



Personal Accident Policy

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Section 1 – Table of benefits

The **table of benefits** below shows the item numbers, a description of those items and amounts an **insured person** is covered for by this policy dependant on the benefit level selected (Gold or Platinum) which will be shown in the **schedule**. The cover is provided subject to the terms of the policy, including the conditions set out in 'Section 6 - Benefit limitations' and the exclusions set out in 'Section 5 - What is not covered' of this policy. Please read this policy carefully to ensure that **you** are fully aware of what it covers.

Item Description	Benefit Level	
	Gold *	Platinum *
1) Accidental death	€30,000	€60,000
2) Quadriplegia	€300,000	€600,000
3) Paraplegia	€150,000	€300,000
4) Permanent total disablement	€125,000	€250,000
5) Loss of limb:		
a) two or more	€125,000	€250,000
b) one	€65,000	€130,000
6) Loss of sight:		
a) in both eyes	€125,000	€250,000
b) in one eye	€ 65,000	€130,000
7) Loss of hearing:		
a) in both ears	€30,000	€60,000
b) in one ear	€12,500	€25,000
8) Loss of an entire shoulder, elbow, hip, knee, wrist or ankle	€12,500	€25,000
9) Loss of:		
a) one entire thumb	€20,000	€40,000
b) one entire forefinger	€12,500	€25,000
c) any other entire finger or one big toe	€6,000	€12,000
d) any other entire toe	€1,250	€2,500
10) Loss of the entire spine (vertebral column) with no injury to the spinal cord	€30,000	€45,000
11) Full thickness burns which cover:		
a) 27% or more of the body surface	€5,000	€10,000
b) 18-26% of the body surface	€4,000	€8,000
c) 9-17% of the body surface	€3,000	€6,000
d) 4.6-8% of the body surface	€1,500	€3,000
e) up to 4.5%	€500	€1,000
12) A fracture to:		
a) one or more bones of the leg below the hip joint to the ankle joint (femur, patella, tibia and fibula bones)	€750	€1,500
b) one or more bones of the arm below the shoulder joint to the wrist joint (humerus, radius and ulna bones)	€375	€750
13) Dislocation of a:		
a) hip	€550	€1,100
b) knee	€350	€700
c) wrist	€250	€500
d) elbow	€250	€500
e) ankle	€100	€200
f) shoulder	€100	€200
g) finger or thumb (one or more joints of a finger or thumb)	€50	€100
h) toe (one or more joints)	€50	€100
i) jaw	€50	€100
14) Physiotherapy considered medically necessary by a doctor following a valid claim under items 12 or 13 within 26 weeks of the fracture or dislocation .		
Maximum cost of each session	€30	€30
Maximum number of sessions per accident	5	10
15) Hospitalisation as an inpatient (payable for up to 26 weeks following an accident). Amount per day	€65	€130

* The accidental death benefit for **children** is fixed at €5,000 (Gold cover) and €10,000 (Platinum cover). For **children** all other benefits are 10% of the adult benefit levels shown in the **table of benefits**. For **bodily injury** sustained whilst on a **motorcycle** all benefits are reduced by 50%.

Section 2 – Introduction

This policy sets out the terms of the personal accident cover underwritten by AIG Europe Limited, please read it carefully. It tells an **insured person** (also referred to as **you, your** or **yourself** in this policy) what is covered, what is not covered, what to do if **you** want to make a claim and who to call if **you** need help.

You should familiarise **yourself** with the cover provided by this policy and all the terms, conditions, limitations and exclusions that apply. **You** should read this policy in conjunction with the **schedule** and review the cover periodically to ensure it continues to meet **your** needs.

If you have any questions about **your** policy or wish to make any changes, please call Customer Services on 1800 646 747. Lines are open between 9:00 am and 5:00 pm Monday to Friday or e-mail Customer Services on postmaster.ie@aig.com.

