

Life Insurance plus Critical Illness **key facts**

This document explains the main points of our individual Life Insurance plus Critical Illness policies. Unless specified otherwise, it covers **Level Term, Level Term with the inflation linked option** and **Decreasing Term** policies. Please read it with your Acceptance Terms and keep it with the documents relating to your policy.

The Financial Conduct Authority is the independent financial services regulator. It requires Countrywide Assurance plc to give you this important information to help you to decide whether a **Life Insurance plus Critical Illness** policy is right for you. You should read this document carefully so that you understand what you are buying and then keep it safe for future reference.

**These terms apply to policies issued on or after 7 March 2019.
Different terms apply to policies issued before this date.**



Countrywide Assured



Key facts

Life Insurance plus Critical Insurance

Our policy is designed to make a payment if you or one of your children die during the term of the policy or are diagnosed with one of the specified critical illnesses. If you have a Decreasing Term policy, the cover amount decreases each month over the term of the policy.

This document covers both Level Term and Decreasing Term policies.

You may see our Life Insurance plus Critical Illness policies called CanProtect Level Term Plus and CanProtect Decreasing Term Plus in other policy documentation. other policy documentation.

Plus...

Your cover

We will make a payment if you:

- die, or
- are diagnosed with, or undergo the specific surgery described for, one of the listed core critical illness conditions or one of the listed additional critical illness conditions and survive for at least 14 days from when you are diagnosed; or
- are diagnosed with a terminal illness and are not expected to live more than 12 months.

Will make a payment if one of your children:

- dies, or
- is diagnosed with, or undergoes the specific surgery described for, one of the core critical illness conditions, one of the additional critical illness conditions or one of the children's specific critical illness conditions and survives for at least 14 days from when they are diagnosed.

Your commitment

- To make regular monthly or yearly payments until the policy ends.
- To let us know if any information about you is incorrect.
- To answer all questions in the application honestly and take care to make sure you answer correctly.

Risk factors

- If you stop paying, your policy will end 60 days after your last payment and the cover will end.
- If the information you or your professional adviser provided about you (for example, your age, height, weight, smoking status, medical history, hobbies and pastimes) is incorrect then the policy may not pay out or may pay a reduced amount.
- You can read the full terms and conditions in your **Policy Details** (reference CA-CL-LCPD-0125(1)) which, together with the information provided about you on line, form the legally binding contract between you and us. This is based on our understanding of relevant legislation as at June 2022 and could be subject to change in the future.
- If you are in any doubt you should seek professional advice.

What is the policy and when does it pay out?

- It is an insurance policy that makes a payment if you:
 - die or become totally and permanently disabled during the term of the policy, as stated in your policy schedule which accompanies your policy provisions, or
 - are diagnosed with a terminal illness while the policy is in place and are not expected to live for more than 12 months.
 - are diagnosed with, or undergo the specific surgery described for, one of the specified core critical illness conditions (see page 7) or one of the specified additional critical illness conditions (see page 8). You must survive for at least 14 days from when you are first diagnosed in order to make a claim.
- If you make an additional critical illness claim, the policy will pay 25% of the cover amount, up to a maximum of £25,000.
- For the Life Insurance plus Critical Illness Decreasing Term policy, the cash sum reduces each month over the life of the policy.
- Provided the rate of interest on your loan does not exceed 8%, the value of your Life Insurance plus Critical Illness Decreasing Term policy, should be sufficient to repay the loan. This assumes you take out enough insurance and your mortgage repayments are up to date.

- You can take out the policy on your own life or jointly with someone else, usually a partner, spouse or registered civil partner.
- The policy ends once the full payment has been made as a result of your death, a terminal illness, an adult core critical illness condition or, if included, total and permanent disability.
- We will make the payment to the person entitled to receive it.
- If we make a payment for an additional illness claim or children's specific critical illness the policy will continue in case you need to make another claim.
- The policy also provides serious accident benefit for adults.
 - We will pay £7,500 if you are in a hospital or another recognised medical establishment, with physical injuries for a minimum of 28 consecutive days immediately following an accident. Your physical injuries must have resulted solely and directly from unforeseen, external and visible means and must be independent from any other cause. The maximum number of serious accident benefit payments is 2.
- You can cancel the policy within 30 days of receiving the document 'Cancellation Form' from us (see page 12).
- The policy has no saving or investment element and can not be changed for cash at any time.

