



Home Excess Protection

This insurance policy has been arranged on **your** behalf by Motorplus Limited t/a Coplus and is underwritten by Collinson Insurance. This cover is provided to **you** in return for payment of the premium.

To make a claim:

Call: 0333 241 2455

Email: claims@coplus.co.uk

Online claims form: excessclaims@coplus.co.uk

Address: Coplus Claims, Floor 2 Norfolk Tower, 48-52 Surrey Street, Norwich, NR1 3PA

Claims must be reported as soon as reasonably possible and no later than 6 months after the date you have paid the excess or had your excess deducted from your settlement of your insurance claim under your home insurance policy.

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Who does it cover?

The person named in the policy **schedule** along with their spouse or partner permanently living with them at the **home** which is located within Great Britain, Northern Ireland, Channel Islands or Isle of Man.

Key requirements

The cover under this policy must relate to an **insurance claim** made under the policyholder’s **home insurance policy** which must remain in force throughout the duration of this Home Excess Protection Policy.

Your responsibility

You are required by the provision of the Consumer Insurance (Disclosure and Representations) Act 2012 to take care to:

- a. Supply accurate and complete answers to all the questions **your** broker or agent may ask as part of **your** application for cover under the policy.
- b. Make sure that all information supplied as part of **your** application for cover is true and correct.
- c. Tell **your** broker of any changes to the answers **you** have given as soon as possible.

You must take reasonable care to provide complete and accurate answers to the questions **your** broker or agent asks when **you** take out, make changes to, and renew **your** policy. If any information **you** provide is not complete and accurate, this may mean **your** policy is invalid and that it does not operate in the event of an **excess** claim, or **we** may not pay any **excess** claim in full.

Coplus is a trading name of Motorplus Limited. Registered in England and Wales with Company No. 03092837.
 Head Office: Floor 2, Norfolk Tower, 48-52 Surrey Street, Norwich NR1 3PA.
 Registered Office: Speed Medical House, Eaton Avenue, Buckshaw Village, Chorley, Lancashire PR7 7NA.
 Motorplus Limited is authorised and regulated by the Financial Conduct Authority (309657).

Fraud

You must not act in a fraudulent way. If **you** or anyone acting for **you**:

- Fails to reveal or hides a fact likely to influence whether **we** accept **your** proposal, **your** renewal, or any adjustment to **your** policy.
- Fails to reveal or hides a fact likely to influence the cover **we** provide.
- Makes a statement to **us** or anyone acting on **our** behalf, knowing the statement to be false.
- Sends **us** or anyone acting on **our** behalf a document, knowing the document to be forged or false.
- Makes a claim under the policy, knowing the claim to be false or fraudulent in any way.
- Makes a claim for any loss or damage **you** caused deliberately or with **your** knowledge.

If **your** claim is in any way dishonest or exaggerated, **we** will not pay any benefit under this policy or return any premium to **you**, and **we** may cancel **your** policy immediately and backdate the cancellation to the date of the fraudulent claim. **We** may also take legal action against **you** and inform the appropriate authorities.

Please read this policy carefully so that **you** understand the cover **we** are giving **you** and follow **our** rules. It's important that **you** keep this policy wording and **your** policy **schedule** in a safe place in case **you** need to look at them later.

How to make a claim

In the event of an **excess** claim, please contact **us** as soon as reasonably possible (and in any case no later than 6 months after the date **you** have paid the **excess** or had the **excess** deducted from **your** settlement of **your insurance claim** under **your home insurance policy**) giving **us** as much information as **you** can about what has happened to bring about the **insurance claim**. Please try to include the names and addresses of anyone else involved and any information provided by the police, if relevant.

Telephone: **0333 241 2455**

Email: claims@coplus.co.uk

Online claims form: excessclaims@coplus.co.uk

Or **you** can write to **us** at:

Coplus
 Floor 2
 Norfolk Tower
 48-52 Surrey Street
 Norwich
 NR1 3PA

In order for **us** to help **you** more efficiently, please quote 'Home Excess Protect' in all communications.

The claims line is open 24 hours a day, 365 days a year to assist **you**.

Our regulator and insurer

This insurance is arranged by Motorplus Limited t/a Coplus and underwritten by Collinson Insurance. This Insurance is effected in England and is subject to the Laws of England and Wales.

