



Cycle Insurance

Policy Document

Please contact the administrator by email at admin@covercloud.co.uk or by phone on 0345 812 0030 if you need any documents to be made available in braille and/or large print and/or in audio format.

Contents

Your Bicycle Insurance policy	page 2
What to look out for	page 2
Policy limitations	page 2
Information relevant to this policy	page 2
General definitions for this policy	page 2
Important information	page 4
Our agreement with you	page 4
Your cancellation rights	page 4
Our right to cancel your policy	page 5
Our complaints procedure	page 5
Making a claim	page 6
Conditions which apply to this policy	page 6
Exclusions which apply to this policy	page 7
Data protection	page 7
Section 1 – Bike & Accessories	page 9
Section 2 - Public Liability	page 11
Section 3 - Personal Accident	page 12
Section 4 - Cycle Rescue	page 14

Your Bicycle Insurance policy

This is **your** policy containing details of the cover **you** have purchased. **We** have made every effort to make the policy details as clear as possible. Please read **your** policy carefully and if **you** have any queries please feel free to contact **us** on admin@covercloud.co.uk and **we** will be pleased to help **you**.

What to look out for

The policy is divided into a number of sections and also includes conditions and exclusions. They are outlined within the individual sections and others are listed on pages 6-7 of this policy and are intended to apply to the policy as a whole.

Some key words, expressions or phrases that have the same meaning whenever they appear in this policy, will be shown in bold throughout and are referred to as definitions. Full details are provided on pages 2 – 3 of the policy.

Policy limitations

Your cover is subject to certain exclusions and conditions. Some will apply to the policy as a whole and others will apply specifically to the sections of the policy **you** have selected and paid for. **Your schedule** will detail the sections of the policy that are in force.

Information relevant to this policy

Your policy provides cover for the parts and the period of insurance shown in **your schedule**. This policy is an agreement between **you** and the parties providing the

cover under the individual parts of this policy but is only valid if **you** pay the premiums.

Please take the time to read **your** policy documentation carefully. If any of the information on which this insurance is based is incorrect or changes, or if **you** have any questions or there is anything that **you** do not understand, please email **us** at admin@covercloud.co.uk.

About the underwriter of this policy

This policy is underwritten by Ageas Insurance Limited. Registered office address Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire, SO53 3YA. Registered number 354568.

Ageas Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, Financial Services Register no 202039.

General definitions for this policy

The following words, expressions or phrases listed below apply to each and every part of the **policy** and will have the same meaning wherever they appear in this **policy** in bold. Additional definitions where they apply to the specific sections of the **policy** will be outlined within those sections. Please refer to the relevant sections of the **policy** for further details:

Accessories – Cycle related equipment which is **your** own property or for which **you** are legally responsible, including specialist cycling clothing, luggage, footwear and headgear

Accident – A sudden and unexpected event arising from **your** use of **your cycle** during the **period of insurance**.

Agreed Value – An amount that **we** have agreed with **you** in respect of the value of **your cycle** that **we** will pay up to in the event of the **total loss** of **your cycle**.

Approved Lock – Any specifically designed **cycle**, motor scooter or motorcycle lock that has been tested and approved to Sold Secure testing standards where indicated below;

- Bicycles up to £750 – Any specifically designed cycle lock.
- Bicycles from £751 to £1500 – A Sold Secure Bronze graded lock or above.
- Bicycles from £1501 to £3000 – A Sold Secure Silver graded lock or above.
- Bicycles over £3000 – A Sold Secure Gold graded lock or above. Or;

Any other specified lock accepted by **us** and specified in an **endorsement**

Average Weekly Wage – **Your** average weekly salary (not including payments for overtime, commission or bonuses) before tax and National Insurance for the 13 weeks immediately before the first date **you** are off work due to the **accident** or illness.

Bodily Injury – Physical injury (other than when directly or indirectly caused by illness or disease) caused solely and directly by a sudden external unforeseen and identifiable **accident** event.

Cycle – Any bicycle, tricycle, tandem or trailer **cycle** powered only by human pedal power or electricity, which is **your** own property, usually kept at the address shown on the **schedule**, for which **you** are legally responsible for and not powered or modified in such a way that it is or becomes subject to the requirements of the Road Traffic Act.

Damage – Sudden and unintentional physical **damage** that happens unexpectedly

Defence Costs – Any costs that could be incurred with **our** prior written consent that would be used to investigate, defend or settle any claim made against **you**.

Deferment Period – The period at the commencement of **temporary total disablement** during which no benefit is payable.

Dental Injury – **Damage** as confirmed by a practicing dentist to **your** sound and natural teeth and supporting structures including **damage** to **your** dentures whilst being worn.

Doctor – A person other than **you**, a member of **your** immediate **family** or an employee of yours, who is licensed to practice medicine or surgery in the country where treatment is given.

Endorsement – Any terms and conditions additional to this **policy** and specified in the **schedule**.

Evidence of Ownership – Proof of purchase, showing the name and address of the seller, details of the **cycle** and/or **accessories** purchased, the date of sale, price paid or any other evidence that demonstrates **your** ownership.

Excess – The amount **you** have to pay in respect of each agreed claim.

Expert Medical Practitioner – A person other than **you** a member of **your** immediate **family** an employee of yours who is qualified as a consultant in the branch of medicine to which the **bodily injury** relates.

Family – Parents, spouse, partner, son, daughter, grandchildren or minors under **your** legal guardianship or siblings, who permanently live with **you**.

Fracture – A break of a bone in the body identified through an X-Ray, computerised tomography (CT) scan or magnetic resonance imaging (MRI) scan and confirmed by a **doctor**.

Home Address – The last known address recorded on **our** system

Immovable Object – Any solid object which cannot be removed with or lifted under or over the **cycle**.

Insured Event – The loss, theft of or **damage** to any insured item.

Insured Person – The person named in the **schedule** as the insured.

Insured Location – The location stated in **your schedule** where **your cycle** and/or **your accessories** are usually kept which may include the following:

- a. your home address; or
- b. a lockable shed, outbuilding or garage which is attached to or within the boundaries of **your** private dwelling and is privately accessed; or
- c. a self-contained lockable private room or communal

hallway inside the halls of residence to which **you** normally reside; or

- d. a purpose-built **cycle** storage facility; or

any temporary residence in which **you** are a resident for a maximum of 28 consecutive days; or any other location agreed by **us** in writing.

Period of Insurance – The period of time for which this **policy** is in force as shown in the **schedule**.

Physiotherapy – The recognised treatments performed by a registered physiotherapist in the **United Kingdom** to improve functional movement.

Policy – This insurance document and the **schedule**, including any endorsements.

Deferment Payment Professional Fees – Legal fees and other costs incurred with **our** prior written authority, including costs incurred by another party that **you** have been made legally liable to pay.

