

DFDS cancellation only insurance policy 2018/19

ref: VOY/DFDS/CO/2018/19

Valid for issue no later than 31st October 2019 in respect of travel completed no later than 31st October 2020.



Provided you have paid the appropriate premium as shown in your certificate of insurance, you are covered in accordance with the full wording shown herein up to the limits indicated below. The limits shown apply per person per trip.

Benefits schedule		Limits	Excess
1.	Cancellation	£5,000	Nil
Single trip policy features			
Maximum age at date of departure		No maximum age	
Maximum period any one trip		90 days	

Important conditions relating to health

You are not covered for any directly or indirectly related claims if at the time this insurance was arranged, **you** or **your** travelling companions insured under this policy or any **non-travellers** upon whose health **your** travel plans depend;

- have been given a terminal diagnosis, or
- are on a waiting list for surgery, treatment or investigation at a hospital, clinic or nursing home or are awaiting the results of any tests or investigations, or
- are undergoing a course of treatment at a hospital, clinic or nursing home, or
- have any medical condition for which a diagnosis has not yet been received, or
- are planning to travel against the advice of a **doctor** or travelling specifically to seek, or **you** know **you** will need, medical treatment while **you** are away, or
- have any medical condition for which the recommended treatment or prescribed medication as directed by a **doctor**, is not being taken.

Information you need to tell us

You must tell **us** if, at any time during the period of insurance and each time **you** make arrangements to travel, there is a change in circumstances and **you** answer 'yes' to any of the important conditions relating to health by contacting **us** as soon as possible so that **we** may reassess **your** coverage relating to any **trips** **you** have booked or may wish to book in the future. Please contact **Voyager Insurance Services Ltd** on **01483 562662**.

- Do you have any concerns relating to the health of any **non-travellers** whose state of health is likely to cause **you** to cancel or amend **your** travel plans? If so, please contact **Voyager Insurance Services Ltd** on **01483 562662** to see what cover may be available.

Important

There is certain information that **we** need to know as it may affect the terms of the insurance cover **we** can offer **you**. **You** must, to the best of **your** knowledge, give accurate answers to the questions **we** ask when **you** buy **your** travel insurance policy. If **you** do not answer the questions truthfully it could result in **your** policy being invalid and could mean that all or part of a claim may not be paid. If **you** think **you** may have given **us** any incorrect answers or if **you** want any help, please contact **Voyager Insurance Services Ltd** on **01483 562662** as soon as possible and **we** will be able to tell **you** if **we** can still offer **you** cover.

Territorial limits

You are covered for **trips** to countries within the following area provided that **you** have paid the appropriate premium, as shown on **your** certificate;

Area 1 The **United Kingdom, Channel Islands**, the Isle of Man, Ireland, the continent of Europe West of the Ural mountains, any country with a Mediterranean coastline, the Canary Islands, Madeira and Iceland.

Period of insurance

If **you** have paid the appropriate cancellation insurance premium, cover begins from the issue date shown on **your** certificate and ends at the beginning of **your** journey.

Cancellation rights

We hope **you** are happy with the cover this policy provides. However, if after reading this policy, this insurance does not meet with **your** requirements, please return it to the issuing agent, within 14 days of receipt and **we** will refund **your** premium. **We** shall not be bound to accept renewal of any insurance and may at any time cancel any insurance document by sending 14 days notice to **you** at **your** last known address. Provided the premium has been paid in full, **you** shall be entitled to a proportionate rebate of premium in respect of the unexpired period showing on the insurance. Thereafter **you** may cancel the policy at any time by writing to the issuing agent, however no refund of premium is payable.

DEMANDS AND NEEDS

This travel insurance policy will suit the demands and needs of an individual, or group who have no excluded existing medical conditions, are travelling to countries included within the policy terms and who wish to insure themselves against the unforeseen circumstances/ events detailed in this insurance policy. Subject to terms and conditions and maximum specified claim limits.

IMPORTANT

This policy will have been sold to **you** on a non-advised basis and it is therefore for **you** to read this policy (paying particular attention to the terms and conditions and exclusions) and ensure that it meets all of **your** requirements. If upon reading this policy **you** find it does not meet all of **your** requirements, please refer to the cancellation rights section.

Insurer

This insurance sold by DFDS Newcastle Limited, registered address - Nordic House, Western Access Road, Immingham Dock, Immingham, North East Lincolnshire, DN40 2LZ. Registered No. 00995079

This insurance is arranged by Voyager Insurance Services Ltd and underwritten by AWP P&C SA and is administered in the United Kingdom by Allianz Global Assistance. Allianz Global Assistance is a trading name of AWP Assistance UK Ltd. Registered in England No 1710361. Registered office: PO Box 74005, 60, Gracechurch Street, London, EC39 3DS.

