

American Express® Travel Insurance

Emergency Vehicle Assistance Cover

Combined Terms and Conditions
Continental Europe
UK & Continental Europe

American Express Insurance Services Europe Limited is authorised and regulated by the Financial Services Authority.
Registered Office: 76 Buckingham Palace Road, London SW1W 9AX.
Registered Number: 05048826. Registered in England and Wales.
Inter Partner Assistance is a branch of Inter Partner Assistance S.A. (IPA), Avenue Louise 166 bte 1, 1050 Brussels. IPA is a Belgian company authorised by the Banking, Finance and Insurance Commission of Belgium (registration 0487) and regulated by the Financial Services Authority, (registration 202664). IPA and its agent, AXA Travel Insurance are all members of the AXA Assistance Group.
INS146 (IPA) Effective from December 2009

**Remember to take this
Policy booklet with you
when you travel**



®

**Insurance
Services**



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Thank you for choosing American Express to provide your Emergency Vehicle Assistance Cover. It's particularly reassuring to know that when you need assistance on your travels, one phone call will instantly set us working to give you the help you need.

This booklet contains the Policy terms and conditions for both Continental Europe Cover and UK & Continental Europe Cover. Please check your Certificate of Insurance to see which Policy you have purchased and make a note of your Policy Number below.

Please note: Information that applies to UK & Continental Europe Cover ONLY will appear in italics on a grey background.

Information that applies to BOTH Continental Europe Cover and UK & Continental Europe Cover will appear as standard text on a white background.

Please call these Helpline telephone numbers should you need assistance. Keep them with you at all times and remember to quote your Policy Number when you contact us, so we can deal with your call without delay.

Policy Number: _____

Helplines

**Emergency Assistance, 24 hours a day,
365 days a year operated by
AXA Assistance Services Europe Limited:**

For assistance within the UK... 0845 456 6355

For assistance outside the UK... +44 (0)845 456 6355

When dialling from outside the UK add 44 then omit the 0.
When dialling within the UK omit 44.

On many European motorways or Autoroutes, particularly in France, if you break down the emergency telephones will be answered by the Police. They will arrange for a recovery vehicle to tow you off the motorway either to a local garage or perhaps to a motorway service station, without reference to AXA Assistance Services Europe Limited. You may be requested to pay for this assistance on the spot, in which case obtain and keep a receipt and we will reimburse you. Alternatively, once you are towed to a place of safety, call AXA Assistance Services Europe Limited and the recovery agent may accept our guarantee of payment. At this stage we will also arrange any other assistance you require.

Only by calling the Emergency Helpline number will you be able to claim for the services provided.

Helplines

**Emergency Assistance operated by
AXA Assistance Services Europe Limited:**

In case of emergency at home or abroad, please write your Policy Number here.

Policy Number: _____

For assistance within the UK..... 0845 456 6355

For assistance outside the UK..... +44 (0)845 456 6355

When dialling from outside the UK add 44 then omit the 0.
When dialling within the UK omit 44.

**Emergency Assistance
24 hours a day,
365 days a year.**

In an emergency, please check that the circumstances are covered by **your** Policy. Having done this **you** should contact **us** on the appropriate number shown above, giving **your** name, Policy Number, and as much information as possible. **You** will need to give **us** a telephone or fax number where **we** can contact **you** or leave messages at any time of the day or night.

We will contact the nearest suitable garage. On motorways use the Emergency telephones to get help. Then call **us** when **you** reach an ordinary phone.

Please note that car hire companies impose minimum driver age restrictions. **You** must hold a valid driving licence and credit card.

To comply with the insurance terms and conditions, you must contact us before incurring any costs in order to obtain our prior authorisation.

If you change your vehicle during the period of insurance you must contact American Express Insurance Services to notify details of the replacement vehicle to be covered, otherwise no cover will be provided for this vehicle.

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Welcome

American Express Emergency Vehicle Assistance has been specially designed to complement our European Travel Insurance, so **you** can now protect **your** vehicle when motoring in Continental Europe.

Our Annual Policy gives **you** cover for a maximum of 183 days spent travelling outside the UK area (not exceeding 120 consecutive days in total).

N.B. UK & Continental Europe Cover only

*If **you** have opted for UK & Continental Europe Cover, **your** vehicle will also be protected when travelling within the UK. Single Trip Cover is not available under this Policy.*

When driving across Europe, **you** can rely on American Express Emergency Vehicle Assistance to provide peace of mind and security on **your** journeys.

Any queries: please call free on

0800 700 707

American Express® Travel Insurance

Emergency Vehicle Assistance Cover

Policy Summary

The Policy you have bought is Emergency Vehicle Assistance Cover. This Policy Summary tells you how much you can claim under each section of cover, but does not contain the full terms and conditions relating to your Policy. These can be found within this Policy booklet.



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Section	Significant Features and Benefits	Continental Europe Cover	UK & Continental Europe Cover
	<i>Description of Cover</i>	<i>Benefit</i>	<i>Benefit</i>
1	Cover Prior to Departure	Up to £850	<i>Up to £850</i>
2	Roadside Assistance & Additional Labour	Up to £350	<i>Up to £350</i>
3	Roadside Parts	Cost of location and transport of replacement parts to vehicle	<i>Cost of location and transport of replacement parts to vehicle</i>
4	Break-in	Up to £300	<i>Up to £300</i>
5	Vehicle Out of Use	Up to £1,200 and, if appropriate, up to £900 in total for bed and breakfast for all persons in your party	<i>Up to £1,200 and, if appropriate, up to £900 in total for bed and breakfast for all persons in your party</i>
6	Camping Trips	Cost of hiring replacement tent or up to £560 in total for bed and breakfast for all persons	<i>Cost of hiring replacement tent or up to £560 in total for bed and breakfast for all persons</i>
7	Alternative Driver	All necessary additional costs to return insured vehicle to your home or provide a qualified driver	<i>All necessary additional costs to return insured vehicle to your home or provide a qualified driver</i>