Costs that **you** may pay with **our** consent to assist in pursuit of a civil claim against a third party arising from an **insured event**.

Recovery Operator – The independent company **we** appoint to attend any breakdown.

Schedule – The document showing the details of the **insured person**, the cover provided and any endorsements that apply.

Sound and Natural Teeth – Non-restored teeth that show no sign of being pathologically compromised or adequately and permanently restored teeth with healthy supporting structures or other permanently fitted prostheses.

Sum Insured – The amount as set out on the **schedule**

Temporary Total Disablement – Temporary disablement that has been certified by a **doctor** as entirely preventing **you** from engaging in **your** usual occupation

Terrorism – An act including, but not limited to, the use of force or violence and/or the threat (or perceived threat) thereof of any person or groups of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s) committed for political, religious, ideological or ethnic purposes, or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

Third Party Property – Physical loss or **damage** of tangible property not belonging to **you** or to members of **your family** or household.

Total Loss – Where the total cost to repair **your cycle** and/or **your accessories** is greater than 70% of the current market value.

Unattended – When **your cycle** and/or **your accessories** are left in a location that is not **your insured location** for more than 48 consecutive hours.

United Kingdom – England, Scotland, Wales, Northern Ireland, the Isle of Man and the Channel Islands.

We/Us/Our – Mean any, or all of:

- Ageas Insurance Limited (“Ageas”)
- Call Assist Ltd (“Call Assist”)

- Acumen Insurance Services Limited trading as CoverCloud Insurance
- Jackson Lee Underwriting

You/Your – The **insured person** named in the **schedule** who has a permanent residential address in the **United Kingdom**.

Important information

How to contact us

We are here to help whenever **you** need **us**. If **you** have any questions about **your policy** or would like to discuss any other insurance needs, or need advice please email admin@covercloud.co.uk If **you** would like to write to **us** please write to **Us at**:

CoverCloud Insurance
St Clare House
30-33 Minories
London
EC3N 1PE

In any communication with **us**, please remember to quote **your** full name, address and **your policy** number or **your** claims reference number. This will enable **us** to quickly locate **your policy** or claims details.

How to make a complaint

Full details of the Complaints Procedure can be found on pages 5 and 6. **We** hope that **you** are fully satisfied with **our** service but if for any reason **you** are not, please email **us** at admin@covercloud.co.uk.

Making a claim

Firstly, check **your policy** and certificate to make sure **you** have the appropriate cover. To report an Incident or claim, please use the following contact details:

Lifestyle Claims
Ageas House
Hampshire Corporate Park
Templars Way
Eastleigh
Hampshire
SO53 3YA

Tel: 0330 111 0251

Please note, telephone calls may be recorded for joint protection, training and/or monitoring purposes

Our agreement with you

Your policy is a legal contract between **you** and **us**.

When **you** first take out, make changes to, or renew **your policy**, **we** will ask **you** questions that are relevant to **us** accepting the risk of insurance, and on what terms.

When **you** answer those questions, **you** are required to take care not to misrepresent any information and to give **us** all of the information **you** are asked for. If **you** give **us** incorrect or incomplete information the wrong terms may be quoted which, in certain circumstances could mean that **your policy** might become invalid and/ or **you** might not be entitled to a refund of premium and/or any claim

may not be paid. If **you** are unsure of any question **we** ask **you** or any answer **you** provide, please ask **us** to clarify.

Your policy documents include:

- Information contained from **your** application
- **Your policy schedule**, which confirms the cover **we** are providing, including any endorsements (variations in the terms, conditions and/or exclusions of **your policy**); the **period of insurance**; **your** premium; details about **you** and **your** property and any **excess** that apply to the cover provided;
- This **policy** document, which details the cover **we** provide and the exclusions and conditions which apply;
- Any changes to **your policy** contained in written notices sent to **you** by **us**
- **Your** insurance product information document, which summarises some of the key features and benefits of **your policy**

You need to keep all these documents in a safe place, together with receipts, **evidence of ownership** and value of **your** insured property. **We** would also recommend that **you** keep a record of all information supplied to **us** in connection with **your policy** for future reference.

Our provision of insurance under **your policy** is conditional upon **you** observing and fulfilling the terms, provisions, conditions and clauses of the **policy**.

Please examine **your policy** carefully to ensure it meets **your** needs. If **you** do not understand the terms, exclusions or conditions, or if any information is incorrect or incomplete then please contact **us**.

Your cancellation rights

If **you** decide that **you** wish to cancel this insurance, **you** should simply email us at admin@covercloud.co.uk or write to this address.

CoverCloud Insurance
St Clare House
30-33 Minories
London
EC3N 1PE

Tel: 0345 812 0030

If **you** cancel within 14 days of receiving the documents, **you** will receive a full refund of premium as long as **you** have not made a claim and do not intend to make a claim.

You can cancel at any time after the 14-day period and **you** will receive a full refund provided cancellation of the **policy** is before the **period of insurance** begins.

If the **period of insurance** has begun, **you** can cancel at any time after the 14-day period and **you** will receive a pro-rata refund less an administration charge of £15 for the remaining **period of insurance** provided **you** have not made and do not intend to make a claim.

If **you** pay **your** premium monthly, **your** policy will be cancelled at the next monthly anniversary of the date **your** policy commenced. There will be no refund of premium due as the premium paid will have only been in respect of the cover already received.

If a claim has been made by **you** we will not refund any premium and **you** must still pay **us** the remaining annual premium. If **you** cancel **your** direct debit this does not mean that **you** have cancelled **your** policy.

Our right to cancel your policy

We may cancel **your policy** at any time by giving **you** 7 days' written notice to **your** last known email address (or mailing address if **you** do not have an email address) provided by **you**.

Examples of when **we** might do this includes **you** not paying a premium instalment when due or **us** discovering that **you** have committed fraud or are no longer eligible for cover.

Our complaints procedure

Complaints about a sale

We will do everything possible to ensure that **you** receive at all times excellent service and be there when **you** need **us**. We hope that **you** do not have cause to complain, however if **you** at any time, are dissatisfied with the service **you** have received from **us** and wish to make a complaint **you** can by writing to:

CoverCloud Insurance
St Clare House
30-33 Minorities
London
EC3N 1PE

Tel: 0345 812 0030
Email: admin@covercloud.co.uk

Complaints about a claim or policy coverage

Lifestyle Claims
Ageas House
Hampshire Corporate Park
Templars Way
Eastleigh
Hampshire
SO53 3YA

Tel: 0330 111 0251

Complaints about roadside assistance

Call Assist Complaints
Call Assist
Axis Court
North Station Rd
Colchester
Essex
CO1 1UX

We take all customer complaints seriously and **we** have established the following complaint procedure to resolve **your** concerns quickly, fairly and by the appropriate department.