This policy document, together with the **schedule**, the application form and any endorsements, collectively form evidence of the contract between the **policyholder** and **us** and applies to whichever level of cover that has been selected (Gold or Platinum). **We** agree to provide the insurance cover described in this policy to **insured persons** provided that the premium is paid when it is due and **we** agree to accept it.

Section 3 – Scope of insurance

If **you** have an **accident** after the **effective date** and before **your** insurance finishes, which results in **you** suffering **bodily injury** which solely and independently of any other cause and within 24 months of the date of the **accident**, causes death, **permanent disability**, **full thickness burns**, specified **fractures**, specified **dislocations**, physiotherapy or **hospitalisation** (specifically mentioned in the **table of benefits**), **we** will pay the amount shown in the **table of benefits**.

Section 4 – Definitions

We use words in this policy which have a specific meaning, and sometimes those meanings are unique to this policy. These words are shown below and each time one of them is used in the policy and **schedule**, it is shown in bold type. Plural forms of the words defined have the same meaning as the singular form.

Accident

A sudden, unexpected and specific event, external to the body, which occurs at an identifiable time and place.

Bodily injury

An identifiable physical injury to an **insured person's** body which is caused directly and solely by an **accident**, is not intentionally self-inflicted and does not result from sickness or disease.

Child

A person who is over 6 months and under 18 years of age, or 23 years of age if they are in full time education.

Day

A period of 24 hours in a row.

Dislocation

Displacement of the bones at a joint which requires their restoration by a **doctor**.

Doctor

A registered medical practitioner who is not **you**, or related to **you**, or works for **you**, who is currently registered with the Irish Medical Council (or foreign equivalent) to practise medicine.

Effective date

The start date of the policy shown on the **schedule** or the date an **insured person** is added.

Fracture

A break in the full thickness of the bone.

Full thickness burns

Burns which result in the destruction of both the epidermis (the outer layers of the skin) and dermis (the layers of the skin that contain hair follicles, nerve endings, sweat and sebaceous glands), and which require surgery or a skin grafting to treat.

Gradually operating cause

A cause that is the result of a series of events which occur or develop over time that cannot be attributable to a single **accident**.

Hospital

An institution which has accommodation for inpatients and facilities for diagnosis, surgery and treatment. It does not include a long-term nursing home, a rehabilitation centre, an old people's or convalescence home or an extended-care facility.

Hospitalisation

Admission to a **hospital** as an **inpatient** and for at least 24 hours in a row.

Inpatient

An **insured person** who has gone through the full admission procedure and for whom a clinical case record has been opened and whose admission is necessary for the medical care and treatment of **bodily injury**.

Insured person

The person or persons shown on the **schedule**.

Loss

Permanent, total and irrecoverable loss of use or the permanent and total loss by physical severance, resulting in separation.

Loss of hearing

Permanent, total and irrecoverable loss of hearing resulting in the **insured person** being classified as **profoundly deaf**.

Loss of limb

In the case of a leg or **lower limb**:

- a) loss by permanent physical severance at or above the ankle; or
- b) permanent, total and irrecoverable loss of use of a complete foot or leg.

In the case of an arm or **upper limb**:

- a) loss by permanent physical severance of the four fingers at or above the metacarpophalangeal joints (where the fingers join the palm of the hand); or
- b) permanent, total and irrecoverable loss of use of a complete arm or hand.

Loss of sight

Permanent, total and irrecoverable loss of sight:

- a) in both eyes if the **insured person's** name is added to the Register of Blind Persons on the authority of a fully qualified ophthalmic specialist.
- b) in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale (seeing at 3 feet what the **insured person** should see at 60 feet).

Lower limbs

The thigh, knee, leg below the knee and foot.

Medical consultant

A medical practitioner who has a current full registration with the Irish Medical Council and who:

- holds a public consultant post; or
- has held a public consultant post in the past and now practises within the same specialist field; or
- holds the necessary qualifications for a public consultant post together with evidence of appropriate general professional and higher specialist training to a standard required for such a post in the speciality in which he/she intends to work and has been appointed as a consultant to a hospital.