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Section	Significant Features and Benefits	Continental Europe Cover	UK & Continental Europe Cover
	<i>Description of Cover</i>	<i>Benefit</i>	<i>Benefit</i>
8	Repatriation	Cost of transporting you home	<i>Cost of transporting you home</i>
9	Customs Regulations	All Customs formalities dealt with	<i>All Customs formalities dealt with</i>
10	Roadside Assistance (including Home Start) & Continuation of Journey	Not Covered	<i>Up to £50 call-out and one hour's labour charge. If required, towing to nearest garage, plus a further hour's labour charge</i>
11	Vehicle Recovery	Not Covered	<i>Transport to your home, your original destination or to a repairer in the vicinity</i>
12	Medical Transfer	Not Covered	<i>Organise transfer to a hospital near your home</i>
13	Alternative Driver	Not Covered	<i>All necessary additional costs to return insured vehicle to your home or provide a qualified driver</i>

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Introduction

Thank you for choosing American Express to provide **your** Travel Insurance. This booklet provides useful information about the protection offered by this insurance, and the way in which the Policy will operate.

The Intermediary

Your Policy has been arranged by American Express Insurance Services Europe Ltd (“American Express Insurance Services”), a UK based insurance intermediary authorised and regulated by the Financial Services Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and conditions set out by the insurer.

American Express Insurance Services will provide **you** with renewal terms offered by their travel insurance provider at the time of **your** renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** Policy with the current or any new insurer, **you** will need to contact American Express Insurance Services by calling **0800 700 707**, at least 30 days prior to the expiry of **your** Policy.

If American Express Insurance Services does not hear from **you**, **your** Policy will be renewed automatically.

The Insurer

This Policy is underwritten by American Express Insurance Services' current travel insurance provider, Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland, which is a branch of Inter Partner Assistance S.A., Avenue Louise 166 bte 1, 1050 Brussels, a Belgian company authorised by the Banking, Finance and Insurance Commission of Belgium, registration 0487 and regulated by the Financial Services Authority for the conduct of UK business (registered number: 202664). Some of the benefits and services under this Policy will be provided by its agent, AXA Travel Insurance (registered number: 475445), of the same Ireland address. All companies are members of the AXA Assistance Group.

Key Exclusions of **your** Policy

N.B. Please refer to the section titled ‘General exclusions of **your** Policy’ for the full list of exclusions.

- Any claim resulting from something **you** knew about at the time of paying for the insurance before the start of the **period of insurance** or before the start of **your trip** and which **you** did not declare to American Express Insurance Services before the start of the **period of insurance** or before the start of **your trip**.
- Any claim arising from **your** participation in motor racing, rallies, speed or duration tests or practicing for such events.
- Any previously inadequate repair to the **insured vehicle**.
- Any claim where the **insured vehicle** has not been maintained or operated in accordance with the manufacturer’s recommendations.
- Any claim where the **insured vehicle** has been used for hire or reward, or for the carriage of commercial goods.
- Any costs which **you** would have been required or expected to pay, if the event resulting in the claim had not happened.
- Any loss or damage deliberately carried out or deliberately caused by **you**.
- Any loss, damage, or expense which at the time of happening is insured by, or would but for the existence of this Policy, be insured by any other existing certificate, Policy, or any motor organisation’s service. If **you** have any other Policy in force, which may cover the event, for which **you** are claiming, **you** must tell **us**.
- Any claim resulting from **you** taking part in **manual work** during **your trip**.

Please refer to **your** Certificate of Insurance for details of **your** Emergency Vehicle Assistance Policy duration and premium payable.

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Cancellation of **your** Policy

If this insurance does not meet **your** needs, **we** will cancel **your** Policy providing **you** return it to **us** within 15 days of issue and **you** have not already taken **your** trip or intend to make a claim. **We** will refund **your** premium in full, but **we** will not refund it, or any part of **your** premium, after the 15 days have passed.

How to make a claim

- a) In the event of an emergency involving **your** insured vehicle, **you** should immediately call the Emergency Helpline, shown below, for assistance and **our** authorization for **you** to incur expenses.

+44 (0) 845 456 6355

When dialing from outside the UK add 44 and then omit the 0. When dialing within the UK, omit the 44.

- b) For covered costs that are not met directly by AXA Assistance Services Europe Limited, telephone **our** Claims Helpline on 0845 408 2969 (during office hours) to obtain a claim form. **You** will need to give:
- **your** name,
 - **your** Policy Number found at the top of **your** Certificate of Insurance,
 - brief details of **your** claim.

Alternatively **you** can e-mail **our** Claims Helpline on amex.retail@axa-assistance-claims.com **You** will need to provide:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- **your** address including the postcode,
- the section under which **you** wish to make a claim.

You must return **your** completed claim form and any additional information **we** ask for within 28 days of the end of **your** trip.

You must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.

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It is always advisable to keep copies of all the documents that **you** send to **us**.

Complaints Procedure

We aim to provide a first class service at all times. However, if **you** have a complaint, in order to get **your** complaint dealt with as quickly and efficiently as possible, please ensure **your** complaint is directed to the right department.

Does **your** complaint relate to:

Your Policy or a claim on **your** Policy?

If it is about **your** Policy or a claim on **your** Policy, please contact:

AXA Travel Insurance (Complaints Department)
The Quadrangle
106-118 Station Road
Redhill, Surrey, RH1 1PR

If **your** complaint is about service **you** have received from American Express Insurance Services, please contact:

American Express Insurance Executive Office
1st Floor
AMEX House
Edward Street
Brighton BN88 1AH

Please enclose the following details when sending **your** letter:

- **your** full name, postcode and contact phone number(s);
- the type of Policy and **your** Policy and/or claim reference;
- an outline of the reasons for **your** complaint.