Step 1: Within three business days of receiving your complaint

In the first instance **we** would encourage **you** to contact the department **you** are unhappy with. Members of staff are empowered to support **you** and will aim to resolve **your** concerns within three business days, following receipt of **your** complaint. A written summary resolution communication will be provided to **you** if the complaint is resolved to **your** satisfaction.

Step 2: If your complaint cannot be resolved within three business days following receipt

We will send **you** an acknowledgement letter to explain **your** complaint has been escalated to the Customer Relations Team who will appoint a dedicated Complaint Manager to support **you**, keep **you** informed of progress and provide one of the following within 8 weeks: A final response letter explaining the outcome of **our** investigation, the reason for it and the next steps; or A holding letter confirming when **we** anticipate **we** will have concluded **our** investigation.

Step 3: Referring to the Financial Ombudsman Service

After receiving **our** final response or if **we** have been unable to conclude **our** investigation within 8 weeks, **you** may be able to refer **your** complaint to the Financial Ombudsman Service. We will provide full details of how to do this in **our** final response or holding letter. The Financial Ombudsman Service can be contacted as follows:

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Tel: 0800 023 4567 or 0300 123 9123
E-mail: complaint.info@financial-ombudsman.org.uk
Online: www.financial-ombudsman.org.uk

The Financial Ombudsman Service may not be able to consider a complaint if **you** have not provided **us** with the opportunity to resolve it first, or if **you** are an eligible complainant.

Following this complaint procedure does not affect **your** rights to take legal action. Calls may be recorded for quality, training and monitoring purposes.

Financial Services Compensation Scheme

We are covered by the Financial Services Compensation Scheme (FSCS). Should **we** be unable to meet **our** liabilities **you** may be entitled to compensation from the Financial Services Compensation Scheme. This depends on the type of insurance, the size of **your** business and the circumstances of the claim.

Further information is available from the Financial Services Compensation Scheme.

Their telephone number is 0800 678 1100 or 020 77414100. Alternatively, more information can be found at www.fscs.org.uk

Making a claim

Firstly, check **your policy** and certificate to make sure **you** have the appropriate cover. To report an incident or claim, please use the following contact details:

Lifestyle Claims
Ageas House
Hampshire Corporate Park
Templars Way
Eastleigh
Hampshire
SO53 3YA

Tel: 0330 111 0251

You must notify **us** of any claim or any circumstances which may give rise to a claim, which have occurred during the **period of insurance**, within 30 days of the event occurring. Failure to do so could mean that **we** decline to pay a claim. Within 30 days of notifying **us** of a claim **you** must supply, at **your** own expense, full details of the claim and all supporting information, including **evidence of ownership**.

You must notify **us** of any claim or any circumstances which may give rise to a claim under the Public Liability section as soon as possible and forward to **us** any statements of claim, writ or summons as soon as **you** receive it. It is important that **you** do not negotiate, admit liability, or agree to pay any amount in settlement without **our** written authority. **You** must not take any action or make any statement which could prejudice **our** position with regard to the handling or the defence of the claim.

In respect of any claim for theft or attempted theft **you** must report the incident to the Police and provide **us** with a crime reference number.

Conditions which apply to this policy

The following conditions apply to the whole of this **policy**.

Payment of Premium

We will not make any payment under this **policy** unless **you** have paid the premium.

If **we** can't collect **your** premium on the date it is due, **we** will assume that **you** do not want to continue with **your policy** unless **you** tell **us** otherwise.

Misrepresentation

If **we** establish that **you** have intentionally provided **us** with false information **we** reserve the right to treat this insurance as if it never existed and decline all claims. **We** reserve the right to withhold any premium already paid or, recover from **you**, all monies paid in respect of all claims made under this **policy** if **we** establish that **you** have intentionally provided **us** with false information.

We will provide **you** with written confirmation of **our** intentions if **we** establish misrepresentation has taken place.

Minimising Loss

You must take reasonable steps to prevent loss or **damage** and incidents that may give rise to a claim. **You**

must look after any items that **you** have covered under **your policy** and keep them in good condition.

Claim Notification

We will not make any payment under this **policy** unless **you**:

- notify **us** of anything which is likely to give rise to a claim under this **policy** within 30 days of the event occurring;
- take reasonable steps to minimise any **damage** and take appropriate measures immediately to reduce any claim;
- provide **us** with all assistance which **we** may require to pursue recovery of any amounts **we** may become liable to pay under this **policy**, in **your** name but at **our** expense;
- provide, at **your** expense, any information which **we** may reasonably require;
- co-operate fully in the investigation or processing of any claim under this **policy**.

False Claims

If **you** have made a false claim, **we** reserve the right to refuse to pay a claim and invoke **our** cancellation rights in respect of this **policy**.

Governing Law

This **policy** will be governed by English law, and **you** and **we** agree to submit to the non-exclusive jurisdiction of the courts of England and Wales (unless **you** live in Jersey in which case the law of Jersey will apply, and the Jersey courts will have exclusive jurisdiction).

Language

The contractual terms and conditions and other information relating to this contract will be in the English language.

Policy Changes

You must tell **us**, as soon as possible, if there are any changes to the information **you** have previously provided to **us**.

For example, **you** must tell **us** if:

- you** move to a new house or change the place **you** keep **your cycle**;
- your** name changes (for example, by marriage)

If **you** do not inform **us** about a change it may affect any claim **you** make or could result in **your** insurance **policy** being invalid.

This is not a full list. If **you** are not sure whether **you** need to tell **us** about a change in circumstances, please contact **us**.

When **we** are notified of a change **we** will tell **you** if and how it affects **your policy**.

Contracts (rights of Third Parties Act 1999)

A person who is not party to this contract has no right under the Contracts of (Rights of Third Parties) Act 1999 to enforce any term of this contract. This does not affect

any right or remedy of a third party which exists or is available apart from that Act.

Renewal

We will send an email to **you** before **your policy** ends to confirm **your** renewal premium and **policy** terms, and before taking any payment. If **you** do not want to renew **your policy**, **you** must email **us** before **your** renewal date to let **us** know.

If **we** are unable to offer renewal terms, **we** will send an email to let **you** know.

Exclusions which apply to this policy

The following exclusions apply to the whole of this **policy**. Additional exclusions apply, please refer to the relevant parts of the **policy** for further details.

This **policy** does not provide cover for any incident arising through or in the consequence of:

- a. any act of fraud or dishonesty by **you** or anyone acting on **your** behalf.
- b. ionising radiation or contamination by radioactivity from any nuclear fuel, or from any nuclear waste from burning nuclear fuel.
- c. any claim for reduction in value or damage caused by wear and tear.
- d. radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
- e. any pre-existing **damage** that happened before **your policy** started.
- f. pressure waves from aircraft or other aerial devices travelling at supersonic speeds;
- g. solvent use, being under the influence of drugs or alcohol, except those prescribed by a registered **doctor**, or drugs which have been prescribed by a registered **doctor** and not those prescribed for drug addiction.
- h. any claim where **evidence of ownership** cannot be provided.
- i. epidemic or pandemic.
- j. pollution or threat of pollutant release.
- k. any claim where **your cycle** was being used for hire, reward, trade or business purposes, including courier services but excluding commuting purposes.
- l. the **excess**.
- m. any claim where the **cycle** or **accessories** are being used by anyone other than **you**.