AWP P&C SA is duly authorised in France and the United Kingdom and authorised and subject to limited regulation by the Prudential Regulation Authority and the Financial Conduct Authority. Details about the extent of our authorisation and regulation by the Financial Conduct Authority are available from us on request. AWP Assistance UK Ltd and Voyager Insurance Services Ltd are authorised and regulated by the Financial Conduct Authority (FCA).

DFDS Newcastle Limited is an appointed representative of ITC Compliance Limited which is authorised and regulated by the FCA (their registration number is 313486) and which is permitted to advise on and arrange general insurance contracts.

These details can be checked on the Financial Services Register by visiting the FCA's website on www.fca.org.uk/register or by contacting them on 0800 111 6768.

Allianz Global Assistance acts as an agent for AWP P&C SA for the receipt of customer money, settling claims and handling premium refunds.

Voyager Insurance Services Ltd acts as an agent for AWP P&C SA for the receipt of customer money and handling premium refunds.

Financial Services Compensation Scheme (FSCS)

For **your** added protection, the insurer is covered by the FSCS. **You** may be entitled to compensation from the scheme if the insurer cannot meet its obligations. This depends on the type of business and the circumstances of the claim. Insurance provides protection for 90% of the claim, with no upper limit. Further information about the compensation scheme arrangements is available from the FSCS, telephone number 0800 678 1100 or 020 7741 4100 or by visiting their website at www.fscs.org.uk.

Governing law

Unless agreed otherwise, English law will apply and all communications and documentation in relation to this policy will be in English. In the event of a dispute concerning the policy the English courts shall have exclusive jurisdiction.

Contracts (Rights of Third Parties) Act 1999

We, the insurer and **you** do not intend any term of the agreement to be enforceable by any third party pursuant to the Contracts (Rights of Third Parties) Act 1999.

Making a claim

To claim, please visit the website www.azgatravelclaims.com. This will lead you to our online claims notification service where claim forms can be obtained immediately via email or by downloading directly from the site. Alternatively, please contact;

**DFDS Travel Insurance Claims Department,
PO Box 451, Feltham, TW13 9EE
Tel: 020 8603 9958
Email: travel.claims@allianz-assistance.co.uk**

You should fill in the form and send it to us as soon as possible with all the information and documents we ask for. It is essential that you provide us with as much detail as possible to enable us to handle your claim quickly. Please keep photocopies of all information you send us.

You will need to obtain some information about your claim. Below is a list of the documents we will need in order to deal with your claim.

For all claims

- Your original journey booking invoice(s) and travel documents showing the dates and times of travel.
- As much evidence as possible to support your claim.
- Original cancellation invoice(s) detailing all cancellation charges incurred.
- For claims relating to illness or injury a medical certificate will need to be completed by the treating doctor. A certified copy of the death certificate is required in the event of death.
- If your claim results from any other circumstances, please provide evidence of these circumstances.

Complaints procedure

It is the intention to give you the best possible service but if you do have any questions or concerns about this insurance or the handling of a claim you should follow the complaints procedure below.

Complaints regarding:

A. The sale of your policy, please contact;

DFDS
**International Passenger Terminal,
North Shields, NE29 6EE.**
Tel: 0191 296 0101
Website: www.dfds.co.uk

Complaints regarding:

B. Your claim, please contact;

**Customer Service,
Allianz Global Assistance, 102 George Street,
Croydon, CR9 6HD**
Telephone: 020 8603 9853
Email: customersupport@allianz-assistance.co.uk

Please supply us with your name, address, policy number and claim number where applicable and enclose copies of relevant correspondence as this will help us to deal with your complaint, in the shortest possible time.

If you are still not satisfied, you have the right to ask the Financial Ombudsman Service to review your case. This will not affect your right to take action against us. The address is:

The Financial Ombudsman Service
Exchange Tower, Harbour Exchange Square
London, E14 9SR
Tel: 0300 123 9123 or 0800 023 4567
Fax: 0207 964 1001

Email: complaint.info@financial-ombudsman.org.uk

The FOS is an independent body that arbitrates on complaints about general insurance products. It will only consider complaints after we have provided you with written confirmation that our internal complaints procedure has been exhausted. Please always quote your insurance reference and claim number and enclose copies of relevant documentation. This procedure is intended to provide you with prompt and practical assistance in dealing with any complaints but does not affect your legal rights.

Your statutory rights are not affected if you do not follow the complaints procedure above. For further information about your statutory rights contact your local authority, Trading Standards Service or Citizens Advice Bureau.