If **you** are not satisfied with the way **your** complaint has been dealt with **you** have the right to ask the Financial Ombudsman Service to review **your** case. Telephone: 0845 080 1800 or write to: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

Compensation Scheme

We are covered by the FSCS. **You** may be entitled to compensation from the scheme if we cannot meet **our** obligations. This depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 90% of the claim, without any upper limit. Further information about compensation scheme arrangements is available from the FSCS.

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Important Information you should read

1. We recommend that **you** take this Policy booklet (which includes **your** Policy Summary) together with **your** Certificate of Insurance with **you** when **you** travel. These are proof of **your** insurance and will be needed if **you** have to make a claim.
2. Please make sure **you** understand what this Policy covers. If **you** refer to the Policy Summary on page 3 of this Policy booklet, this draws **your** attention to the most important parts of the Policy. Only this Policy booklet gives full details of what is and is not covered, all terms and conditions, how much **you** can claim and how **your** claim will be handled.
3. Please see 'Emergency Assistance' for details of what **you** should do in an emergency.
4. Premium Refund within 15 days of issue. If this insurance does not meet **your** needs, return **your** Certificate of Insurance with this Policy booklet to American Express Insurance Services within 15 days of issue and **we** will cancel **your** Policy and refund **your** premium in full, providing **you** have not already taken **your** trip or intend to make a claim. **We** will not refund **your** premium, or any part of it, after the 15 days have passed.
5. Any changes to the normal cover are shown on **your** Certificate of Insurance, which must be read in conjunction with this Policy booklet. It is particularly important that **you** read **your** Certificate of Insurance and if any details are incorrect, or **your** needs change in any way, **you** must contact American Express Insurance Services as soon as possible.
6. If **you** change **your** vehicle during the **period of insurance** you must contact American Express Insurance Services to notify details of the replacement vehicle to be covered, otherwise no cover whatsoever will be provided for this vehicle.

0800 700 707

EMERGENCY ASSISTANCE 24 HOURS A DAY, 365 DAYS A YEAR

In an emergency, please check that the circumstances are covered by **your** Policy. Having done this **you** should contact AXA Assistance on the appropriate number below, giving **your** name, Policy Number, and as much information as possible. **You** will need to give **us** a telephone or fax number where **we** can contact **you** or leave messages at any time of the day or night.

We will contact the nearest suitable garage. On motorways use the Emergency telephones to get help. Then call **us** when **you** reach an ordinary phone.

Please note that car hire companies impose minimum driver age restrictions. **You** must hold a valid driving licence and credit card.

To comply with the insurance terms and conditions, you must contact us before incurring any costs in order to obtain our prior authorisation.

**For assistance within the
United Kingdom area
0845 456 6355**

**For assistance outside the
United Kingdom area
+44(0) 845 456 6355**

Use of your personal data

Please read the paragraphs below, which define how American Express Insurance Services Europe Ltd, (“American Express Insurance Services”) and Inter Partner Assistance S.A and AXA Travel Insurance (cumulatively “AXA”) use information about **you** for the purpose of providing **you** with insurance services and additional products and services.

Both organisations appreciate the importance of the protection, confidentiality and security of **your** information.

Personal Information

If **your** insurance application is accepted by American Express Insurance Services and AXA and **you** are issued a Certificate of Insurance and Policy wording, **you** also agree that American Express Insurance Services Europe Ltd and AXA may:

- (a) disclose and use information about **you** and **your** insurance cover – including information relating to **your** medical status and health – to companies within the American Express and AXA group of companies worldwide, their partners, service providers and agents in order to administer and service **your** account/insurance cover (and renewal thereof), process and collect relevant payments on it, for fraud prevention and to manage the benefits or insurance programmes in which **you** are enrolled;
- (b) use information about **you** and **your** insurance cover – excluding information relating to **your** medical status and health – to develop lists for use within the American Express group of companies worldwide and its partners to develop or make offers to **you** (by mail, email or telephone) of products and services in which **you** may be interested. The information used to develop these lists may be obtained from **your** application, from information on where and how **you** use **your** Card if **you** are an American Express Cardmember and from surveys and research (which may involve contacting **you** by mail or telephone) and information obtained from other external sources such as merchants or marketing organisations;
- (c) undertake all of the above within and outside the United Kingdom and the European Union. This includes processing **your** information in the USA in which data protection laws are not as comprehensive as in the European Union. However, both organisations have taken appropriate steps to ensure the same (or equivalent) level of protection for **your** information in the USA and other countries as there is in the European Union; and

- (d) monitor and/or record **your** telephone calls in relation to cover to ensure consistent servicing levels and account operation.

If **you** wish to have **your** name removed from any marketing programmes or if **you** require any further information please contact American Express Insurance Services Europe Ltd on +44 1273 668300.

Please provide **your** full name, postal address, travel insurance Policy Number and if **you** are an American Express Cardmember **your** Card Number. Please allow 40 days if **you** wish to have **your** name removed from marketing programmes for **your** request to become effective.

Both organisations use advanced technology and well defined employee practices to help ensure that **your** information is processed promptly, accurately and completely and in accordance with applicable data protection law.

If **you** want to know what information is held about **you** by the American Express Group please write to:

American Express Services Europe Limited
Data Protection Office
Dept 2007
Amex House
Edward Street
Brighton BN88 1AH

If **you** want to know what information is held about **you** by the AXA Group, please write to:

AXA Travel Insurance
Data Protection Officer
The Quadrangle
106-118 Station Road
Redhill, Surrey, RH1 1PR

There may be a charge for this service, as permitted by law.

Any information which is found to be incorrect will be corrected promptly.

The American Express Group reserve the right to contact **you** by mail or telephone in connection with the operation of **your** account and related services.

Information about **you** only for so long as it is appropriate for the above.

Policy Information

Introduction

Thank you for choosing American Express to provide **your** Travel Insurance. This booklet provides useful information about the protection offered by this insurance, and the way in which the Policy will operate.