Data protection

Jackson Lee Underwriting Privacy Notice

We (defined in the policy wording as Jackson Lee Underwriting) collect and maintain personal information in order to administer this policy and provide the service detailed within this policy wording. All personal information is safeguarded with appropriate levels of

security. **We** will only share **your** information in the following circumstances:

- it is with the underwriter of this policy
- it is with the agents which sold this policy
- it is allowed by law
- it has been authorised by **you**
- it is provided to recovery operators, claims administrators and investigators, credit reference agencies, anti-fraud databases, solicitors, public and regulatory bodies or other suppliers as required to fulfil **our** obligations in this policy wording. **Your** information will be limited to the minimum information ordinarily required.

We will not use **your** data or pass it to any other party for marketing products or services to **you** unless **you** have given consent. **You** have the right to ask for a copy of any personal information **we** hold about **you**. **You** also have the right to ask **us** to correct mistakes, change the way **we** use **your** information, or even delete it. **We** will either do what **you** have asked, or explain why **we** are unable to do so – usually because of a legal or regulatory reason.

In most cases, **we** only keep **your** information for as long as the regulations say **we** have to. **We** typically keep policy and claims records for up to 8 years from the end of **our** relationship with **you**.

Enquiries in relation to data held by Jackson Lee Underwriting or for a full copy of **our** privacy policy please contact:

Jackson Lee Underwriting
The Estate Office
Shadrack
Berry Pomeroy
Totnes
Devon
TQ9 6LR

Email: info@jlunderwriting.co.uk

Ageas Insurance Privacy Notice

We (defined in the policy wording as Ageas Insurance Limited) are part of the Ageas group of companies.

The details provided here are a summary of how **we** collect, use, share, transfer and store **your** information. For **our** full Privacy Policy please visit **our** website www.ageas.co.uk or contact **our** Data Protection Officer at:

Ageas House
Hampshire Corporate Park
Templars Way
Eastleigh
Hampshire
SO53 3YA

Email: thedpo@ageas.co.uk

Your insurance adviser will have their own uses for **your** personal data. Please ask **your** insurance adviser if **you** would like more information about how they use **your** personal information.

Collecting your information

We collect a variety of personal information about **you** such as **your** name, address, contact details, date of birth, credit history, criminal offences, claims information, financial details such as bank account and card details and IP address (which is a unique number identifying **your** computer). Where relevant, **we** also collect special categories of personal information (which was previously known as sensitive personal information) such as details regarding **your** health.

We also collect information from a number of different sources for example: publically available sources such as social media and networking sites; third party databases available to the insurance industry; firms, loss adjusters and/or suppliers appointed in the process of handling a claim.

Using your information

We collect **your** personal and/or special categories of personal information because **we** need it to provide **you** with the appropriate insurance quotation, policy and price as well as manage **your** policy such as handling a claim or issuing documentation to **you**. **Our** assessment of **your** insurance application may involve an automated decision to determine whether **we** are able to provide **you** with a quotation and/or the price. If **you** object to this being done, then **we** will not be able to provide **you** with insurance.

We will also use **your** information where **we** feel there is a justifiable reason for doing so for example: to prevent and detect fraud and financial crime (which may include processes which profile **you**); collecting information regarding **your** past policies; carrying out research and analysis (including profiling); and recording and monitoring calls.

Please note if **you** have given **us** information about someone else, **you** would have confirmed that **you** have their permission to do so.

Sharing your information

We share **your** information with a number of different organisations which include, but are not limited to: other insurers; regulatory bodies; carefully selected third parties providing a service to **us** or on **our** behalf or where **we** provide services in partnership with them; fraud prevention and credit reference agencies and other companies, for example, when **we** are trialling their products and services which **we** think may improve **our** service to **you** or **our** business processes.

Unless required to by law, **we** would never share **your** personal data without the appropriate care and necessary safeguards being in place.

Keeping your information

We will only keep **your** information for as long as is necessary in providing **our** products and services to **you** and/or to fulfil **our** legal, regulatory, tax and accounting obligations. **We** also keep **your** information for several years after the expiry of **your** policy in order to respond to any queries or concerns that may be raised at a later date

with respect to the policy or handling of a claim. Please refer to **our** full Privacy Policy for more information.

Use and storage of your information overseas

Your information may be transferred to, stored and processed outside of the United Kingdom (UK). **We** or **our** service providers may use cloud based computer systems (i.e. network of remote servers hosted on the internet which process and store **your** information) to which foreign law enforcement agencies may have the power to access. However, **we** will not transfer **your** information outside the UK unless it is to a country which is considered to have sound data protection laws or **we** have taken all reasonable steps to ensure the third party has suitable standards in place to protect **your** information.

Your rights

You have a number of rights in relation to the information **we** hold about **you**. These rights include but are not limited to: asking for access to and a copy of **your** personal information; objecting to the use of **your** personal information or to an automated decision including profiling; asking us to correct, delete or restrict the use of **your** personal information; withdrawing any previously provided permission for the use of **your** personal information; and complaining to the Information Commissioner's Office at any time if **you** object to the way **we** use **your** personal information. For a full list of **your** rights please refer to the full Privacy Policy.

Please note that there are times when **we** will not be able to delete **your** information. This may be as a result of fulfilling **our** legal and regulatory obligations or where there is a minimum, statutory, period of time for which **we** have to keep **your** information. If **we** are unable to fulfill a request **we** will always let **you** know **our** reasons.

Acumen Insurance Services Privacy Notice

We (defined in the policy wording as Acumen Insurance Services Limited) collect and maintain personal information in order to administer this policy and provide the service detailed within this policy wording.

Details of **you**, **your** insurance cover under this policy and claims will be held by **us** (acting as data controllers) for underwriting, policy administration, claims handling, complaints handling, sanctions checking and fraud prevention, subject to the provisions of applicable data protection law and in accordance with the assurances contained in **our** website privacy notice (see below).

We collect and process these details as necessary for performance of **our** contract of insurance with **you** or complying with **our** legal obligations, or otherwise in **our** legitimate interests in managing **our** business and providing **our** products and services.

These activities may include:

1. use of sensitive information about **you**, in order to evaluate **your** claim and provide other services as described in this policy,
2. disclosure of information about **you** and **your** insurance cover to companies within the CSP group of companies, to **our** service providers and agents

in order to administer and service **your** insurance cover, to provide **you** with an insurance cover claims service, for fraud prevention, to collect payments, and otherwise as required or permitted by applicable law;

3. monitoring and/or recording of **your** telephone calls in relation to cover for the purposes of record-keeping, training and quality control;
4. obtaining and storing any relevant and appropriate evidence of the condition of the property subject of the claim, which **you** have provided for the purpose of validating **your** claim; and
5. sending **you** feedback requests or surveys relating to **our** services, and other customer care communications.