Collinson Insurance (a trading name of Astrenska Insurance Limited) is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority in the United Kingdom, under Firm Reference Number 202846. Registered in England number 01708616. These details can be checked on the Financial Services Register by visiting: www.fca.org.uk.

Motorplus Limited t/a Coplus are authorised and regulated by the Financial Conduct Authority.

Privacy Statement

For full details of how **we** protect **your** privacy and process **your** data please read the Privacy Statement that accompanies this policy. The Privacy Statement can also be viewed online by visiting <https://www.coplus.co.uk/data-privacy-notice>.

How to make a complaint

If **you** have a complaint, please follow the guidance below and **we** will provide assistance as soon as possible:

If **your** complaint is about the sale of the policy contact the broker who sold **you** the policy.

If **your** complaint is about the handling of a **excess** claim, please contact:

The Quality Assurance Manager
 Coplus
 Floor 2
 Norfolk Tower
 48-52 Surrey Street
 Norwich
 NR1 3PA

Telephone: **0333 043 2455**
 Email: qualityteam@coplus.co.uk

We will respond to **your** complaint within eight weeks of receiving it. **Our** response will be **our** final decision based on the information provided. If there's a delay in **our** investigations, **we'll** explain the reason and give **you** an estimated timeframe for reaching a decision.

If, for any reason, **you're** still not happy or haven't received a final answer within eight weeks, **you** have the right to escalate **your** complaint to an independent authority called the Financial Ombudsman Service (FOS). **You** can contact them using the details below:

The Financial Ombudsman Service,
 Exchange Tower,
 London,
 E14 9SR.

Telephone: **0800 023 4567** (free for people calling from a landline) or **0300 1239 123**
 Email: complaint.info@financial-ombudsman.org.uk

Following this complaints procedure does not stop **you** from taking legal action.

Financial Services Compensation Scheme

The Financial Services Compensation Scheme covers this policy. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** liabilities under this policy. Further information about compensation scheme arrangements is available at www.fscs.org.uk or by telephoning **020 7741 4100**.

Sanctions

We shall not provide cover or be liable to pay any claim or other sums, including return premiums, where this would expose **us** to any sanction, prohibition or restriction under United Nations resolutions, asset freezing or trade or economic sanctions, laws or regulations of the European Union, United Kingdom, and/or all other jurisdictions where **we** transact business.

Definitions

The following words shall have the meaning given below wherever they appear in bold in this document.

Wording	Meaning
Insurance claim(s)	An incident covered under your home insurance policy which occurs within the territorial limits arising as a result of an insured peril under your home insurance policy , or where you have been unable to recover your excess from a liable third party.
Excess	The amount you must pay in the event of an insurance claim under the terms of your home insurance policy .
Home	A residential property within Great Britain, Northern Ireland, Channel Islands and the Isle of Man which: <ul style="list-style-type: none"> • you own; or • you are the executor for; or • you are the tenant of.
Home Insurance Policy	The insurance policy providing buildings and/or contents insurance cover for the home .
Insurer	Collinson Insurance.
Period of Insurance	12 months from the date of inception of this policy.
Schedule	The document issued as part of this policy document showing the name of the policyholder and the cover provided by this policy.
Territorial limits	Worldwide.

Terrorism	Any direct or indirect consequence of terrorism as defined by the Terrorism Act 2000 and any amending or substituting legislation.
We, Us, Our	Motorplus Limited t/a Coplus acting on behalf of Collinson Insurance.
You/Your	The individual named in the schedule as the policyholder together with their spouse or partner who permanently resides with them at the home .

Cover	
What is covered?	What is not covered?
<p>✓ In return of the payment of your premium, the insurer will provide the insurance cover detailed in this policy document, subject to the terms, conditions and limitations shown below or as amended in writing by us during the period of insurance.</p> <p>The insurer will pay you:</p> <ol style="list-style-type: none"> the value of your excess; or the sum specified in your policy schedule. (whichever is the lower amount) <p>in relation to each settled insurance claim under your home insurance policy which occurs during the period of insurance. You can claim under this insurance more than once during the period of insurance but we will only reimburse you up to a total of the amount specified on your policy schedule.</p>	<p>✗ Any excess claim exceeding the annual aggregate limit in any one period of insurance as shown on your schedule;</p> <p>✗ Any excess claim where the total claim amount does not exceed the excess stated in your home insurance policy;</p> <p>✗ Any claim that your home insurance policy does not respond to;</p> <p>✗ Any excess claim where you cannot provide us with evidence that you either paid or have had your excess deducted following your settlement by your insurer following an insurance claim;</p> <p>✗ Any excess claim where you cannot provide us with evidence from your main home insurer which confirms the incident date (if not included on the excess evidence).</p>

Policy conditions

The following conditions apply to all sections of this policy. **You** must comply with them where applicable for **your** insurance to remain in full force and effect.

