

DEMANDS AND NEEDS STATEMENT

This product meets the demands and needs of a driver who requires a replacement vehicle for 14 days should theirs be stolen or written-off.

POLICY SUMMARY

INTRODUCTION

This is a summary of the policy terms and conditions. The full terms can be found in the Policy Wording section of this document.

NAME OF THE INSURANCE UNDERTAKING

Europ Assistance Insurance Limited underwrites this policy.

TYPE OF INSURANCE AND COVER PROVIDED

This policy provides a replacement vehicle, for up to 14 days, in the event yours is stolen or is written-off.

SIGNIFICANT FEATURES AND BENEFITS

- A replacement vehicle will be provided following theft/write-off anywhere in the UK or European Union plus Switzerland & Norway (see Policy Wording Section 'Geographical Limits').
- A replacement vehicle can be delivered to, and collected from, any address in the UK (see 'What is insured').
- Vehicle will be delivered within 24-hours of notification of your claim to Angel.

SIGNIFICANT EXCLUSIONS OR LIMITATIONS

- Your replacement vehicle can only be delivered to and collected from an address in the UK
- The replacement vehicle will be collected before 14 days if yours is (1) recovered and repaired or (2) 4 working days after you receive a settlement cheque from your insurer or (3) your insurer refuses your claim (see 'What is insured').

DURATION OF COVER

This policy of insurance will expire in twelve months from the date of issue.

YOUR RIGHTS TO CANCEL

You have the right to cancel any policy of insurance within 14 days of the date of issue. We will refund to you any premium you have paid and will recover from you any payments we have made.

HOW TO MAKE A CLAIM

If you take out a policy and then have a claim pursuant to the terms and conditions of the policy you should telephone Angel Assistance on 0845 078 5826, or write to the address below.

MAKING A COMPLAINT

If you have a complaint about the service you have received, please contact Angel:

In writing: Angel Managing Director, Pinesgate, Lower Bristol Road, Bath BA2 3DP

By phone: 08000 264357

If you wish to register a complaint about this policy, please contact the underwriters:

Quality Department, Europ Assistance Holdings Ltd, Sussex House, Perrymount Road, Haywards Heath, West Sussex, RH16 1DN. Tel: 0870 737 5770

If your complaint cannot be settled, you may be entitled to refer it to the Financial Ombudsman Service.

COMPENSATION

You may be entitled to compensation from the Financial Services Compensation Scheme (FSCS) in the event that the insurer is unable to meet its liabilities. Europ Assistance Insurance Limited and Angel Assistance Limited are covered by the FSCS.

Further information about compensation scheme arrangements is available from the FSCS.

MINICOM/LARGE PRINT

Large print: should you require documentation in a large print format, please contact us on: 01225 321000

Minicom: should you wish to speak to us on our Minicom line, please call on 0845 078 4904



You'll thank heavens for it!

Angel Assistance Ltd,
Pinesgate, Lower Bristol Road, Bath BA2 3DP

Angel Assistance Limited is an agent of Europ Assistance Insurance Limited, Sussex House, Perrymount Road, Haywards Heath, RH16 1DN the underwriters of this policy.

Angel Assistance Ltd is authorised and regulated by the FSA (Financial Services Authority)



**Replacement
vehicle POLICY**

key facts

**14
DAYS**

Schedule of cover

Policy holder:

Policy number:

Vehicle type: standard/like for like

Policy expires:

14 DAYS Replacement vehicle POLICY

If your vehicle is stolen or written-off we can provide you with a replacement vehicle, for up to 14 days, to help you stay mobile.

- Full cover throughout the UK as well as the European Union (including Switzerland and Norway)
- Replacement vehicle delivered & collected anywhere in the UK (your home, airport, hotel, holiday cottage etc)
- Vehicle delivered within 24 hours

To make a claim:
Simply call us with your insurance claim reference number, and the police crime reference number (if your vehicle is stolen).

0845 078 5826

Angel Replacement Vehicle Policy Wording

We will provide the benefits described in this Policy:

- during the **period of insurance**;
- subject to the terms, conditions and exclusions contained in this Policy; and
- following payment of the appropriate premium.

Benefits under this Policy are underwritten by Europ Assistance Insurance Limited, of Sussex House, Perymount Road, Haywards Heath, West Sussex RH16 1DN. This contract of insurance is effected in England, and is subject to the Laws of England and Wales.

MEANING OF WORDS

Wherever the words and phrases shown in bold appear in this Policy they will always have the following meanings:

geographical limits:

all member states of the European Union, plus Switzerland and Norway.

insured event:

the loss of use of the **insured vehicle** through theft or its being taken without consent or its being declared a **total loss**.

insured vehicle:

a private vehicle which **you** are insured to drive as specified by **your motor insurer**.

motor insurer:

the underwriters providing indemnity for loss of or relating to **the insured vehicle** arising from an **insured event**.

period of insurance:

12 months or until the expiry of the insurance policy provided by **your motor insurer**, whichever is the earlier.

replacement vehicle:

a hire vehicle arranged by **us** of the category specified in **your** Policy Schedule.

total loss:

where the **insured vehicle** is damaged and **the motor insurer** declares that it is beyond economical repair.

we, us, our:

Angel Assistance Limited, of Pinesgate, Lower Bristol Road, Bath BA2 3DP, on behalf of the Underwriters of this Policy.

you, your:

the Policyholder named on the Policy Schedule.

