

Life policy

Fanduel Limited

- Life insurance provides a lump sum benefit for a member's dependants if the member dies whilst in service

A member may be an employee; equity partner, barrister, or member of a Limited Liability Partnership, who meets the eligibility conditions shown in the coverage section. The detailed terms concerning members are contained in the user guide.

- The policy is designed to cover the death in service benefits of registered occupational pension schemes (this includes life assurance schemes)
- Benefits are paid to the trustees of the scheme. They have the power under the trust to choose who will receive the proceeds
- A person will automatically become a member when they first meet the eligibility conditions you have chosen - including the eligibility date and any requirement to be actively at work
- It is important that you provide us with information about new members. Please see the user guide for more details

This Life policy has two parts:

1. This **coverage** document, which contains the key terms of the policy and the cover choices you have made
2. The [user guide](#) UP1126 05-2018 which contains the **general terms** of the policy and also tells you how the insurance works in day to day practical terms

The coverage and the general terms within the user guide together form the contract between us - this is known as the policy.

Policy coverage

Key terms

The trustees will be entitled to the benefits shown in the coverage section when a member dies whilst in service.

Membership benefits are explained in the coverage section which sets out your choice of the following:

Who is covered?

You decide the eligibility conditions for membership. If you have chosen more than one category of membership, the terms applying to each category are shown.

When does cover begin and end?

- The policy begins on the date you choose, this is called the start date
- New members are covered from the date shown in each category
- New members may need to be actively at work (this is defined in the user guide) depending upon the number of eligible employees
- Cover will end on the date you have chosen as the cover cease age or earlier in some circumstances, described in the user guide
- The user guide also explains the circumstances when the policy may terminate earlier

How much is covered?

The coverage section includes your choice of benefits. Cover is usually provided up to the non-medical limit. For members benefits above the non-medical limit, a medical health and lifestyle assessment will be necessary. The results of the assessment will affect the terms on which cover will be offered.

Limits of cover

Details of limits of cover are contained in the coverage section and the user guide. Where more than one death is caused by a catastrophe, a maximum liability will apply for all related claims under this policy and any associated policies.

Premium

We will calculate the premium based on the information you have provided. If we do not have all the information we need, we will charge an approximate premium based on the details we have at that time and make an adjustment when the information is provided. The premium will be adjusted (usually, at the policy anniversary) to take account of any changes in the membership during the preceding year. Any premiums will be due and payable as shown on the invoice we send to you.

Claims

To make a claim, you should notify us as soon as possible to ensure we can pay the claim promptly.

Policyholder obligations

Information

The benefits and the premiums payable under this policy are based on the information you give us. The members covered by the policy and the benefits payable will change during the life of the policy and it is important that you provide us with details of changes. If you do not provide the information we need, this could mean that you will have no cover or that cover is limited. You must provide the evidence, information and access to information we need to assess a claim.

Membership

We may alter the basis on which the premium is calculated if the number of members increases above or falls below the number set out in the user guide. If the membership falls below the minimum, we may cancel the policy. If we do alter the premium calculation basis or cancel the policy, this will be from the next policy anniversary. You must let us know if there are any significant changes to your business (examples of this can be found in the user guide). The user guide contains more detail about the information you need to provide and when.

If the information we need is not provided, this could result in the cancellation of the policy. Alternatively, it could mean that we will refuse or limit cover for a specific claim.

Changes to the policy and the policyholder

This policy may continue for many years. We will make changes to the policy's terms and premium rate from time to time. These will usually be made at the policy review date. But, if there are material changes to the law, regulations affecting state benefits or tax, or changes to the policyholder or an associated company, changes can be made at other times. The circumstances when changes may be made are set out in the user guide. The terms and conditions applying to a claim for a deceased member will be those in force on the date of their death.

Complaints

If you are not completely happy with our service or a claims decision, you can make a complaint to our Customer Resolution team.

Phone: 01306 644761

Email: CustomerResolution@unum.co.uk

Letter: Customer Resolution Team, Unum, Milton Court, Dorking, Surrey RH4 3LZ

Fax: 01306 873635

Please include your preferred contact details.

We will do our best to resolve your complaint but if your complaint has not been resolved within 8 weeks, we will explain why it remains unresolved and inform you of your right to refer the matter to the Financial Ombudsman Service (FOS). Once we have finished investigating your complaint we will issue a Final Response Letter. If you remain dissatisfied you have the right to refer the matter to the FOS. You must refer any complaint to the FOS within 6 months of the date of the Final Response Letter. Please note that some cases may not be eligible for referral to the FOS.

Consumer helpline: 0800 023 4567 / (from mobile) 0300 123 9 123

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

Letter: The Financial Ombudsman Service, Exchange Tower, London E14 9SR

Web: www.financial-ombudsman.org.uk

Coverage

Start date	21 May 2020
Effective date	1 March 2023
Plan name	FanDuel Limited Group Life Assurance Scheme
Policy anniversary	1 March
Policy review date	1 March 2025
Maximum liability limit	£100,000,000
Policy non-medical limit	£1,555,000 (benefit)

The following company is insured under this policy:

1. Fanduel Limited

Company registration number SC333797

Category name 1. All permanent and fixed-term contract employees

Who is eligible for cover

Employment type Employed (PAYE taxed)
Eligibility All permanent and fixed-term contract employees
Entry ages 16 to 64
Cover cease age State Pension Age
New entrants join Daily

Benefits covered

Benefit 4 x salary
Salary definition Basic annual salary as at the date of death
Salary changes Daily
Temporary absence Cover continues until cover cease age for illness or injury and for 3 years for any other reason
Non-medical limit applies Yes