1. Other Insurance

Cover will be provided for **your home** under this Home Excess policy provided that:

- A **home insurance policy** covering the standard range of perils remains in force covering the **home** during the **period of insurance** of this Home Excess policy; and
- The person(s) described under the definition of **you/your** throughout this Home Excess policy must be a named policyholder on the **home insurance policy** in force covering the **home**.

2. Claims

- You** must keep **us** fully informed at all times of all matters relating to the **insurance claim** and report all **excess** claims to **us** as soon as reasonably possible, and in any case no later than 6 months after the date **you** have paid the **excess** or had the **excess** deducted from **your** settlement of **your insurance claim** under **your home insurance policy**;
- You** must respond to **us** promptly in all matters relating to an **insurance claim**;
- You** must provide **us** with evidence that **you** either paid or have had **your excess** deducted following **your** settlement by **your** main home insurer following an **insurance claim**;
- You must provide **us** with correspondence from your main home insurer which confirms the incident date (if not included on the excess evidence);
- If as a result of any claim against a third party your excess is recovered from that party or their insurers, you must refund to **us** any monies we have previously paid to you in respect of your excess.

General exclusions

The following exclusions apply to all sections of this insurance contract. The **insurer** will not pay:

- Any **excess** claim where a valid **insurance claim** has not been made on **your home insurance policy**;
- Any **insurance claim** not covered by **your home insurance policy** or which is declined by the provider of **your home insurance policy**;
- Any **excess** claim made prior to the inception date of this policy or which is reported to **us** more than 6 months after the date **you** have paid the **excess** or had the **excess** deducted from **your** settlement of **your insurance claim** under **your home insurance policy**;

4. Any **excess** claim in respect of any contribution or deduction from the settlement of **your insurance claim** under **your home insurance policy** which **you** are liable for, other than the stated **excess**;
5. Loss or damage arising as a consequence of:
 - a. War, invasion, act of foreign enemies, **terrorism**, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion.
 - b. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel, the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or its nuclear component thereof or contamination or poisoning due to the effects of chemical or biological and/or radioactive substances.
 - c. Pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.
6. Any loss, injury, damage, or legal liability arising directly or indirectly from:
 - a. The failure of any computer or other electrical component to correctly recognise any date as its true calendar date.
 - b. Computer viruses.

Cancellation

If **you** decide that for any reason, this policy does not meet **your** insurance needs then please return it to **your** insurance broker within 14 days from the day of purchase or the day on which **you** receive **your** policy documentation, whichever is the later. On the condition that no claims have been made or are pending, **we** will then refund **your** premium in full.

You may cancel the insurance cover after 14 days by informing **your** insurance broker, however no refund of premium will be payable.

The **insurer** shall not be bound to accept renewal of any insurance and may at any time cancel any insurance document by giving 30 days' notice in writing where there is a valid reason for doing so. A cancellation letter will be sent to **you** at **your** last known address. Valid reasons may include but are not limited to:

- a. Where **we** reasonably suspect fraud.
- b. Non-payment of premium.
- c. Threatening and abusive behaviour.
- d. Non-compliance with policy terms and conditions.
- e. **You** have not taken reasonable care to provide complete and accurate answers to the questions **we** ask.
- f. **You** do not or are not willing to co-operate in the event of a claim.

If the **insurer** cancels the policy and/or any additional covers, **you** will receive a refund of any premiums **you** have paid for the cancelled cover, less a proportionate deduction for the time the **insurer** has provided cover.

Where the **insurer's** investigations provide evidence of fraud or misrepresentation, the **insurer** may cancel the policy immediately and backdate the cancellation to the date of the fraud or the date when **you** provided **us** with incomplete or inaccurate information. This may result in **your** policy being cancelled from the date **you** originally took it out and the **insurer** will be entitled to keep the premium.

If **your** policy is cancelled because of fraud or misrepresentation, this may affect **your** eligibility for insurance with the **insurer**, as well as other insurers, in the future.