Definitions

Listed below are certain words that appear throughout the policy. In all cases they will be shown in bold and will have the meanings shown below.

Accidental means a sudden, unexpected, unusual, specific, violent, external event, which occurs at a single identifiable time and place and independently of all other causes, resulting directly, immediately and solely in physical bodily injury which results in a loss.

Business colleague means any person that you work closely with whose absence for a period of one or more complete days necessitates the cancellation of the trip as certified by a director of the business.

Channel Islands means Jersey, Guernsey, Sark, Alderney and Herm.

Doctor means a legally qualified doctor holding the necessary certification in the country in which they are currently practising, other than you or a relative.

Home means your residential address in the United Kingdom, Channel Islands or Isle of Man.

Insurer means AWP P&C SA.

Non-traveller means your relatives or business colleagues who are not travelling with you and people with whom you have arranged to stay.

Public transport means any aeroplane, ship, train or coach on which you are booked to travel.

Relative means husband or wife (or partner with whom you are living at the same address), parent, grandparent, parent-in-law, brother, sister, child, grandchild, brother-in-law, sister-in-law, son-in-law, daughter-in-law or fiancé(e).

Resident means a person who has their main home and is registered with a doctor in the United Kingdom, the Channel Islands or the Isle of Man and has not spent more than six months abroad during the year before the policy was issued.

Trip means any holiday, leisure or business trip which starts and ends in your home for which you have paid the appropriate premium as shown on your policy schedule for the full duration of your trip.

United Kingdom (UK) means England, Scotland, Wales and Northern Ireland.

Section 1

Cancellation

Cover under this section starts from the date shown on your certificate or the date travel is booked, whichever is the later.

You are covered up to the amount shown in the benefits schedule for your proportionate share of the unused travel and accommodation costs (including unused pre-booked excursions up to a value of £100) that have been paid or where there is a contract to pay that cannot be recovered from anywhere else it is necessary to cancel the planned trip because of any of the following events involving you or a travelling companion that first occur during the period of insurance;

- a. the accidental injury, illness or death of you, your relative, your travelling companion, your business colleague or person with whom you intended to stay.
- b. receipt of a summons for jury service, being subpoenaed as a court witness or being placed in compulsory quarantine.
- c. unexpected requirement for emergency and unavoidable duty as a member of the armed forces, police, fire, nursing, ambulance or coastguard services resulting in cancellation of previously agreed leave.
- d. redundancy, provided that you are entitled to payment under the current redundancy payments legislation and that at the time of booking your trip you had no reason to believe that you would be made redundant.
- e. your presence being required to make your property safe and secure following fire, flood or burglary that causes serious damage at your home within 48 hours prior to your departure, or whilst you are away.
- f. your car becoming unusable as a result of theft, fire or road traffic accident within 7 days prior to your departure. This only applies if you are planning to go on a self-drive trip in the car.

You are not covered for

- a. anything not included in You are covered above.
- b. any directly or indirectly related claims if at the time this insurance was arranged and each time you make arrangements for a trip, you or your travelling companions insured under this policy or any non-travellers upon whose health your travel plans depend;
 - i. have been given a terminal diagnosis, or
 - ii. are on a waiting list for surgery, treatment or investigation at a hospital, clinic or nursing home or are awaiting the results of any tests or investigations, or
 - iii. are undergoing a course of treatment at a hospital, clinic or nursing home, or
 - iv. have any medical condition for which a diagnosis has not yet been received, or
 - v. are planning to travel against the advice of a doctor or travelling specifically to seek, or you know you will need, medical treatment while you are away, or
 - vi. have any medical condition for which the recommended treatment or prescribed medication as directed by a doctor, is not being taken.
- c. any claim related to the health of a non-traveller if you made arrangements for your trip in the knowledge that their state of health is likely to cause you to cancel or amend your travel plans, unless agreed by us and confirmed in writing. If you are in any doubt, please call Voyager Insurance Services Ltd on 01483 562662.
- d. any claim arising as a result of your injury or illness unless a qualified doctor provides a certificate confirming that it is necessary for you to cancel your trip.
- e. any cost incurred in respect of visas obtained in connection with the trip.
- f. disinclination to travel.
- g. failure to obtain the necessary passport, visa or permit for your trip.
- h. the withdrawal from service of an aircraft, cross-channel train or sea vessel (temporarily or permanently), on which you are booked to travel, by the carrier or on the recommendation or order of any government, civil aviation authority, port authority, rail authority or other similar authority in any country.