We will separately seek **your** consent before using or disclosing **your** personal data to another party for the purpose of contacting **you** about other products or services (direct marketing). Marketing activities may include matching **your** data with information from public sources, in order to send **you** relevant communications. **You** may withdraw **your** consent to marketing at any time, or opt-out of feedback requests, by contacting the Data Protection Officer (see contact details below).

We carry out these activities within the UK and within the European Economic Area (the European Union plus Norway, Liechtenstein and Iceland) and Switzerland, across which the data protection laws provide a similar level of protection.

By purchasing this policy and using **our** services, **you** acknowledge that **we** may use **your** personal data, and consent to **our** use of sensitive information, as described above. If **you** provide **us** with details of other individuals, **you** agree to inform them of **our** use of their data as described here and in **our** website privacy notice (see below).

You are entitled on request to a copy of the information **we** hold about **you**, and **you** have other rights in relation to how **we** use **your** data (as set out in **our** website privacy notice – see below). Please let **us** know if **you** think any information **we** hold about **you** is inaccurate, so that **we** can correct it.

If **you** want to know what information is held about **you** by Acumen Insurance Services Limited or have other requests or concerns relating to **our** use of **your** data, please write to **us** at:

Data Protection Officer
Acumen Insurance Services Limited
St Clare House
30-33 Minories
London
EC3N 1PE

Email: dataprotection@acumeninsurance.co.uk

Acumen Insurance Services Limited's full data privacy notice is available at: www.covercloud.co.uk/privacy-policy.

Section 1 – Bike & Accessories

Cycle Cover - Theft

What we will pay you

Loss of or **damage** to **your cycle** anywhere in the world, as a result of theft or attempted theft occurring during the **period of insurance**.

We will also pay up to 10% of the **sum insured** shown in the **schedule** for the hire of a replacement **cycle** from a recognised reputable **cycle** dealer, following theft of, or **damage** to **your cycle** as a result of attempted theft, which renders **your cycle** unusable.

What is not covered

We will not make any payment under this section of cover in respect of:

1. loss or **damage** resulting from theft or attempted theft at **your insured location** unless, at the time of loss or **damage**:
 - a. **your cycle** was contained within **your insured location** and normal security provisions were fully operative and in force and there is evidence of forcible and/or violent entry to the **insured location**; or
 - b. **your cycle** was secured through the frame by an **approved lock** to an **immovable object**.
2. loss or **damage** resulting from theft or attempted theft away from **your insured location** unless, at the time of loss or **damage**:
 - a. **your cycle** was secured through the frame by an **approved lock** to an **immovable object**; or
 - b. **your cycle** was stolen from an organised event in which **you** were participating; or
 - c. **your cycle** was in the custody and control of an airport, railway or seaport operator and/or their agents; or
 - d. **your cycle** was stolen from within or on a motor vehicle as a direct result of forcible action.
3. any claim where **you** have failed to obtain a crime reference number;
4. loss or **damage** where **your cycle** was left **unattended** unless in a secure area during an organised event;
5. anything contained in the general exclusions of this **policy**

How we will deal with your claim

We will either:

1. pay **you** the amount of **your** claim up to the **sum insured**;
2. repair or replace the **cycle** up to the **sum insured**

At no point will **we** pay more than the **sum insured** shown in the **schedule**.

Cycle less than 3 years old - **We** will, at **our** option, repair, replace or pay for any **cycle** on a new for old basis.

Cycle more than 3 years old - **We** will, at **our** option, repair, replace or pay for any **cycle** on an equivalent type or specification basis.

Agreed Value – Where **we** have made an **endorsement** to the **policy** in respect of an **agreed value**, **we** will pay the stated amount in the event of the unrecovered theft of **your cycle** or where **damage** renders **your cycle** a **total loss**.

Upon settlement of a claim for loss or **damage** where the **cycle** is deemed a **total loss** **we** have the right to take and keep possession of any part or the entire **cycle** and deal with the salvage in a reasonable manner.

Cycle Cover – Damage

Damage to your cycle anywhere in the world occurring during the **period of insurance**.

We will also pay, up to 10% of the **sum insured** shown in the **schedule** for the hire of a replacement **cycle** from a recognised reputable **cycle** dealer, following **damage** to **your cycle** which renders **your cycle** unusable.

What is not Covered

We will not make any payment under this section of cover in respect of:

1. theft, loss or disappearance of **your cycle**
2. any claim arising out of general wear and tear, gradually operating causes, such as, but not limited to insects, frost, rust, corrosion, dust, contamination or poor maintenance.
3. any mechanical or electrical breakdown
4. any **damage** when the **cycle** is left **unattended** in a location, other than the **insured location**, for more than 48 hours at any one time.
5. Anything contained in the general exclusions of this **policy**

How we will deal with your claim

We will either:

1. pay **you** the amount of **your** claim up to the **sum insured**;
2. repair or replace the **cycle** up to the **sum Insured**

At no point will **we** pay more than the **sum insured** shown in the **schedule**.

Cycle less than 3 years old - **We** will, at **our** option, repair, replace or pay for any **cycle** on a new for old basis.

Cycle more than 3 years old - **We** will, at **our** option, repair, replace or pay for any **cycle** on an equivalent type or specification basis.

Agreed Value – Where **we** have made an **endorsement** to the **policy** in respect of an **agreed value**, **we** will pay the stated amount in the event of the unrecovered theft of **your cycle** or where **damage** renders **your cycle** a **total loss**.

Upon settlement of a claim for loss or **damage** where the **cycle** is deemed a **total loss** **we** have the right to take and keep possession of any part or the entire **cycle** and deal with the salvage in a reasonable manner.

Accessories cover - Theft

We will pay up to 30% of the **sum insured** for loss of or **damage** to **your accessories** anywhere in the world as

a result of theft or attempted theft occurring during the **period of insurance**.

What is not Covered

We will not make any payment under this section of cover in respect of:

1. loss or **damage** resulting from theft or attempted theft at **your insured location** unless the **accessories** were contained within **your insured location** and normal security provisions were fully operative and in force and there is evidence of forcible and/or violent entry to the **insured location**;
2. theft away from **your insured location** unless;
 - a. **your accessories** were stolen from an organised event in which **you** were participating; or
 - b. **your accessories** were stored out of sight within a motor vehicle and the motor vehicle was fully locked with all security protections in force and the theft was a direct result of forcible entry to the motor vehicle.
3. any claim where **you** have failed to obtain a crime reference number;
4. loss or **damage** where **your accessories** have been left **unattended**;
5. loss or **damage** where **your accessories** are being used by anyone other than **you**;
6. any claim where **your accessories** are being used for trade or business purposes, excluding commuting purposes;
7. Any amount over 30% of **your sum insured**.