WHAT IS INSURED

If an **insured event** occurs within the **geographical limits** and during the **period of insurance**, **we** will arrange and pay for a **replacement vehicle** within the United Kingdom while the **insured vehicle** remains unavailable.

You must be able to satisfy all the requirements of the rental company, (including having an acceptable driving licence and being of minimum driver age), and sign and adhere to their terms and conditions.

We will pay for the rental charge and for delivery to and collection from your location within the UK. **You** will be responsible for all other costs, and for handing back the **replacement vehicle** when **your** entitlement to payment by **us** ends.

Your entitlement to payment by **us** ends when the earliest of the following events occurs:

1. The **insured vehicle** is recovered and where applicable, repairs for damage caused during the **insured event** are completed.
2. Four working days after **you** receive a cheque from **your motor insurer** in settlement of a claim for loss of or relating to the **insured vehicle**.
3. **You** receive an offer of settlement from **your motor insurer** which **we** feel is reasonable but which **you** reject.
4. **You** are offered or entitled to the use of a courtesy vehicle from any other source.
5. **Your motor insurer** refuses **your** claim for loss of or relating to the **insured vehicle**.
6. Fourteen days from and including the day the **replacement vehicle** is delivered.

CONDITIONS

Payment by **us** is conditional upon **you** observing all of the following conditions:-

1. **You** must tell **us** all material facts likely to affect this insurance. If **you** are unsure as to whether a fact is material or not, **you** should tell **us** anyway.
2. **You** must act at all times with due care and attention. **You** must take all practical steps to avoid the need to claim under this Policy and to minimise the extent of any claim **you** do make.
3. Whenever the **insured vehicle** is left unattended it must be locked with all windows closed, the keys removed and an alarm or immobiliser (when fitted) activated.
4. **You** must co-operate fully with **your motor insurer** and provide all information and proof that it may require to process **your** claim against it.
5. **You** must notify **us** of a potential claim under this Policy as soon as practicable and at the latest within 28 days of the **insured event**, and provide at **your** own expense all proof and documentation that **we** may reasonably require.

6. **You** must advise **us** as soon as practicable, and at the latest within 24 hours, of:
 - i) recovery of the **insured vehicle**;
 - ii) **you** receiving an offer of settlement by **your motor insurer** or any third party;
 - iii) **you** receiving a settlement cheque from **your motor insurer** or any third party;
 - iv) **you** being offered or becoming entitled to a courtesy vehicle from any source;
 - v) rejection of **your** claim by **your motor insurer**.
7. **You** must hand back the **replacement vehicle** by the end of the day when **your** entitlement to payment by **us** ends.

EXCLUSIONS

What is not covered:

1. Any costs which have not been authorised by **us** in advance.
2. Any deliberately careless or negligent act or omission by **you**.
3. Any claim when **you** have obtained a **replacement vehicle** by fraudulent or deliberate misrepresentation or concealment. In this case the Policy shall be immediately cancelled, the premium forfeited and the cost of any benefit **you** have received under this Policy shall be repaid to **us**.
4. Claims when at the time of the **insured event** the **insured vehicle**:
 - i) was unroadworthy;
 - ii) did not have a valid Vehicle Test Certificate (MOT) when required by Law, did not comply with all Construction and Use Regulations in force or was being operated without all licences required by Law;
 - iii) was not insured for the event that caused the loss of use or **your motor insurer** subsequently refuses to indemnify **you** for the loss.
5. Any claim when at the time of the **insured event** **you** did not hold or were disqualified from holding a valid driving licence.
6. A claim where at any time **your motor insurer** refuses indemnity for loss of or relating to the **insured vehicle**.
7. Any claim when **your motor insurer** or where applicable, the vehicle repairer, refuses to allow **us** access to all relevant information which **we** may reasonably require.
8. Any costs incurred by **us** after **your** entitlement to payment by **us** has ended. If **you** do not hand back the **replacement vehicle** at this time **you** will be liable for and will repay to **us** all costs **we** incur.
9. Any costs which in **our** reasonable opinion have been incurred through unnecessary delay on the part of **you**, the vehicle repairer, or **your motor insurer**.
10. The fourth or any subsequent claim within the **period of insurance**.
11. Any costs which could be recovered under any other insurance.

SUBROGATION

We may at **our** own expense take proceedings in **your** name to recover compensation or secure an indemnity from any third party in respect of any expenses paid under this policy and any amount so recovered or secured shall belong to **us**.

LAPSE AND CANCELLATION

This Policy will be treated as not taken up if after 21 days from its inception **we** have not received payment of the appropriate premium.

We may cancel this Policy at any time by giving **you** 15 days notice in writing sent by recorded delivery to **your** last known address. In this case **we** will refund to **you** the unused part of the premium paid to **us**.