General exclusions

You are not covered for claims arising out of:

1. loss or damage directly or indirectly occasioned by, happening through or in consequence of war, terrorism, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalisation, or requisition or destruction of or damage to property by or under the order of any government or public or local authority.
2. loss, damage, expense or indemnity incurred as a result of travelling to an area that the Foreign and Commonwealth Office (or its equivalent in other EU Countries) have advised against travel provided that such loss, damage, expense or indemnity is directly or indirectly related to any such circumstances that are the reason for the advice.
3. loss, damage, expense or indemnity directly or indirectly resulting from or attributable to radioactive contamination of any nature.
4. **your** suicide or attempted suicide or **your** deliberate exposure to unnecessary danger (except in an attempt to save human life).
5. any epidemic or pandemic.
6. **you** being under the influence of alcohol, solvents or drugs, or doing anything as a result of using these substances (except drugs prescribed by a **doctor** but not for the treatment of drug addiction).
7. **you** taking part in civil commotions or riots of any kind.
8. any loss caused as a direct or indirect result of anything **you** are claiming for, for example loss of earnings, unless it says differently in the policy.
9. **you** breaking or failing to comply with any law whatsoever.
10. any financial incapacity, whether directly or indirectly related to the claim.
11. the bankruptcy or insolvency of a tour operator, travel agent, transport company or accommodation supplier.
12. a tour operator failing to supply advertised facilities.
13. any government regulation or act.
14. **you** travelling against any health requirements stipulated by the carrier, their handling agents or any other **public transport** provider.

General conditions

You must comply with the following conditions to have the full protection of **your** policy. If **you** do not comply **we** may at **our** option cancel the policy or refuse to deal with **your** claim or reduce the amount of any claim payment.

1. **you** are a **resident** of the **UK, Channel Islands** or Isle of man.
2. there is certain information that **we** need to know as it may affect the terms of the insurance cover **we** can offer **you**. **You** must, to the best of **your** knowledge, give accurate answers to the questions **we** ask when **you** buy **your** travel insurance policy. If **you** do not answer the questions truthfully it could result in **your** policy being invalid and could mean that all or part of a claim may not be paid. If **you** think **you** may have given **us** any incorrect answers or if **you** want any help, please contact **Voyager Insurance Services Ltd** on **01483 562662** as soon as possible and **we** will be able to tell **you** if **we** can still offer **you** cover.
3. **you** must tell **us** as soon as possible about any change in circumstance which affects **your** policy, including **you**, a travelling companion, a **business colleague** or **relative** receiving confirmation of a new or changed medical condition or currently being under medical investigation, change in sporting activity or leisure activities **you** intend to participate in during **your trip** or any additional person(s) to be insured under this policy. **We** have the right to reassess **your** coverage, policy terms and/or premium after **you** have advised **us** of any change in circumstance. If **you** do not advise **us** of any change then any related claim may be reduced or rejected or **your** policy may become invalid.
4. **you** must tell **us** if **your** plans for **your trip** include travel to areas affected or threatened by war or similar risks as set out in general exclusion 1. **We** reserve the right not to cover such risks or, if **we** will cover them, to apply special terms or conditions and/or charge an additional premium as **we** think appropriate. No cover for such risks shall attach unless **you** accept such terms, including any additional premium, before **you** depart.
5. **you** must advise **us** of any possible claim as soon as possible. **You** must supply **us** with full details of all the circumstances and any other information and documents **we** may require.
6. **you** must agree to have medical examination(s) if required. In the event of **your** death, **we** are entitled to have a post mortem examination. All such examinations will be at **our** expense.
7. **you** must assist **us** to obtain or pursue a recovery or contribution from any third party or other insurers

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(including the Department of Work and Pensions) by providing all necessary details and by completing any forms.

8. **you** must pay **us** back within 1 month of demand any amounts that **we** have paid on **your** behalf that are not covered by this insurance.
9. **you** must take all reasonable steps to avoid or minimise any loss that might result in **you** making a claim under this insurance.
10. **you** must comply with all the terms, provisions, conditions and endorsements of this insurance. Failure to do so may result in a claim being declined.
11. **we** may take action in **your** name but at **our** own expense to recover for **our** benefit the amount of any payment made under this insurance.
12. this insurance is non-transferable. If a **trip** is cancelled for any reason other than that described in section 1 - cancellation then the cover for that **trip** terminates immediately and no refund of premium in whole or part will be made.
13. if **you** or anyone acting on **your** behalf makes any claim knowing it to be false or fraudulent in any way then this insurance shall become void, premiums non-refundable and all claims shall be forfeited.