How we will deal with your claim

We will either:

1. pay **you** the amount of **your** claim up to 30% of the **sum insured**; or
2. repair or replace the **accessories** up to 30% of the **sum insured**.

At no point will **we** pay more than 30% of the **sum insured** shown in the **schedule** (less any **excess**).

Accessories less than 3 years old - **we** will, at **our** option, repair, replace or pay for any **accessories** on a new for old basis.

Accessories more than 3 years old - **we** will, at **our** option, repair, replace or pay for any **accessories** on an equivalent type or specification basis.

Upon settlement of a claim for loss or **damage** where the **accessories** are deemed a **total loss** **we** have the right to take and keep possession of any part or the entire **accessories** and deal with the salvage in a reasonable manner.

If any stolen **accessories** that have been subject to a claim payment under this section are subsequently recovered, **we** shall become entitled to that property.

Accessories Cover – Damage

We will pay up to 30% of the **sum insured** to cover **damage** to **your accessories** occurring anywhere in the world during the **period of insurance**.

What is not Covered

We will not make any payment under this section of cover in respect of:

1. theft, loss or disappearance of **your accessories**;
2. any **damage** when the **accessories** are left **unattended** in a location, other than the **insured location**, for more than 48 hours at any one time;
3. any claim where, at the time of **damage your accessories** were being used for trade or business purposes, excluding commuting purposes;
4. any claim arising out of general wear and tear, gradually operating causes, such as, but not limited to insects, frost, rust, corrosion, dust, contamination or poor maintenance;
5. any mechanical or electrical breakdown;
6. any amount over 30% of the **sum insured**.

How we will deal with your claim

We will either:

1. pay **you** the amount of **your** claim up to 30% of the **sum insured**; or
2. repair or replace the **accessories** up to 30% of the **sum insured**.

At no point will **we** pay more than 30% of the **sum insured** shown in the **schedule** (less any **excess**).

Accessories less than 3 years old - **we** will, at **our** option, repair, replace or pay for any **accessories** on a new for old basis.

Accessories more than 3 years old - **we** will, at **our** option, repair, replace or pay for any **accessories** on an equivalent type or specification basis.

Upon settlement of a claim for loss or **damage** where the **accessories** are deemed a **total loss** **we** have the right to take and keep possession of any part or the entire **accessories** and deal with the salvage in a reasonable manner.

If any stolen **accessories** that have been subject to a claim payment under this section are subsequently recovered, **we** shall become entitled to that property.

Organised event fees & expenses

What we will pay you

A. Circumstances beyond your control

We will pay up to £500 for the non-refundable and/or non-transferrable fee that has already been paid by **you** in respect of **you** participating in an organised event if **you** are no longer able to participate due to circumstances that are unexpected and entirely beyond **your** control.

B. Accommodation costs

In addition to the above **we** will pay up to £250 towards **your** non-refundable and/or non-transferable travel and/or accommodation costs that have already been paid by **you** to participate in an organised event if **you** are no longer able to participate due to circumstances that are unexpected and entirely beyond **your** control.

C. Theft or damage

In the event that **your cycle** is stolen or suffers **damage** that renders it unusable up to 7 working days prior to the start of an organised event **you** have paid to attend, **we** will pay up to £250 towards the reasonable costs for **you** to hire an alternative **cycle** in order for **you** to participate in that organised event.

What is not Covered

We will not make any payment under this section of cover in respect of any claim:

1. where **you** are unable to provide proof of any non-refundable and/or non-transferable costs;
2. that is made as a result of a pre-existing or self-inflicted illness and/or injury or any medical treatment which is not medically necessary;
3. that is made in respect of an illness or injury to **you** that has not been diagnosed by **your doctor** within 72 hours prior to the start of the event and where **your doctor** has not advised **you** not to participate in the event;
4. that is made directly or indirectly due to adverse weather;
5. for more than one organised event in any one **period of insurance**;
6. for sums of money greater than the amounts outlined above;
7. in respect of lost and/or stolen entry tickets;
8. not notified to **us** within 30 days from the date of loss.

How we will deal with your claim

The type of information and evidence **we** may need will depend on the circumstances of the claim. In all cases **we** will only ask for information which is relevant to the claim.

Where a claim is made in respect of non-participation due to a medical matter **we** will ask **you** to sign a form of consent to enable **us**, where applicable, to contact **your doctor** to confirm they believe **you** are not medically fit to participate in or attend the event. **We** may ask **you** to supply further information or evidence to help **us** assess and/or validate **your** claim and **you** must supply and pay for all information or evidence that **we** may reasonably request.

Section 2 - Public Liability (if selected)

This section of the **policy** is optional. **Your policy** certificate will confirm which sections of the **policy** are operative and in force.

What we will pay you

We will pay for accidental **bodily injury** to any other person or accidental **damage to third party property** which arises from **your** use of or ownership of a **cycle** during the **period of insurance**, up to the amount shown in **your schedule**.

The total amount payable includes **defence costs** and expenses incurred by **you** with **our** written consent in connection with any liability insured.

What is not Covered

We will not make any payment under this section of cover in respect of any:

1. loss or **damage** to property which belongs to **you** or is in **your** care, custody or control;
2. claim where **you** are entitled to indemnity from another source;
3. claim for **bodily injury**, loss or **damage** to **your** employees or member or **your family** or household or to their property;
4. liability for fines or contractual penalties;
5. liability for punitive or exemplary damages;
6. liability that **you** are obliged under any contract which is greater than the liability **you** would have at common law in the absence of the contract;
7. any claim where **you** admit that **you** are liable for what has happened without **our** prior consent;
8. any claim where **you** delay in reporting an incident to **us** prejudices **our** ability to successfully represent **you**;
9. any liability for **bodily injury**, loss or damage arising out of the ownership, possession or use of motorised vehicles, yachts or motorised waterborne craft, airborne craft of any description, animals or firearms and weapons.
10. any liability not involving the use of a **cycle**.

How we will deal with your claim

At no point will **we** pay more than the **sum insured** shown in the **schedule** (less any **excess**).

Our control of claims

We reserve the right to take full control of any claim and conduct the investigation, settlement or defence in **your** name. If Proceedings have been issued against **you** **we** will only defend that claim if **we** believe that there is a reasonable prospect of success, taking also into account the costs of any defence.

Section 3 - Personal Accident (if selected)

This section of the **policy** is optional. **Your policy** certificate will confirm which sections of the **policy** are operative and in force.

What we will pay you

A. Bodily injury

We will pay the amounts detailed below if **you** suffer **bodily injury** as a result of an **accident** during the **period of insurance**

If **you** suffer an **accident** which directly results in one of the injuries specified below, **we** will pay the benefit shown in the table of benefits on page 12.