What benefits are provided for children under our policy?

- Children's critical illness cover is provided for all eligible children (see page 9 for the definition of an eligible child).
 - We will pay 50% of the cover amount, up to a maximum of £25,000, if one of your children is diagnosed with, or undergoes the specific surgery described for:
 - one of the core critical illness conditions listed on page 6; or
 - one of the children's specific critical illness conditions listed on page 8; or
 - we will pay 25% of the cover amount, up to a maximum of £25,000, if one of your children is diagnosed with, or undergoes the specific surgery described for, one of the additional critical illness conditions listed on page 7.
 - We will pay 50% of the cover amount, up to a maximum of £25,000, if a claim cannot be made under any other core or child specific critical illness and your child is diagnosed with a terminal illness and is not expected to live for more than 12 months.
 - We will pay the children's funeral cover of £10,000 if one of your children dies.

Questions and answers

What cover is provided as standard?

Summary of benefits	Number of conditions the policy covers	Reason for making a claim	Payment details (amount and/or percentage)	Maximum number of payments		What happens to the policy after a payment is made?	What happens to the cover amount?
				Single life plans	Joint life plans		
Life cover		Adult death	Cover amount	1	1	policy ends	Paid in full
Adult terminal illness claim		Adult terminal illness not expected to live for more than 12 months	Cover amount	1	1	policy ends	Paid in full
Critical Illness (CI) core conditions cover	52	Adult critical illness claim	Cover amount	1	1	policy ends	Paid in full
Serious accident benefit (does not apply to children and not included in the 52 CI core conditions)	1	Adult serious accident claim	£7,500	2	2	policy continues	100% intact
Additional critical illness benefit (not included in the 52 CI conditions*)	44	Adult critical illness claim	The lower of £25,000 or 25% of the cover amount	4 [†]	6 [†]	policy continues	100% intact
Critical Illness core conditions, 6 children's specific CI conditions	57	Child critical illness claim	The lower of £25,000 or 50% of the cover amount	4 [†]	6 [†]	policy continues	100% intact
Children's terminal illness claim		Child terminal illness not expected to live for more than 12 months	The lower of £25,000 or 50% of the cover amount	4 [†]	6 [†]	policy continues	100% intact
Additional critical illness benefit (not included in the 57 CI conditions*)	44	Child critical illness claim	The lower of £25,000 or 25% of the cover amount	4 [†]	6 [†]	policy continues	100% intact
Children's funeral cover		Child death claim	£10,000	2	2	policy continues	100% intact

[†] This is the overall maximum number of payments which applies to both the additional critical illness benefit and children's critical illness cover.

* Any additional critical illness benefit payments won't affect your chosen cover or the premium paid and makes sure that the overall amount of cover remains intact.

What optional cover is available?

Summary of benefits	Reason for making a claim	Payment details (amount and/or percentage)	Maximum number of payments		What happens to the policy after a payment is made?	What happens to the cover amount?
			Single life plans	Joint life plans		
Total and permanent disability cover	Adult total and permanent disability claim	Cover amount	1	1	policy ends	Paid in full
Waiver of Premium	Waiver of Premium claim	Premiums are paid for duration of incapacity	N/A	N/A	policy continues	100% intact

Which critical illness conditions am I and my children covered for?

Countrywide Assured complies with the ABI Guide to Minimum Standards for Critical Illness Cover. The Statement aims to protect consumers and help them understand and compare critical illness policies.

Please see the Critical Illness Definitions Guide, for full details of the conditions covered.