Motorcycle

A two-wheeled motor driven vehicle.

Osteoporosis

A disease causing thinning of the bone out of proportion to age.

Paraplegia

The permanent and total paralysis of both **lower limbs**, bladder and rectum.

Parent

A person with parental responsibility including a legal guardian acting in that capacity.

Pathological fracture

Any **fracture** in an area where disease has caused weakening of the bone.

Permanent disability

A disability which is permanent, total and irrecoverable, as specifically listed in items 2-10 in the **table of benefits**.

Permanent total disablement

The inability to work in any gainful employment whatsoever and which in all probability will continue for the rest of the **insured person's** life.

Policyholder

The person that has applied and paid for this policy, is shown on the **schedule** and is over 18 years of age.

Profoundly deaf

The inability to hear sounds when tested by a qualified audiologist quieter than 90 decibels across frequencies between 500 Hz and 3,000 Hz.

Quadriplegia

The permanent and total paralysis of both **lower limbs** and both **upper limbs**.

Schedule

The certificate showing the name of the **policyholder**, **insured persons**, the **effective date** of cover, the level of cover purchased (Gold or Platinum) and the premium, which forms part of this policy and should be read in conjunction with this policy document.

Table of benefits

The part of the document that describes how much **we** will pay for the type of **bodily injury** suffered by an **insured person**.

Upper limbs

The arm below the shoulder, the elbow, forearm and hand.

War

Military action, either between nations or resulting from civil war or revolution.

We, us or our

AIG Europe Limited.

You, your or yourself

An **insured person**.

Section 5 – What is not covered

No benefit for **bodily injury** will be payable:

- a) if the **accident** occurs in a country where a state of **war** exists (declared or not) if the **accident** was the direct consequence of the **war**;
- b) if **bodily injury** is sustained while **you** are flying, unless **you** are a fare-paying passenger on a commercial flight;
- c) if **you** take a drug or drugs other than according to the manufacturer's instructions or as prescribed by a registered medical practitioner;
- d) if **you** take a drug or drugs for the treatment of drug addiction;
- e) if **your bodily injury** is sustained whilst directly involved in an unlawful act;
- f) if **you** deliberately or recklessly expose **yourself** to danger;

- g) that results in fibromyalgia (a syndrome characterised by chronic pain in the muscles and soft tissues surrounding joints, fatigue and tenderness at specific sites in the body), myalgic encephalomyelitis (muscle pains and inflammation of the brain and spinal cord), chronic fatigue syndrome, post-traumatic stress disorder or other anxiety disorder, any mental disorder or any disease of the nervous system;
- h) if the **accident** occurs whilst driving, or in charge of, a vehicle and **your** blood/urine alcohol level is above the legal limit stated in the laws of the country where the **accident** occurs;
- i) if **bodily injury** is contributed to by **you** participating in, practising or training for a sport as a professional or semi-professional;
- j) if it results from sickness or disease;
- k) if **your** injuries are intentionally self-inflicted;
- l) if **bodily injury** is sustained whilst **you** commit or attempt to commit suicide;
- m) resulting from a **gradually operating cause**;