B. Loss of limb(s)

We will pay the amount shown in the table of benefits if **you** suffer an **accident** which directly results in amputation of:

- an arm at or above the wrist; or
- a leg at or above the ankle
- **we** will cover amputation whether this occurs
- at the time of the **accident**; or
- within 12 months of the date of the **accident**,

We will only cover amputation where it is medically necessary as a direct result of an **accident** and that in the opinion of an expert medical practitioner will not be recovered.

C. Loss of sight

We will pay the amount shown in the table of benefits if **you** suffer an **accident** which directly results in the permanent and **total loss** of sight that will be considered as having:

- occurred in both eyes if **your** name is added to the Register of Blind Persons; or
- in one eye if the degree of sight remaining after correction is 3/60 or less on the Snellen Scale.

In all cases the loss of use must occur within 12 months of the date of the **accident**.

D. Loss of hearing

We will pay the amount shown in the table of benefits if **you** suffer an **accident** which directly results in the **total loss** of hearing in one or both ears to the extent that the hearing loss in one or both ears is greater than 95 decibels across all frequencies using a pure tone audiogram that in the opinion of an expert medical practitioner will not be recovered. In all cases the loss of use must occur within 12 months of the date of the **accident**.

E. Loss of use of arms/and or legs

If **you** suffer an **accident** which directly results in the permanent loss of use of arms and/or legs of more than 20%, **we** will pay a percentage of the amount shown in the table of benefits depending on the extent of loss of use that an expert medical practitioner confirms **you** have suffered.

- where the loss of use is less than 20% **we** will not pay any amount.
- where the loss of use is 20% or more and under 70% **we** will pay a percentage of the full amount shown in the table of benefits equal to the percentage of loss that an expert medical practitioner confirms **you** have suffered.
- where the loss of use is 70% or more, the full amount shown in the table of benefits will be paid.

Depending on the percentage of loss, for multiple injuries sustained during the same **accident** **we** will calculate the amount payable, for partial loss of use for each arm or leg separately.

In all cases the loss of use must occur within 12 months of the date of the **accident**.

F. Permanent total disablement

We will pay the amount shown in the table of benefits if **you** suffer an **accident** which directly results in permanent total disablement, caused other than by death, loss of limb(s), loss of use of arms and/or legs, loss of sight or loss of hearing, that has lasted for 52 consecutive weeks and will, in the opinion of an expert medical practitioner prevent **you** from ever engaging in any occupation of any kind.

G. Hospitalisation cover

If **you** suffer an **accident** which directly results in **bodily injury** and **you** are admitted to hospital as an inpatient for medical surgery or other remedial attention treatment or diagnosis by a **doctor** for a period in **excess** of 24 hours from the time of original admission, **we** will pay the amount shown in the table of benefits for a maximum of 30 days.

We will not pay **you** for **temporary total disablement** due to **bodily injury** as the result of an **accident** if at the time **you** suffer **bodily injury you** are:

- under the age of 16 years.
- over the age of 65 years.
- not in gainful employment.

What is not Covered

We will not make any payment in respect of any temporary, partial or permanent **bodily injury** caused by:

1. illness of disease;
2. known side effects where medicines are taken correctly under medical supervision or guidance;
3. medicines taken incorrectly;
4. medicines for treating drug addiction;
5. known risks associated with a medical or surgical procedure;
6. a gradual loss of use or function which is not as a direct result of an **accident**;
7. muscular or skeletal condition or injury unless caused directly by external, sudden, violent and visible means and not aggravated by a previous muscular or skeletal injury;
8. any physical or psychological defect, infirmity or condition which existed or for which medical advice or treatment had been given prior to the time that **your** cover first commenced;
9. weekly benefits which are more than 65% of **your average weekly wage** for **temporary total disablement**.

We will not pay any claim resulting from your:

1. suicide or deliberate self-inflicted injury;
2. reckless and deliberate exposure to known danger (except in an attempt to save human life);
3. use of drugs;
4. consumption of alcohol to an extent **you** suffer mental or physical impairment which causes the **accident**;

5. participating in or acting as an accessory to any crime or attempted crime;
6. participating in, practice or training for any sport as a professional sports person unless **we** have agreed that in writing;
7. participation in active service in any armed forces, the Territorial Army and other reserve services, whether war be declared or not;
8. **your** participating or conspiring in any act or **terrorism** not involving the use or release or the threat of any nuclear weapon or any chemical or biological agents;
9. **your** participating in any act of **terrorism** which involves the use or release or the threat thereof, of any nuclear weapon or any chemical or biological agents;
10. **your** participation in any act of war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not, civil war, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power);
11. **your** pregnancy or giving birth.

No cover is provided by this section if:

1. **you** are 65 years of age or above;
2. **your** main permanent residence is no longer in the **United Kingdom**.

If **we** make a payment for loss of sight in one eye or hearing in one ear, all cover for that eye or ear will end. If **you** make multiple claims for any one arm or leg **we** will only pay up to the maximum amount shown in the table of benefits, regardless of the number or type of claims made for that arm or leg. If payment is applicable under more than one of the benefits as a result of a single **accident** the total benefit, **we** will pay will not exceed the amount payable as shown in the table of benefits for permanent total disablement.

How we will deal with your claim

We will ask **you** to sign a form of consent to enable **us**, where applicable, to contact **your doctor** and the hospital which is treating **you**. As well as approaching healthcare and/or other professionals at **our** own cost **we** may ask **you** to supply further information or evidence to help **us** assess and/or validate **your** claim. **You** must supply and pay for all information or evidence that **we** may reasonably request.

The type of information and evidence **we** may need will depend on the circumstances of the claim. In all cases **we** will only ask for information which is relevant to the claim and the treatment received or previous medical history.

Table of benefits

Accidental bodily injury which results in:	Benefit
Loss of sight in both eyes	£15,000
Loss of Limbs (two or more)	£15,000
Loss of hearing (in both ears)	£15,000

Accidental bodily injury which results in:	Benefit
Loss of speech	£15,000
Loss of sight in one eye	£7,500
Loss of Limb (one limb)	£7,500
Loss of hearing (in one ear)	£3,000
Loss of use of shoulder, elbow, wrist, knee, hip or ankle	£2,500
Loss/Loss use of one thumb	£2,500
Loss/Loss use of one forefinger	£1,500
Loss/Loss use of any other finger	£750
Loss/Loss use of any one big toe	£750
Loss/Loss use of any other toe	£100
Permanent Total Disablement	£15,000
Death	£7,500
Death under the age of 18 years	£7,000
Hospitalisation	£7.50 per day

Section 4 - Cycle Rescue (if selected)

This section of the **policy** is optional. **Your policy** certificate will confirm which sections of the **policy** are operative and in force.