Arbitration Clause

In the event of a disagreement between **you** and **us**, **our** aim is to make things simple and fair. If the matter cannot be resolved via **our** complaints procedure then **you** can reach out to the Financial Ombudsman Service for assistance. For broader disputes, **we** can turn to arbitration. **We** can jointly pick an arbitrator – it could be a solicitor or barrister. **We** will agree on this together in writing. In case **we** can't reach an agreement the Chartered Institute of Arbitrators can step in to help **us** choose someone. The arbitrator's decision is final, and **we** both have to abide by the outcome. The Arbitrator will also determine who pays the costs of the arbitration process, if costs are awarded against **you**, they are not covered under this **policy**. This arbitration condition does not affect **your** rights to take separate legal action.

Other formats

If **you** require this document in any other format, please do not hesitate to contact **us**.

Telephone calls

Please note that for **our** mutual protection telephone calls may be monitored or recorded.

Renewals

If **you** wish to renew this insurance policy, please contact **your** broker who will be able to discuss **your** requirements.

Contracts (Rights of Third Parties) Act 1999

The terms of this policy are only enforceable by the named insured. A person who is not a named insured has no rights under the Contracts (Rights of Third Parties) Act 1999 to enforce any term of this policy but this does not affect any right or remedy of a third party, which exists or is available apart from that Act.

Governing law

Unless some other law is agreed in writing, this policy is governed by English law. If there is a dispute, it will only be dealt with in the courts of England or of the country within the United Kingdom in which **your** main residence is situated.

Collinson Insurance Privacy Notice

How we use the information about you

As a data controller, we collect and process information about **you** so that we can provide **you** with the products and services **you** have requested. We also receive personal information from **your** agent on a regular basis while **your** policy is still live. This will include **your** name, address, risk details and other information which is necessary for us to:

- Meet our contractual obligations to **you**.
- Issue **you** this insurance policy.
- Deal with any claims or requests for assistance that **you** may have.
- Service **your** policy (including claims and policy administration, payments and other transactions).
- Detect, investigate and prevent activities which may be illegal or could result in **your** policy being cancelled or treated as if it never existed.
- Protect our legitimate interests.

To administer **your** policy and deal with any claims, **your** information may be shared with trusted third parties. This will include members of The Collinson Group, third party administrators, contractors, investigators, crime prevention organisations and claims management organisations where they provide administration and management support on our behalf. Some of these companies are based outside of the European Union where different data privacy laws apply. Wherever possible, we will have strict contractual terms in place to make sure that **your** information remains safe and secure.

We will not share **your** information with anyone else unless **you** agree to this, or we are required to do this by our regulators (e.g. the Financial Conduct Authority) or other authorities.

The personal information we have collected from **you** will be shared with fraud prevention agencies and databases who will use it to prevent fraud and money-laundering and to verify **your** identity. If fraud is detected, **you** could be refused certain services, finance, or employment. Further details of how **your** information will be used by us and these fraud prevention agencies and databases, and **your** data protection rights, can be found by visiting www.cifas.org.uk/fpn and www.insurancefraudbureau.org/privacy-policy.

Processing your data

Your data will generally be processed on the basis that it is:

- Necessary for the performance of the contract that **you** have with us.
- Is in the public or **your** vital interest: or
- For our legitimate business interests.

If we are not able to rely on the above, we will ask for **your** consent to process **your** data.

How we store and protect your information

All personal information collected by us is stored on secure servers which are either in the United Kingdom or European Union. We will need to keep and process **your** personal information during the **period of insurance** and after this time so that we can meet our regulatory obligations or to deal with any reasonable requests from our regulators and other authorities.

We also have security measures in place in our offices to protect the information that **you** have given us.

How you can access your information and correct anything which is wrong

You have the right to request a copy of the information that we hold about **you**. If **you** would like a copy of some or all of **your** personal information please contact us by email or letter as shown below:

Email address: data.protection@collinsongroup.com

Postal Address: 3 More London Riverside, London, SE1 2AQ

This will normally be provided free of charge, but in some circumstances, we may either make a reasonable charge for this service, or refuse to give **you** this information if **your** request is clearly unjustified or excessive.

We want to make sure that **your** personal information is accurate and up to date. **You** may ask us to correct or remove information **you** think is inaccurate.

If **you** wish to make a complaint about the use of **your** personal information, please contact our Complaints manager using the details above. **You** can also complain directly to the Information Commissioner's Office (ICO). Further information can be found at <https://ico.org.uk/>.