Section 6 – Benefit limitations

1. If **your** death results from **bodily injury** and this occurs within 26 weeks of the date of an **accident**, we will only pay the amount for item 1, death.
2. In the **table of benefits**:
 - a) we will only pay one of items 1-4 inclusive, 5a) or 6a) to an **insured person** in respect of any one **accident** and all cover under this policy will stop in respect of that **insured person** from the date of the claim payment.
 - b) **you** can claim under more than one of items 5b), 6b) and 7-10 inclusive for any one **accident**. The amounts payable will be added together and will be subject to a maximum total payment of €125,000 for Gold cover and €250,000 for Platinum cover, for all items claimed and all cover under this policy will stop in respect of that **insured person** from the date of the claim payment.
 - c) we will not pay the benefits for items 8 or 9 as well as item 5a) or 5b).
 - d) we will not pay the benefit for both item 5a) and 5b); both items 6a) and 6b) or both items 7a) and 7b).
 - e) The accidental death benefit for **children** is fixed at, €5,000 (Gold cover) and €10,000 (Platinum cover). Benefits described in items 2-15 only, for **children** are 10% of the benefit levels shown in the **table of benefits**.
 - f) we will not pay item 4, **permanent total disablement** if the **insured person** is under 16 years of age or over 65 years of age.
 - g) we will make a payment in respect of item 12a) and 12b) for a **fracture** that occurs on both the left and right side of **your** body in the same **accident** up to a maximum of 4 payments in total per **accident**.
 - h) we will make only one payment in respect of item 13 for each **dislocation** (a)-i) inclusive). Once we have paid a claim for a **dislocation**, we will not pay any further claim for the same joint if **you** **dislocate** it again in another **accident**. This restriction applies to each **insured person** for the lifetime of the policy.
 - i) we will pay 50% of the amount shown under item 15 for **hospitalisation** for **insured persons** aged over 65 at the date of the **accident**.
 - j) we will pay item 16 for each **day** of **hospitalisation** that occurs within the first 26 weeks of the **accident**.
 - k) if **you** suffer **bodily injury** whilst on a **motorcycle** the amounts payable for all items claimed under this policy are reduced by 50% and the maximum total amount payable is €125,000 (Gold cover) and €250,000 (Platinum cover) for any one **accident**.
 - l) the maximum total amount payable under this policy per **insured person** for all claims arising from one **accident** is €300,000 for Gold cover and €600,000 for Platinum cover. In the case of a **child** the maximum amount payable is €25,000 for Gold cover and €50,000 for Platinum cover. If we pay the maximum amount all cover under this policy will stop in respect of that **insured person** from the date of the claim payment.
 - m) if **you** have an **accident** and make a claim under item 12 involving a **fracture** of a bone and either **osteoporosis** or a **pathological fracture** is:
 - first diagnosed at the date of this **fracture**; or
 - had been diagnosed prior to the date of **fracture**;
 that claim will be paid but no further claims under item 12 will be paid for the lifetime of this policy.
3. Cover under this policy will stop on the first premium due date following **your** 75th birthday.
4. We will not pay any benefit if **you** reside outside of the Republic of Ireland for more than 180 consecutive days (see 'Section 8 - General policy conditions' for more details).

Section 7 – Existing medical conditions

We will only pay for the **bodily injury** **you** have suffered if it is directly as a result of the **accident**. Any existing physical impairment or medical condition **you** have before the **accident** will be taken into consideration in calculating the amount payable on the basis of the difference between **your** physical impairment or medical condition before and after the **accident**.

We will ask **your doctor** (if suitably qualified) or the **medical consultant** that treated **you** to make these assessments (or an independent **medical consultant** or other suitably qualified person if they are unable or unwilling to do so). The assessment will be converted into a percentage and applied to the policy benefit payable.

Example

You are partially blind in **your** left eye and **you** then had an **accident** which left **you** totally blind in both eyes and **you** make a claim under item 6a) for **loss of sight** in both eyes. We will ask an independent ophthalmic specialist to assess the difference between the amount of vision **you** had before and after the **accident** and if the partial blindness contributed to the cause of the **accident**. If the independent ophthalmic specialist assesses the pre-accident vision in the left eye at 50%, we will pay 50% of the benefit payable but under item 6b) for **loss of sight** in one eye. If the vision in the right eye was normal before the **accident**, we will pay 100% of the benefit payable also under item 6b) for **loss of sight** in one eye for the total **loss of sight** in that eye. If **you** had purchased Gold cover, **you** will receive a payment of €97,500.

Section 8 – General policy conditions

1. Assignment

This policy may not be assigned or transferred unless agreed by us in writing.