Your Cycle Rescue insurance is provided by Call Assist. Call Assist is the largest truly independent breakdown provider in the UK, **you** can therefore be assured **you** are in safe hands. **We** provide a 24-hour, 365 day a year service through **our** network of recovery operators throughout the UK and Europe.

Service Provider and Insurer

This service is provided by Call Assist Limited. Registered in England and Wales. Registered Company Number: 3668383. Registered office address: Axis Court, North Station Road, Colchester, Essex CO1 1UX. Call Assist Ltd, Firm Reference Number 304838 is authorised and regulated by the Financial Conduct Authority.

What to do if you Breakdown

If **your cycle** breaks down, please call **our** 24-hour Control Centre on 01206 812764. Please have the following information ready to provide to **our** rescue co-ordinator:

- **your** return telephone number
- **your policy** number
- the precise location of **your cycle** (or as accurate as **you** are able in the circumstances).

If **you** are deaf, hard of hearing or speech impaired, please send a text message containing **your** full name, **policy** number, and **policy** postcode to 07537 404890.

We will take **your** details and ask **you** to remain by the telephone **you** are calling from. Once **we** have made all the arrangements **we** will contact **you** to advise who will be coming out to **you** and how long they are expected to take. **Your** mobile phone must therefore be switched on and available to take calls at all times. **You** will then be asked to return to **your cycle**.

Your Cover

If **your cycle** suffers an **insured event**, which occurs more than one mile from **your home address**, service will be provided.

We will provide cover as detailed below for any **insured event** in accordance with the **policy** wording. Cover will apply during the **period of insurance** and within the **United Kingdom**.

UK Roadside Recovery

Providing **you** are in possession of a valid **policy** reference number or photographic identification, **we** will send help if **you** are unable to complete the **cycle** portion of **your** journey as a result of an **accident**, vandalism, irreparable breakdown to **your cycle** or injury sustained by **you** (a medical certificate may be required). **We** will arrange and pay for **you** and **your cycle** (if appropriate) to be transported at **our** discretion to:

- the nearest suitable **cycle** repair shop or
- the nearest appropriate railway station or
- the nearest car rental agency or
- the nearest overnight accommodation or
- **your home address**, if closer

Message Service

If **you** require, **we** will pass on two messages to **your** home or place of work to let them know of **your** predicament and ease **your** worry.

General Notes

Uninsured Service

We can provide assistance for faults that are not covered under this insurance **policy**. All costs (including an administration fee) must be paid for immediately by credit or debit card.

Measurements

All distances referred to will be calculated using the driving distance via public highway.

Repairs

Any repairs undertaken by a **cycle** repair shop are provided under a separate contract, which is between **you** and the **cycle** repair shop. If the cost of repairs to **your cycle** are covered under a separate insurance **policy**, **we** advise **you** contact the insurer of that **policy** before authorising repairs to **your cycle**.

Exclusions

Applying to all sections within Cycle Rescue unless otherwise stated. This insurance does not cover the following:

1. any **insured event** occurring outside the **period of insurance**.
 2. any **insured event** within a mile, by public highway from **your home address**.
 3. any **insured event** where the **cycle** is being used for a use not specified in the design and manufacturers specifications or arising directly out of the unreasonable use of the **cycle** on unsuitable terrain.
 4. incidents where the **cycle** is not accessible or cannot be transported safely, legally and without hindrance using a standard transporter or trailer, including immersion in mud, sand, snow or water.
 5. incidents while the **cycle** is being used or has been modified for racing, trials or rallies, speed or endurance tests or practices for those activities.
 6. any **damage to your cycle** or its **accessories** whilst being recovered, stored or repaired and any liability arising from any act performed in the execution of the assistance services provided. **We** will not pay for any losses that are not directly covered by the terms and conditions of this **policy**. For example, **we** will not pay for **you** to collect **your cycle** from a repairer or for any time that has to be taken off work because of an **insured event**.
 7. fines or penalties imposed by courts.
 8. callout charges the police may charge.
 9. ferry and toll charges.
 10. the cost of parts, components, lubricants or materials, food, drinks, telephone calls, or other incidental expenses.
 11. any costs other than recovery to one of the destinations detailed above.
 12. the charges of any company or person other than the **recovery operator** called out by **us**.
 13. incidents where **our** control centre has not been notified promptly of the incident prior to expenses being incurred.
 14. incidents where charges incurred have not been settled promptly by **you** before requesting reimbursement.
 15. any charges arising from **your** failure to comply with the requests of **us** or the **recovery operator** concerning the assistance being provided to **you**.
 16. any charges where, having contacted **us**, **you** effect recovery or repair by other means.
 17. medical and other expenses arising out of injury sustained by **you**.
 18. more than 3 claims per annum.
 19. claims in **excess** of £1,500 per **period of insurance**.
- a callout from **your policy**. **We** recommend **you** wait for assistance to ensure the **cycle** is functioning correctly. If **you** do not wait for assistance and the **cycle** breaks down again within 12 hours, **you** will be charged for the second and any subsequent callouts.
3. **we** reserve the right to charge **you** for any costs incurred as a result of incorrect location details being provided.
 4. **we** have the right to refuse to provide the service if **you** are being obstructive in allowing **us** to provide the most appropriate assistance or are abusive to **our** rescue co-ordinators or the **recovery operator**.
 5. cycles must be located within the **United Kingdom** when cover is purchased and commences.
 6. the repair must be carried out if the **cycle** is recovered to a **cycle** repair shop and the **cycle** repair shop can repair the **cycle** within the terms stated. **You** must have adequate funds to pay for the repair immediately. If **you** do not have funds available, any further service related to the claim will be denied
 7. in the event **you** use the service and the fault is subsequently found not to be covered by the **policy** **you** have purchased, **we** reserve the right to reclaim any monies from **you** in order to pay for the uninsured service.
 8. **we** may decline service if **you** have an outstanding debt with **us**.
 9. if **you** have a right of action against a third party, **you** shall co-operate with **us** to recover any costs incurred by **us**. If **you** are covered by any other insurance **policy** for any costs incurred by **us**, **you** will need to claim these costs and reimburse **us**. **We** reserve the right to claim back any costs that are recoverable through a third party.
 10. **we** reserve the right to transport **your** immobilised **cycle** in accordance with and subject to any legislation, which affects drivers' working hours.
 11. regardless of circumstances, **we** will not be held liable for any costs incurred if **you** are unable to make a telephone connection to any numbers provided.
 12. the **policy** is not transferable.

We will provide cover if:

- a. **you** have met all the terms and conditions within this insurance.
- b. the information provided to **us**, as far as **you** are aware, is correct.

General Conditions

Applying to all sections within Cycle Rescue unless otherwise stated.

1. the rider of the **cycle** must remain with or nearby the **cycle** until help arrives.
2. if a callout is cancelled by **you** and a **recovery operator** has already been dispatched, **you** will lose



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