The Intermediary

Your Policy has been arranged by American Express Insurance Services Europe Ltd (“American Express Insurance Services”), a UK based insurance intermediary authorised and regulated by the Financial Services Authority. They will administer **your** Policy, and organise the renewal of annual policies, subject to the terms and conditions set out by the insurer.

American Express Insurance Services will provide **you** with renewal terms offered by their travel insurance provider at the time of **your** renewal. A renewal notice will be sent to **you** before the end of the **period of insurance**, explaining how this will work. If **you** do not wish to renew **your** Policy with the current or any new insurer, **you** will need to contact American Express Insurance Services by calling **0800 700 707**, at least 30 days prior to the expiry of **your** Policy.

If American Express Insurance Services does not hear from **you**, **your** Policy will be renewed automatically.

The Insurer

This Policy is underwritten by American Express Insurance Services' current travel insurance provider, Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland, which is a branch of Inter Partner Assistance S.A., Avenue Louise 166 bte 1, 1050 Brussels, a Belgian company authorised by the Banking, Finance and Insurance Commission of Belgium, registration 0487 and regulated by the Financial Services Authority for the conduct of UK business (registered number: 202664). Some of the benefits and services under this Policy will be provided by its agent, AXA Travel Insurance (registered number: 475445), of the same Ireland address. All companies are members of the AXA Assistance Group.

Please note that it is **your** responsibility to advise **your** UK motor insurer of **your** intention to travel abroad, and to obtain a Green Card where applicable.

If **you** have any general queries relating to this Policy, please contact American Express Insurance Services on the following number:

0800 700 707

Complaints Procedure

We aim to provide a first class service at all times. However, if **you** have a complaint, in order to get **your** complaint dealt with as quickly and efficiently as possible, please ensure **your** complaint is directed to the right department.

Does **your** complaint relate to:

Your Policy or a claim on **your** Policy?

If it is about **your** Policy or a claim on **your** Policy, please contact:

AXA Travel Insurance (Complaints Department)
The Quadrangle
106-118 Station Road
Redhill, Surrey, RH1 1PR

If **your** complaint is about service **you** have received from American Express Insurance Services, please contact:

American Express Insurance Executive Office
1st Floor
AMEX House
Edward Street
Brighton BN88 1AH

Please enclose the following details when sending **your** letter:

- **your** full name, postcode and contact phone number(s);
- the type of Policy and **your** Policy and/or claim reference;
- an outline of the reasons for **your** complaint.

If **you** are not satisfied with the way **your** complaint has been dealt with **you** have the right to ask the Financial Ombudsman Service to review **your** case. Telephone: 0845 080 1800 or write to: Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

What to do if you need to make a claim

1. First check **you** are covered by **your** Policy. Please read **your** Certificate of Insurance and the appropriate section in this Policy booklet to see exactly what is, and is not covered, noting particularly any conditions, limitations and exclusions.
2. Making a claim
In the event of an emergency involving **your insured vehicle you** should immediately call the Emergency Helpline shown on the first page of this Policy booklet for assistance and **our** authorisation for **you** to incur expenses for covered costs that are not met directly by AXA Assistance Services Europe Limited, telephone **our** Claims Helpline on 0845 408 2969 (during office hours) to obtain a claim form. **You** will need to give:
 - **your** name,
 - **your** Policy Number found at the top of **your** Certificate of Insurance,
 - brief details of **your** claim.

Alternatively **you** can e-mail our Claims Helpline on amex.retail@axa-assistance-claims.com **You** will need to provide:

- **your** name,
- **your** Policy Number found at the top of **your** Certificate of Insurance,
- **your** address including the postcode,
- the section under which **you** wish to make a claim.

You must return **your** completed claim form and any additional information **we** ask for within 28 days of the end of **your** trip.

You must supply all of **your** original invoices, receipts and reports etc. **You** should check the section under which **you** are claiming for any specific conditions and details of any supporting evidence that **you** must give **us**.

It is always advisable to keep copies of all the documents that **you** send to **us**.

3. Claims Handling Agents

To help **us** agree a quick and fair settlement of a claim, it may sometimes be necessary for **us** to appoint a claims handling agent.

Definition of Words

This part of the Policy booklet explains any words which have a special meaning. Each word is listed with its meaning explained immediately afterwards. Wherever a word with special meaning appears in this Policy booklet it will be printed in **bold** type.

Geographical limits:

Cover will apply in the following countries: Albania; Andorra; Austria; Azores; Bailiwick of Guernsey; Bailiwick of Jersey; Balearics; Belarus; Belgium; Bulgaria; Canary Islands; Corsica; Croatia; Cyprus; Czech Republic; Denmark; Egypt; Estonia; Finland; France; Germany; Gibraltar; Greece; Hungary; Iceland; Isle of Man; Israel; Italy; Latvia; Liechtenstein; Lithuania; Luxembourg; Madeira; Malta; Moldova; Monaco; Morocco; Netherlands; Norway; Poland; Portugal; Republic of Ireland; Romania; Russia west of the Ural Mountains; San Marino; Sardinia; Sicily; Slovak Republic; Slovenia; Spain; Sweden; Switzerland; Tunisia; Turkey; Ukraine

*N.B. UK & Continental Europe Cover only
Cover also applies within the **United Kingdom area**.*

N.B. Continental Europe Cover only

In addition residents of England, Scotland, Wales and Northern Ireland are covered for **trips** to the Channel Islands.

Please note the following:

When **you** are travelling outside the **United Kingdom area**, all the benefits apply door-to-door, so **you** will also be covered within the **United Kingdom area** during the direct

journeys to and from **your** port of departure/arrival or the international rail terminal.

Home:

The place where **you** normally live in the **United Kingdom area** and use for domestic purposes.

