any premiums **You** have paid for the cancelled cover, less a proportionate deduction for the time **We** have provided cover.

Where **Our** investigations provide evidence of fraud or misrepresentation, **We** may cancel the policy immediately and backdate the cancellation to the date of the fraud or the date when **You** provided **Your** administrator / **Your** agent with incomplete or inaccurate information. This may result in **Your** policy being cancelled from the date **You** originally took it out and **We** will be entitled to keep the premium.

If **Your** policy is cancelled because of fraud or misrepresentation, this may affect **Your** eligibility for insurance with **Us**, as well as other insurers, in the future.

Complaints Procedure

It is the intention to give **You** the best possible service but if **You** do have questions or concerns about this insurance or the handling of a claim **You** should contact the Customer Service Manager at Warranty & Creditor Services, 6 Faraday Office Park, Rankine Road, Basingstoke, RG24 8QB (01256) 471387 stating the nature of **Your** complaint and **Your** policy number.

If **Your** complaint is about the sale of **Your** policy or **Your** liability claim cannot be resolved by the end of the third working day, **Your** complaint will be passed to:
Customer Relations Department, UK General Insurance Limited, Cast House, Old Mill Business Park, Gibraltar Island Road, Leeds, LS10 1RJ, Tel: 0345 218 2685, Email: customerrelations@ukgeneral.co.uk

In all correspondence please state that **Your** insurance is provided by UK General Insurance Limited and quote scheme reference 06321C.

If it is not possible to reach an agreement, **You** have the right to make an appeal to the Financial Ombudsman Service. This also applies if **You** are insured in a business capacity and have an annual turnover of less than €2million and fewer than ten staff. **You** may contact the Financial Ombudsman Service at:
The Financial Ombudsman Service, Exchange Tower, London, E14 9SR. Tel: 0300 123 9 123
Email: complaint.info@financial-ombudsman.org.uk

The above complaints procedure is in addition to **Your** statutory rights as a consumer. For further information about **Your** statutory rights contact **Your** local Citizens Advice Bureau.

If **You** have purchased the insurance policy online, **You** may also raise **Your** complaint via the EU Online Dispute Resolution Portal at <http://ec.europa.eu/consumers/odr/>. This will forward **Your** complaint to the correct Alternative Dispute Resolution scheme. For insurance complaints in the UK this is the Financial Ombudsman

Service. However, this may be a slower route for handling **Your** complaint than if **You** contact the Financial Ombudsman Service directly.

Compensation

Great Lakes Insurance SE is covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme, if Great Lakes Insurance SE cannot meet their obligations. This depends on the type of business and the circumstances of the claim. Most insurance contracts are covered for 90% of the claim with no upper limit. **You** can get more information about compensation scheme arrangements from the FSCS or visit www.fscs.org.uk.

You may also contact the FSCS on their Freephone number: 0800 678 1100 or 020 7741 4100 or **You** can write to: Financial Services Compensation Scheme, P O Box 300, Mitcheldean, GL17 1DY

UK GENERAL INSURANCE LTD PRIVACY NOTICE

We are UK General Insurance Ltd, referred to as “we/us/our” in this notice. Our data controller registration number issued by the Information Commissioner’s Officer is **Z7739575**.

This privacy notice is relevant to anyone who uses our services, including policyholders, prospective policyholders, and any other individuals insured under a policy. We refer to these individuals as “you/your” in this notice.

We are dedicated to being transparent about what we do with the information that we collect about you. We process your personal data in accordance with the relevant data protection legislation.

Why do we process your data?

The provision of your personal data is necessary for us to administer your insurance policy and meet our contractual requirements under the policy. You do not have to provide us with your personal data, but we may not be able to proceed appropriately or handle any claims if you decide not to do so.

What information do we collect about you?

Where you have purchased an insurance policy through one of our agents, you will be aware of the information that you gave to them when taking out the insurance. The agent will pass your information to us so that we can administer your insurance policy.

For specific types of insurance policies, for example when offering you a travel insurance policy, we may process some special categories of your personal data, such as information about your health.

We have a legitimate interest to collect this data as we are required to use this information as part of your insurance quotation or insurance policy with us. We may also process the data where it is necessary for a legal obligation, or as part of the establishment or defence of a legal claim.

UK General’s full privacy notice

This notice explains the most important aspects of how we use your data. You can get more information about this by viewing our full privacy notice online at <http://ukgeneral.com/privacy-notice> or request a copy by emailing us at dataprotection@ukgeneral.co.uk. Alternatively, you can write to us at: Data Protection, UK General Insurance Ltd, Cast House, Old Mill Business Park, Gibraltar Island Road, Leeds, LS10 1RJ.

GREAT LAKES INSURANCE SE INFORMATION NOTICE

Personal Data provided in connection with this policy will be used and processed in line with the Information Notice. A copy of this is available at <https://www.munichre.com/en/service/privacy-statement/index.html>.