2. Claim notification

All claims must be notified as soon as is reasonably practical after the event which causes the claim. Failure to do so may result in our rejection of the claim if it is made so long after the event that we are unable to investigate it fully, or may result in the insured person not receiving the full amount claimed for if the amount claimed is increased as a result of the delay.

3. Interest on amounts payable

We will not pay interest on any amount paid under this policy.

4. Disappearance

If you disappear and, after a suitable amount of time and on the evidence provided, it is reasonable for us to believe that you have died as the result of an accident, then we will pay the accidental death benefit to your legal representatives or executor and their receipt will discharge our liability under the policy. If this belief is incorrect then the amount paid must be returned to us.

5. Law and jurisdiction

This policy will be governed by the laws of the Republic of Ireland and its courts will have exclusive jurisdiction, unless agreed to the contrary by the policyholder and us before the effective date.

The terms and conditions of this policy will only be available in English and all communication relating to this policy will be in English.

6. Policy and premium alteration

We may change the terms and conditions, including the premium, of the policy as considered necessary to reflect any event outside our control that we expect to have an impact on future claims which we could not reasonably have foreseen when we last reviewed the policy terms and the premium, or in the event of any change in the law affecting this policy, for example a change in Insurance Premium Tax or other tax. Before we make any changes, we will give the policyholder 30 days notice in writing to the policyholder's last known address.

If the changes are acceptable to the policyholder then this policy will continue.

If the changes are not acceptable, the policyholder may cancel this policy in accordance with the 'Cancelling the policy after the cooling off period' section. If this happens no claims will be paid for any bodily injury suffered by an insured person after the date of the cancellation. We will return to the policyholder any premium already paid to us in advance for cover that is unused at the date of cancellation.

The policyholder is responsible for notifying insured persons of such cancellation or any changes to the terms and conditions.

7. Premium payment

The premium is payable monthly or annually, as shown in the schedule.

If the premium is payable on a monthly basis, it is due by the first premium due date and subsequently on the 1st day of each month thereafter.

Each premium paid, purchases cover under the terms of this policy for the whole calendar month the premium due date falls in.

If the premium is payable annually, it is due by the first premium due date and on each anniversary of that date. Each premium paid purchases cover in the terms of this policy for the 12 calendar months following the due date.

If any premium is not paid on the date it is due, the policyholder has 30 days in which to pay it. If it is not paid during that period, the policy will be automatically cancelled from the date on which the unpaid premium was due. If the premium is paid during the 30 day period, then cover will operate as if it had been paid on the due date. No claims will be paid for any accident that occurs after the 30 days have passed if the premium remains unpaid.

8. Residence outside the Republic of Ireland

Cover under this policy cannot continue for an insured person who resides outside the Republic of Ireland for more than 180 consecutive days. Cover will be cancelled from the 181st day that an insured person resides outside the Republic of Ireland. Please tell us as soon as this happens so there is no overpayment of premium.

9. Complying with the policy

To have the full protection of this policy you must comply with the conditions outlined in 'Section 12 - Claims procedure', which are conditions of the policy. Failure to comply with these conditions may determine whether we deny any claim made under this policy or the amount we pay to you in the event of a claim.

Section 9 – Cancellation and cooling off period

Cooling off period

If the cover does not meet the policyholder's requirements the policyholder may cancel this policy within 15 days of the policy effective date shown on the schedule or within 15 days of receiving the policy and schedule, whichever is the later. We will give the policyholder a full refund of any premiums paid less any claim payments. Refunds will be returned to the policyholder within 5 working days from the date we receive notice of cancellation from the policyholder.

Cancelling the policy after the cooling off period

The policyholder may cancel this policy by giving AIG Europe Limited notice in writing to AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1 or by e-mail to postmaster.ie@aig.com

We may cancel this policy by giving the policyholder 30 days notice in writing to the policyholder's last known address.

For monthly paid policies, cover will stop from the next premium due date following the date we receive notification of cancellation. For annually paid policies, cover will stop on the first day of the next calendar month following the date we receive notice of cancellation.