Insured vehicle:

The vehicle (details of which **you** have supplied to **us**) described in the Certificate of Insurance which is:

- a private car, motor cycle of more than 120cc cylinder capacity, motorised caravan, minibus, light van, estate car, or 4x4 sport utility vehicle, registered in the **United Kingdom area**; a towed caravan or trailer of proprietary make;
- 10 years old or less at the commencement of the **period of insurance**;
- maintained and operated in accordance with the manufacturer's recommendations;
- not used for hire or reward;
- a vehicle not exceeding (including any load carried) the following gross vehicle weight and dimensions: 3,500 kg; length 7m; height 3m; width 2.25m;
- a vehicle carrying not more than the number of persons recommended by the manufacturer (and for whom seats are provided), with an overall maximum of 8 persons including the driver.

Please note the following:

If **you** change **your** vehicle during the **period of insurance** **you** must contact American Express Insurance Services to notify details of the replacement vehicle to be covered, otherwise no cover whatsoever will be provided.

Manual work:

Work which involves the installation, assembly, maintenance or repair of electrical, mechanical or hydraulic plant (other than in a purely managerial/supervisory, sales or administrative capacity) or manual labour of any kind other than in the catering industry or fruit picking by hand. Manual labour includes, but is not restricted to, hands-on work as a plumber, electrician, lighting or sound technician, carpenter, painter/decorator or builder.

Period of insurance:

The period to which the insurance applies and for which **you** have paid, or agreed to pay the appropriate premium. This period is shown on **your** Certificate of Insurance. Please note that under Section 1 – Cover Prior to Departure applies for up to 7 days before **your** planned date of departure. Cover under all other sections applies for the length of **your** trip, unless it is further qualified under a specific section.

Please note the following:

When **you** have purchased Annual Cover **you** and **your** **insured vehicle** will be covered for a maximum of 183 days

spent travelling outside the **United Kingdom area** during the **period of insurance**, irrespective of the number of individual **trips you make**.

*N.B. UK & Continental Europe Cover only.
Cover also applies within the **United Kingdom area**.*

Public transport:

Includes the following forms of transport: aircraft, bus, coach, pre-booked taxi, sea vessel, and train.

Trip:

For Annual Policies

A journey undertaken by **you** in the **insured vehicle**, within the **geographical limits** and during the **period of insurance** shown on **your** Certificate of Insurance, which starts and ends in the **United Kingdom area** and which does not exceed 120 consecutive days in total.

For Single Trip Policies

A journey undertaken by **you** in the **insured vehicle**, within the **geographical limits** and during the **period of insurance** shown on **your** Certificate of Insurance, which starts and ends in the **United Kingdom area**.

United Kingdom area:

England, Scotland, Wales and Northern Ireland.

We, us or our:

Inter Partner Assistance, 10/11 Mary Street, Dublin 1, Ireland, which is a branch of Inter Partner Assistance S.A., Avenue Louise 166 bte 1, 1050 Brussels, a Belgian company authorised by the Banking, Finance and Insurance Commission of Belgium, registration 0487 and regulated by the Financial Services Authority for the conduct of UK business (registered number: 202664) and its agent AXA Travel Insurance (registered number: 475445) of the same Ireland address. All are member companies of the AXA Assistance Group.

You, your, yourself:

The person(s) shown on **your** Certificate of Insurance who live(s) in the **United Kingdom area** and any other occupant of the **insured vehicle** (being a resident of the **United Kingdom area**), who is accompanying **you** on a **trip**.

General Conditions of **your** Policy

We will only pay **your** claim if **you** meet the following conditions:

1. **You** must declare to American Express Insurance Services all facts which are likely to affect this insurance. Failure to do so may prejudice **your** entitlement to claim. If **you** are uncertain as to whether a fact is likely to affect this insurance, **you** should disclose it.

2. **Your** Policy will be automatically renewed each year, subject to **your** age, **your** medical conditions and the Policy, terms and conditions and limitations unless **you** notify **us** otherwise 30 days prior to **your** renewal date. **You** will receive a written reminder before the end of the **period of insurance**.

N.B. Please refer to **your** Certificate of Insurance for age restrictions applying to the renewal of **your** Policy.

If **you** book a trip during the current **period of insurance** for which **you** the expiry of this **period of insurance**, cover for cancellation in respect of that **trip** will continue in force provided **you** renew **your** Policy and subject to the terms, conditions and limitations in place at the time of renewal.

In the event that the renewal of **your** Policy is no longer offered by **us**, American Express Insurance Services Europe Limited, the intermediary, may provide **you** with the details of any renewal terms offered by its new travel insurance provider.

3. **You** must exercise reasonable care for the supervision and safety of the **insured vehicle** and unless **you** are incapacitated, or by prior arrangement with **us**, **you** must be in attendance at the **insured vehicle** at the estimated time of assistance that **we** advise.
4. **You** must act as if **you** are not insured and take steps to minimise **your** loss as far as possible.
5. **We** will make every effort to apply the full range of services in all circumstances as shown in **your** Policy booklet. Remote geographical locations or unforeseeable adverse local conditions may preclude the normal standard of service being provided.
6. **We** may:
 - a) deny **your** application for insurance coverage and/or;
 - b) deny renewal of **your** Policy and/or;
 - c) cancel **your** Policy by giving seven days notice by recorded delivery to **you** at **your** last known address. In such an event the premium shall be adjusted appropriately for the unexpired part of the **period of insurance**.
7. **You** must comply with all the terms and conditions of this Policy before a claim will be paid. **You** must make no admission, offer, promise or payment without **our** prior consent.
8. **You** must contact **us** as soon as practicable in the event of an emergency or any occurrence which may give rise to a claim under this insurance.
9. **You** must ensure that any driver of the **insured vehicle** has a fully valid driving licence and has appropriate insurance.