Important notice

We would like to draw **your** attention to some important features of **your** insurance including:

1. Insurance document

You should read this document carefully. It gives full details of what is and is not covered and the conditions of the cover. Cover can vary from one policy to another so **you** should familiarise yourself with this particular insurance.

2. Conditions and exclusions

Specific conditions and exclusions apply to individual sections of **your** insurance, whilst general exclusions and conditions will apply to the whole of **your** insurance.

3. Health

This insurance contains restrictions regarding existing medical problems concerning the health of the people travelling and of other people upon whose health the **trip** depends. **You** are advised to read the document carefully.

4. Limits

This insurance has limits on the amount the insurer will pay under the section.

5. Reasonable care

You need to take all reasonable care to protect yourself, as **you** would if **you** were not insured.

6. Customer service

We always try to provide a high level of service. However, if **you** think **we** have not lived up to **your** expectations, please refer to the complaints procedure.

7. Cancellation rights

This insurance contains a 14 day 'cooling off' period during which **you** can return it and get a full refund, providing **you** have not travelled and there are no claims. **We** reserve the right to deduct from the rebate of premium the necessary costs incurred in processing the original sale and cancellation.

8. Fraudulent claims

It is a criminal offence to make a fraudulent claim.

Data protection notice

We and DFDS Seaways Limited care about **your** personal data.

This summary below and **our** full privacy notice explain how **we** protect your privacy and uses **your** personal data. **Our** full Privacy Notice is available at www.allianz-assistance.co.uk/privacy-policy/

If a printed version is required, please write to Legal and Compliance Department, Allianz Global Assistance, 102 George Street, Croydon CR9 6HD.

For DFDS Seaways Limited's full privacy notice, please www.dfdsseaways.co.uk/privacy-policy

• How will we obtain and use your personal data?

We will collect your personal data from a variety of sources including:

- Data that **you** provide to **us**; and
- Data that may be provided about **you** from certain third parties, such as **your** insurance broker and **doctors** in the event of a claim for medical reasons.

We will collect and process **your** personal data in order to comply with **our** contractual obligations and/or for the purposes of our legitimate interests including:

- Entering into or administering contracts with **you**;
- Informing **you** of products and services which may be of interest to **you**.

• Who will have access to your personal data?

We may share **your** personal data:

- With public authorities, other Allianz Group companies, industry governing bodies, regulators, fraud prevention agencies and claims databases, for underwriting and fraud prevention purposes;
 - With other service providers who perform business operations on **our** behalf;
 - Organisations who **we** deal with which provide part of the service to **you**;
 - To meet **our** legal obligations including providing information to the relevant ombudsman if you make a complaint about the product or service that **we** have provided to **you**.
- We** will not share information about **you** with third parties for marketing purposes unless **you** have specifically given **us your** consent to do so.

• How long do we keep your personal data?

We will retain your personal data for a maximum of seven years from the date the insurance relationship between **us** ends. If **we** are able to do so, **we** will delete or anonymise certain areas of **your** personal data as soon as that information is no longer required for the purposes for which it was obtained.

• Where will your personal data be processed?

Your personal data may be processed both inside and outside the European Economic Area (EEA). Whenever **we** transfer your personal data outside the EEA to other Allianz Group companies, **we** will do so on the basis of Allianz's approved binding corporate rules (BCR). Where Allianz's BCR do not apply, **we** take steps to ensure that personal data transfers outside the EEA receive an adequate level of protection.

• What are your rights in respect of your personal data?

You have certain rights in respect of your personal data. **You** can:

- Request access to it and learn more about how it is processed and shared;
- Request that **we** restrict any processing concerning you, or withdraw **your** consent where **you** previously provided this;
- Request that **we** stop processing it, including for direct marketing purposes;
- Request that **we** update it or delete it from our records;
- Request that **we** provide it to you or a new insurer; and
- File a complaint.

• Automated decision making, including profiling

We carry out automated decision making and/or profiling when necessary.

• How can you contact us?

If **you** would like a copy of the information that **we** hold about **you** or if **you** have any queries about how **we** use **your** personal data, **you** can contact **us** as follows:

For Allianz Global Assistance

- **By post:** Data Protection Officer, AWP Assistance UK Ltd, 102 George Street, Croydon CR9 6HD
- **By telephone:** 020 8603 9853
- **By email:** AzPUKDP@allianz.com

For DFDS Seaways Limited

- **By post:** Data Protection Officer, DFDS A/S, Sundkrogsgade 11, DK-2100, Copenhagen
- **By telephone:** + 45 3342 3342 or local DFDS office
- **By email:** privacy@dfds.com

This policy document is available in large print, audio and Braille. Please contact us on 01483 562662 and we will be pleased to organise an alternative version for you.