For annual policies, the premium for the period up to the date when the cancellation takes effect will be calculated and any unused portion of the premium which has been paid in advance will be returned to the policyholder less any claim payments. The policyholder is responsible for promptly telling other insured persons that the policy has been cancelled.

No person other than the policyholder has the right to cancel this policy.

Section 10 – Fraud or false information

By the **policyholder**

Any fraud, deliberate dishonesty or deliberate hiding of information connected with the **policyholder's** application for this policy or in connection with a claim, will make this policy invalid. In this event **we** will not refund any premiums and **we** will not consider for payment any claims which have not already been submitted to **us**.

Where claims have been made by **insured persons** (other than the **policyholder**) under this policy, but remain unpaid, prior to the discovery of such fraud, deliberate dishonesty or deliberate hiding of information, where the **insured person** making the claim had no involvement in it, such claims will be considered for payment in the usual way.

By the **insured person**

Any fraud, deliberate dishonesty or deliberate hiding of information by an **insured person** at any time will make this policy invalid for that **insured person**. If this happens, the **insured person** will lose any benefit due to them and they must pay back any benefit that **we** have already paid. If this occurs, **we** will not refund any premiums in respect of that **insured person**.

Section 11 – Payment of benefits

The accidental death benefit will be paid to **your** legal representative or executor and their receipt will discharge **our** liability under the policy. Any other benefit due will be paid to the **insured person** who is the subject of the claim except in the case of a **child**, when it will be paid to the **policyholder** provided that they are a **parent** of the **child** otherwise it will be paid to the **child's parent**.

Section 12 – Claims procedure

We must be notified as soon as reasonably practicable after the **accident** of a claim, by completing a claim form and returning it to **us**. **You** can call **us** on 01-2081400 to request a claim form or, email **us** at claims.ie@aig.com

Failure to notify **us** may result in **our** rejection of the claim if it is made so long after the event that **we** are unable to investigate it fully, or may result in the **insured person** not receiving the full amount claimed for if the amount claimed is increased as a result of the delay.

Claims are to be notified to:

The Manager

Claims Department, AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1

Telephone: 01 208 1400

E-mail: claims.ie@aig.com

We will ask for a reasonable amount of information as evidence in support of the claim at no expense to **us**, including information to show that the **bodily injury** is a result of an **accident**. If the information supplied is insufficient, **we** will identify the further information which is required.

If **we** do not receive the information **we** need, the claim could be rejected.

We may ask **you** to attend one or more medical examinations. If **we** do, **we** will pay the cost of the examination(s) and for any medical reports and records and **your** reasonable travelling expenses to attend, if these expenses are agreed by **us** in advance. If **you** fail to attend without reasonable cause, then **your** claim may be rejected.

You must give **us** permission to obtain medical reports or records needed from any **doctor** or **medical consultant** who has treated **you**; otherwise **we** may not pay the claim.

If **you** have an existing physical impairment or medical condition **we** may ask an independent **medical consultant** to assess how this contributes to the claim. Please see 'Section 7 - Existing medical conditions' of this policy for further details. If **your** injury is not described in the **table of benefits** **we** will assess it in a certain way.

If **you** die, **we** have the right to ask for a post-mortem examination at **our** expense. If this is refused, **we** may not pay the claim.

Section 13 – How we use personal information

AIG Europe Limited is committed to protecting the privacy of customers, claimants and other business contacts. "Personal Information" identifies and relates to **you** or other individuals (e.g. **your** dependants). By providing Personal Information **you** give permission for its use as described below. If **you** provide Personal Information about another individual, **you** confirm that **you** are authorised to provide it for use as described below.