10. **We** are entitled to take over **your** rights in the defence or settlement of a claim or to take proceedings for **our** own benefit against another party and shall have full discretion in such matters. **We** may, at any time, pay to **you our** full liability under this Policy after which no further liability shall attach to **us** in any respect or as a consequence of such action.
11. **We** reserve the right to nominate a suitable garage equipped to undertake a repair, at **your** expense, rather than recover an immobilised **insured vehicle**, where effective repairs can be completed within 8 hours.
12. If **we** arrange for temporary roadside repairs to be carried out to **your insured vehicle**, **you** are required to then immediately arrange for any permanent repairs that may be necessary.
13. If **you** are (and/or the **insured vehicle** is) repatriated, **you** must give **us** the benefit of any unused travel tickets which would otherwise have been utilised by **you**.
14. If anything happened on **your trip** which might lead to a claim under **your** Policy, **you** must send **us** a completed claim form where appropriate within 28 days of **your** returning **home**.
15. If **you** or anyone acting for **you**, uses fraudulent or dishonest means, or makes a false statement to:
 - obtain cover;
 - make a false claim; OR
 - attempt to claim for more than is actually lost then all benefits under **your** Policy will be lost. Any fraudulently obtained benefits must be repaid to **us**.
16. If **we** have admitted liability, any dispute as to the interpretation of this Policy, or as to any rights or obligations under this Policy shall be referred to arbitration under the provisions laid down under current legislation. Where any dispute is referred to arbitration under the terms of this Condition, **you** shall not exercise any right of legal action against **us** before an award is made in the course of the arbitration.
17. **You** will be required to provide **us** with an American Express card or other payment card to cover any costs or expenses **we** have paid out on **your** behalf which are not covered under the terms of **your** insurance.
18. This Policy must be paid for in full at the time of purchase.
19. This insurance Policy is effected in England and is governed by the laws of England and Wales.
20. This contract may only be completed in English.

General Exclusions of **your** Policy

These exclusions apply to all the Sections of **your** Policy.

1. Any claim resulting from something **you** knew about at the time of paying for the insurance, before the start of the **period of insurance**, or before the start of any **trip** and which **you** did not declare to American Express Insurance Services before the start of the **period of insurance**, or before the start of any **trip**.
2. Any claim arising from **your** participation in motor racing, rallies, speed or duration tests or practising for such events.
3. Any previously inadequate repair to the **insured vehicle**.
4. Any claim where the **insured vehicle** has not been maintained or operated in accordance with the manufacturer's recommendations.
5. Any claims where the **insured vehicle** has been used for hire or reward, or for the carriage of commercial goods.
6. Any loss or damage where **you** have put **yourself** in danger except where **you** were trying to save another human life.
7. Any costs which **you** would have been required or expected to pay, if the event resulting in the claim had not happened.
8. Any loss or damage deliberately carried out or deliberately caused by **you**.
9. Any loss, damage or expense, which at the time of happening is insured by, or would but for the existence of this Policy, be insured by any other existing certificate, policy or any motoring organisation's service. If **you** have any other policy in force which may cover the event for which **you** are claiming, **you** must tell **us**.
10. Any claim where **you** have been carrying out paid **manual work** in conjunction with any profession, business or trade during the **trip**.
11. Any loss relating to services which **we** have provided to **you** or any loss which happens following any delay on **our** part, in providing services to **you**, unless negligence on **our** part can be proved.
12. Loss, damage, death, injury, illness, disablement, or expense caused by: war; invasion; act of a foreign enemy; hostilities (whether war be declared or not); terrorist activity; civil war; rebellion; revolution; insurrection; military or usurped power; **you** taking part in civil commotion or riot of any kind.

13. The actual, alleged or threatened discharge, dispersal, seepage, migration, escape, release of or exposure to any hazardous biological, chemical, nuclear or radioactive material, gas, matter or contamination.
14. Any claims directly or indirectly caused by:
 - ionising radiation or radioactive contamination from any nuclear fuel, nuclear waste or any risk from nuclear equipment;
 - pressure waves from aircraft and other flying objects travelling at or faster than the speed of sound.
15. Any claim involving, or involving the fear of: delay, loss, damage or any other costs that are indirectly caused by the event which led to **your** claim, unless specifically stated in this Policy which is caused, either directly or indirectly, by the actual or potential inability of any computer, data processing equipment or media, microchip, integrated circuit or similar device or any computer software or stored programme, to correctly recognise any date as the true calendar date or to continue to function correctly in respect of or beyond that date.

Policy Sections

Cover outside the United Kingdom area

Section 1 – Cover Prior to Departure

What you are covered for:

If the **insured vehicle** is lost, immobilised or rendered unroadworthy as a result of fire, theft or attempted theft, accidental damage or breakdown, and this occurs during the 7 days immediately preceding **your** arranged date of departure, **we** will pay up to £850 in total under this section towards:

- the hire of an equivalent replacement vehicle, where available, for the purpose of carrying out the original **trip** (including rental charge, third party motor insurance, collision damage waiver and any necessary drop-off charge) in the event that:
 - i) the **insured vehicle** is stolen and not recovered before the arranged date of departure; OR
 - ii) the **insured vehicle** cannot be repaired within 24 hours following the booked time of departure for the **trip**. Any claim involving the hire of a replacement vehicle must have **our** prior approval. **You** must contact **us** as soon as **you** know **your insured vehicle** may be unavailable for the planned **trip**.
- the additional cost of rebooking any sea crossing missed as a result of the incident giving rise to a valid claim (or, where the original route is unavailable, the nearest

suitable alternative sea crossing), in the event that the **insured vehicle** can be repaired within 24 hours of the original time of the planned departure for the **trip**.

What you are not covered for:

- a) loss of use of a vehicle hired to **you**;
- b) the cost of fuel and oil used in any replacement vehicle;
- c) the cost of any Personal Accident insurance or other benefit not specifically covered under this section;
- d) anything mentioned in the General Exclusions.

Section 2 – Roadside Assistance & Additional Labour

What you are covered for:

If the **insured vehicle** is immobilised or rendered unroadworthy during **your trip** as a result of fire, theft or attempted theft, accidental damage or breakdown:

- **we** will arrange and pay up to a maximum of £350 under this section for roadside assistance, towing to the nearest suitable repairer and additional labour, if required. Any charges exceeding this maximum limit must be paid for by **you**.
A garage or specialist undertaking repair work (other than at the roadside) will be acting as **your** agent for such repair work, and **you** are responsible for approving the work and paying the cost of repairs;
- At **your** request, **we** will send an urgent telephone message to **your home** or destination.

What you are not covered for:

- a) call-out, towing and labour charges exceeding £350;
- b) the cost of replacement parts or other materials;
- c) anything mentioned in the General Exclusions.

Section 3 – Roadside Parts

What you are covered for:

In the event of necessary replacement parts not being available locally during the **trip**, on receipt of **your** instructions, **we** will undertake to obtain them elsewhere and will pay all freight charges involved in dispatching them to the location of the **insured vehicle**.

We will endeavour to provide the replacement parts required but **we** can give no guarantee that they will be available, especially in the case of older vehicles where parts may be impossible to locate.

We will bear the cost of location and transport of the replacement parts. The actual cost of the parts and any Customs Duty must be paid to **us** by **you**, by a debit to **your** American Express Card Account or other card or by a prior deposit of funds in the **United Kingdom area**.

When **you** are invoiced for a surcharge subject to the return of the old unit or part, **you** must return the defective part at **your** own expense to the supplier.

If **you** place a firm order for replacement parts and these are not subsequently required, or **you** do not await their arrival, **you** will be responsible for the cost of such parts, including all forwarding charges arising from their return.

What **you** are not covered for:

a) anything mentioned in the General Exclusions.

Section 4 – Break-In

What **you** are covered for:

In the event of a theft or attempted theft of the **insured vehicle** or its contents during **your trip**, **we** will pay up to £300 in total per **trip**, for immediate necessary emergency repairs and/or replacement parts to place the **insured vehicle** in a secure condition to allow **you** to continue **your trip**. **You** must obtain a Police Report within 24 hours of the incident giving rise to a claim.

What **you** are not covered for:

- a) damage to paintwork or other cosmetic items;
- b) costs incurred following **your** return **home**;
- c) loss or damage of any contents or personal effects;
- d) anything mentioned in the General Exclusions.

Section 5 – Vehicle Out of Use

What **you** are covered for:

If the **insured vehicle** is rendered unusable as a result of fire, theft or attempted theft, accidental damage or breakdown occurring during **your trip**, and repairs cannot be effected the same day:

- **we** will pay up to a maximum of £1,200 in total during any one **trip** for the additional cost of transporting **you**, with **your** luggage, to **your** destination by **public transport** OR by hire of an equivalent replacement vehicle when and where obtainable whilst the **insured vehicle** remains unserviceable. Hire of a replacement vehicle will include rental charge, third party motor insurance, collision damage waiver and any necessary drop-off charge;

AND IF APPROPRIATE

- **we** will pay the cost of Bed and Breakfast up to £225 per person, with an overall maximum for all persons in **your** party of £900 per **trip** whilst **you** are awaiting completion of repairs, provided that these costs are additional to, or in excess of, any planned accommodation costs payable by **you** if loss of use of the **insured vehicle** had not occurred.

What **you** are not covered for:

- a) the cost of fuel and oil used in any replacement vehicle;
- b) the cost of any Personal Accident insurance or other benefit not specifically covered under this section;
- c) anything mentioned in the General Exclusions.

Section 6 – Camping Trips

What **you** are covered for:

If the tent **you** are carrying with **you**, and intend using during **your trip** as **your** principal overnight accommodation, is rendered unserviceable through theft or attempted theft, or accidental damage:

- **we** will pay the cost of hiring a suitable replacement tent where available, for the remainder of the period of **your trip**, and will arrange for the delivery of such replacement tent to the site where **you** are staying;

OR, WHEN THIS IS NOT PRACTICABLE

- **we** will pay **you** up to £35 per insured person per day for Bed and Breakfast expenses over and above those planned, with an overall maximum of £560 for all persons in **your** party.

What **you** are not covered for:

- a) any expenses incurred as a result of adverse weather conditions which do not actually damage the tent rendering it unserviceable;
- b) loss of use of any tent **you** are not carrying on the **trip** with **you** or which belongs to a Tour Operator or holiday company;
- c) anything mentioned in the General Exclusions.

Section 7 – Alternative Driver

What **you** are covered for:

In the event that the only driver of **your insured vehicle** is declared medically unfit to drive the **insured vehicle** in the course of a **trip**, or has to return **home** early because of what **we** agree is a serious or urgent reason, and there is no one else in **your** party qualified and competent to drive:

- **we** will pay all necessary additional costs incurred to return the **insured vehicle** to **your home**;

OR

- **we** will provide a qualified driver to drive back the **insured vehicle** and passengers.

What **you** are not covered for:

- a) anything mentioned in the General Exclusions.

Section 8 – Repatriation

What you are covered for:

If the **insured vehicle** is lost, immobilised or rendered unroadworthy during a **trip** as a result of fire, theft or attempted theft, accidental damage or breakdown:

- **we** will pay the cost of transporting **you**, with **your** luggage, **to your home** if the **insured vehicle** cannot be and could not have been repaired (or, in the case of theft, has not been recovered in a roadworthy condition) by the intended time of **your return home**. The means of **public transport** to be employed shall be at **our** discretion;

AND

- **we** will pay the cost of transporting the **insured vehicle** to **your home** if repairs cannot be carried out while **you** are on **your trip** (or the **insured vehicle**, if stolen, has been recovered but not in a roadworthy condition), by the intended time of **your return home**;

AND

- **we** will pay for necessary garage storage costs and costs of transportation and delivery, including any additional shipping costs;

OR

- **we** will pay the cost of one person to travel to the location of the **insured vehicle** by **public transport** to drive the repaired **insured vehicle** to **your home**. Such travel and the means of this travel must be agreed in advance by **us**. If an overnight stay is essential, **we** will pay for one night's accommodation up to £60.