Depending on **our** relationship with **you**, Personal Information collected may include: identification and contact information, payment card and bank account, credit reference and scoring information, sensitive information about health or medical condition, driving pattern information obtained from telematic devices in customer vehicles (where customers have consented), and other Personal Information provided by **you**. Personal Information may be used for the following purposes:

- Insurance administration, e.g. communications, claims processing and payment
- Decision-making on provision of insurance cover and payment plan eligibility
- Assistance and advice on medical and travel matters
- Management and audit of **our** business operations
- Prevention, detection and investigation of crime, e.g. fraud and money laundering
- Establishment and defence of legal rights
- Legal and regulatory compliance, including compliance with laws outside **your** country of residence
- Monitoring and recording of telephone calls for quality, training and security purposes
- Marketing, market research and analysis

To opt-out of marketing communications contact us by e-mail at: postmaster.ie@aig.com or by writing to: Customer Service Team, AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1. If **you** opt-out **we** may still send **you** other important communications, e.g. communications relating to administration of **your** insurance policy or claim.

Sharing of Personal Information – For the above purposes Personal Information may be shared with **our** group companies, brokers and other distribution parties, insurers and reinsurers, credit reference agencies, healthcare professionals and other service providers. Personal Information will be shared with other third parties (including government authorities) if required by law. Personal information (including details of injuries) may be recorded on claims registers (i.e. Insurance Link, and Claims and Underwriting Exchange (CUE), and shared with other insurers. **We** may search these registers to detect and prevent fraud. Details on how Insurance Link operates can be found at <http://info.insurancelink.ie> and CUE at <http://www.insurancedatabases.co.uk>. Personal Information may be shared with prospective purchasers and purchasers, and transferred upon a sale of **our** company or transfer of business assets.

International transfer – Due to the global nature of **our** business Personal Information may be transferred to parties located in other countries, including the United States and other countries with different data protection laws than in **your** country of residence.

Security and retention of Personal Information – Appropriate legal and security measures are used to protect Personal Information. **Our** service providers are also selected carefully and required to use appropriate protective measures. Personal information will be retained for the period necessary to fulfil the purposes described above.

Requests or questions - To request access or correct inaccurate Personal Information, or to request the deletion or suppression of Personal Information, or object to its use, please e-mail: postmaster.ie@aig.com or write to Data Protection Officer, AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1. More details about **our** use of Personal Information can be found in **our** full Privacy Policy at www.aig.ie or **you** may request a copy using the contact details above.

Section 14 – If something goes wrong with our service

Complaints procedure

If **you** feel **you** have cause for complaint **you** should contact **your** broker or if **you** deal with **us** directly the Accident & Health Manager. If, after such contact, **you** remain dissatisfied, **you** should write to **our** Customer Complaints Officer at AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1. Phone: (01) 2081400.

E-mail: customercomplaints.ie@aig.com.

If the complaint is not resolved to **your** satisfaction, **you** should contact the General Manager, AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1.

At any stage, **you** may contact the following:

Insurance Ireland, Insurance House,
39 Molesworth Street, Dublin 2.

Phone: (01) 676 1820. Fax: (01) 676 1943. E-Mail info@insuranceireland.eu

Website-E-Mail info@insuranceireland.eu Web: <http://www.insuranceireland.eu> <http://www.insuranceireland.eu>

The Central Bank of Ireland, PO Box 559, Dame Street, Dublin 2. Phone: 1890 777777

Fax: (01) 671 6561. E-Mail: enquiries@centralbank.ie

Website: www.centralbank.ie

The Financial Services Ombudsman's Bureau,
3rd Floor, Lincoln House, Lincoln Place, Dublin 2.

Phone: Low call 1890 882 090 or (01) 662 0899. Fax: (01) 662 0890. E-mail: enquiries@financialombudsman.ie

Website: www.financialombudsman.ie

Section 15 – How to contact us

If **you** have any questions about **your** policy or wish to make any changes, please call Customer Services on 1800 646 747. Lines are open between 9:00 am and 5:00 pm Monday to Friday or e-mail Customer Services on postmaster.ie@aig.com.

Alternatively **you** can write to:

Customer Services

AIG Europe Limited, 30 North Wall Quay, International Financial Services Centre, Dublin 1

Email: postmaster.ie@aig.com

Section 16 – Other information

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