The maximum **we** will pay under this Policy to repatriate the **insured vehicle** will be limited to its current market value in the **United Kingdom area**.

Vehicle repatriation will only be carried out by **us** when it is apparent that repairs can be effected in the **United Kingdom area**, and when **you** confirm to **us** that these repairs will be put in hand immediately **you return home**.

If **we** repatriate the **insured vehicle** following mechanical breakdown, **we** will pay a contribution of up to £250 for the hire of a replacement vehicle in the **United Kingdom area** whilst this is being done.

What you are not covered for:

- a) loss of, or theft of, or damage to, unaccompanied baggage left in the **insured vehicle** if **you** and/or the **insured vehicle** are being transported by **us**;
- b) anything mentioned in the General Exclusions.

Section 9 – Customs Regulations

What you are covered for:

If the **insured vehicle** is beyond economic repair as the result of fire, theft or attempted theft, accidental damage or breakdown occurring outside the **United Kingdom area** during a **trip**, **we** will arrange for its disposal under Customs supervision in the country where it is situated.

We will deal with the necessary Customs formalities.

If as a result of fire, theft or attempted theft, accidental damage or breakdown, the **insured vehicle** is not taken permanently out of the foreign country within the limited time allowed after import, or **you** inadvertently fail to observe the import conditions which permit import for a limited time without payment of duty, then **we** will pay **your** liability for any duty claimed from **you**.

What you are not covered for:

- a) the cost of any other import duties imposed by Customs;
- b) anything mentioned in the General Exclusions.

N.B. UK & Continental Europe Cover only

Cover within the United Kingdom area

Section 10 – Roadside Assistance (including Home Start) & Continuation of Journey

What you are covered for:

If your insured vehicle cannot be used as a result of fire, theft or attempted theft, accidental damage or breakdown occurring during the period of insurance within the United Kingdom area:

- *we will arrange for roadside assistance (including Home Start) and, if necessary, towing to a suitable repairer. We will pay the cost of providing these services including the sum of up to £50 for call-out and up to one hour's labour charge for roadside assistance, plus up to a further hour's labour charge at the repairers, if required. All other labour charges and the cost of replacement parts or other materials are your responsibility.*
- *A garage or specialist undertaking repair work (other than at the roadside) will be acting as your agent for such repair work, and you are responsible for approving the work and paying the cost of repairs, apart from the first hour's labour charge;*
- *at your request, we will send an urgent telephone message to your home or destination.*

What you are not covered for:

- a) *call-out charges more than £50;*
- b) *labour charges in excess of one hour, incurred at the roadside;*

- c) labour charges in excess of one hour, incurred at the repairers;
 - d) the cost of replacement parts or other materials;
 - e) anything mentioned in the General Exclusions.
- If repairs cannot be effected by the end of the working day then, provided **our** services were requested at the time **your insured vehicle** breaks down, **we** will pay up to a maximum of £250 in total for:

EITHER

1) an equivalent self-drive rental vehicle, when and where available, for up to 24 hours to either continue the journey or return **you home** within the **United Kingdom area**. **We** will pay for the rental charge, third party motor insurance, collision damage waiver and any necessary drop-off charge, but **you** remain responsible for the cost of any fuel used. Minimum driver age restrictions may be imposed by the car hire company. **We** will also pay for the cost of a single standard class rail ticket to enable **your insured vehicle** to be collected following repair;

OR

2) the cost for **you** to either continue the **trip** or return **home** by **public transport**. The means of such **public transport** shall be at **our** discretion. **We** will also pay for the cost of a single standard class rail ticket to enable the **insured vehicle** to be collected following repair;

OR

3) necessary Bed and Breakfast costs in a local hotel whilst **you** are waiting for the **insured vehicle** to be repaired.

What **you** are not covered for:

- a) any costs which **you** would have incurred in the course of **your trip** whether or not the incident giving rise to the claim had occurred;
- b) anything mentioned in the General Exclusions.

Section 11 – Vehicle Recovery

What **you** are covered for:

We will provide the following benefits if an incident occurs during the **period of insurance** within the **United Kingdom area** and at least one mile away from **your home**.

- If **your insured vehicle** cannot be used as a result of fire, theft or attempted theft, accidental damage or breakdown, and it is apparent that repairs cannot be effected by the end of the working day, then provided **our** services are requested at the time **your insured vehicle** breaks down, **we** will transport **you** and, if appropriate, the **insured vehicle**:

1) to **your home** within the **United Kingdom area**;

OR

2) to **your original destination** within the **United Kingdom area**;

OR

3) to a repairer in the vicinity of either of the above locations.

- In the event of theft, where the **insured vehicle** is not recovered by the end of the working day, **we** will transport **you** to **your home** within the **United Kingdom area** or to **your original destination** within the **United Kingdom area**.

What **you** are not covered for:

- a) any costs which **you** would have incurred in the course of **your trip** whether or not the incident giving rise to the claim had occurred;
- b) anything mentioned in the General Exclusions.

Section 12 – UK Medical Transfer

What **you** are covered for:

If **you** are hospitalised more than 50 miles from **your home**, either through illness or accident occurring in the course of a **trip** in the **insured vehicle** within the **United Kingdom area** during the **period of insurance**, then **we** will organise, but not pay for, **your** transfer to a suitable hospital near **your home** when it becomes medically prudent to do so.

What **you** are not covered for:

- a) anything mentioned in the General Exclusions.

Section 13 – Alternative Driver

What **you** are covered for:

In the event that the only driver of **your insured vehicle** is declared medically unfit to drive the **insured vehicle**, and there is no one else in **your party** qualified and competent to drive, **we** will pay all necessary additional costs incurred to return the **insured vehicle** to **your home**;

OR

We will provide a qualified driver to drive back the **insured vehicle** and passengers.

What **you** are not covered for:

- a) anything mentioned in the General Exclusions.

NOTES