The policy provides cover for:

52

Core critical illness conditions for you (51 for your children¹)

44

Additional critical illness conditions for both you and your children

6

Children's specific critical illness conditions

Accelerated surgery benefit

We will pay the benefit early when you, or your child, meets the critical illness definition and is placed on an official UK waiting list for a specific surgery:

- Aorta graft surgery
- Coronary artery by-pass graft
- Heart valve replacement or repair
- Major organ transplant
- Peripheral vascular disease
- Pulmonary artery surgery
- Removal of a complete lung
- Severe Crohn's disease
- Structural heart surgery
- Syringomyelia or syringobulbia
- Ulcerative colitis

Core critical illness conditions

Aorta graft surgery

Aplastic anaemia

with permanent bone marrow failure

Bacterial meningitis

resulting in permanent symptoms

Benign brain tumour

resulting in permanent symptoms or with specified treatment

Benign spinal cord tumour

resulting in permanent symptoms or with specified treatment

Blindness

permanent and irreversible

Brain abscess

with specified treatment

Brain injury due to anoxia or hypoxia

resulting in permanent symptoms

Cancer

excluding less advanced cases

Cardiac arrest

with insertion of a defibrillator

Cardiomyopathy

of specified severity

Cauda equina syndrome

with permanent symptoms

Chronic lung disease

advanced stage respiratory failure

Coma

resulting in permanent symptoms

Coronary artery by-pass graft

Creutzfeldt-Jakob disease

resulting in permanent symptoms

Deafness

permanent and irreversible

Dementia

resulting in permanent symptoms

Heart attack

Heart failure

Heart valve replacement or repair

HIV Infection

caught from a blood transfusion, physical assault or accident at work

Intensive care

requiring mechanical ventilation for 10 consecutive days

Kidney failure

requiring permanent dialysis

Liver failure

of specified severity

Loss of hand or foot

permanent physical severance

Loss of independence

Loss of speech

total permanent and irreversible

Major organ transplant

from another person

Motor neurone disease

resulting in permanent symptoms

Multiple sclerosis

with clinical symptoms

Myasthenia gravis

with specified symptoms

Neuromyelitis optica (Devic's disease)

with clinical symptoms

Paralysis of a limb

total and irreversible

Parkinson's disease

resulting in permanent symptoms

Parkinson plus syndromes

resulting in permanent symptoms

Peripheral vascular disease

requiring bypass surgery

Primary pulmonary arterial hypertension

of specified severity

Pulmonary artery surgery

Removal of a complete lung

Removal of an eyeball

due to injury or disease

Rheumatoid arthritis

of specified severity

Severe Crohn's disease

treated with two surgical intestinal resections or removal of entire large bowel

Spinal cord stroke

resulting in persisting symptoms

Stroke

resulting in permanent symptoms

Structural heart surgery

Syringomyelia or syringobulbia

with surgery

Systemic lupus erythematosus

with serious complications

Third degree burns

covering at least 20% of the surface area of the body or 20% of the face or head

Traumatic brain injury

resulting in permanent symptoms

Ulcerative colitis

treated with total colectomy (removal of the entire bowel).

Additional critical illness conditions

Aortic aneurysm
with endovascular repair

Aplastic anaemia
of specified severity

Carotid artery stenosis
with surgical repair

Central retinal artery or vein occlusion

Cerebral or spinal aneurysm
with specified treatment

Cerebral or spinal arteriovenous malformation
with specified treatment

Chronic hepatitis B or C

Coronary angioplasty
with specified treatment

Crohn's disease
treated with intestinal resection

Diabetes mellitus Type 1

Drug resistant epilepsy
treated with invasive surgery to brain tissue

Guillain-Barré syndrome
with persisting clinical symptoms

Infective bacterial endocarditis

Less advanced cancers

anus
treated with surgery

appendix, colon or rectum
treated with surgery

bile ducts
treated with surgery

breast
treated with surgery

cervix
treated with surgery

gall bladder
treated with surgery

larynx
with specified treatment

lung and bronchus
with specified surgery

oesophagus
with surgery to remove the tumour

oral cavity or oropharynx
treated with surgery

ovary
with surgery to remove an ovary

pancreas
treated with surgery

renal pelvis and ureter
of specified severity

prostate
requiring treatment

small intestine
treated with surgery

stomach
treated with surgery

testicle
with specified surgery

thyroid
treated with surgery

urinary bladder
of specified severity

uterus
treated with specified surgery

vagina
treated with surgery

vulva
treated with surgery

Non-invasive gastro intestinal stromal tumour

Non-malignant pituitary gland tumour
of specified treatment

Pericarditis
chronic constrictive pericarditis or requiring surgery

Permanent pacemaker insertion
for heartbeat abnormalities

Removal of one or more lobes of the lung

Severe sepsis

Significant visual loss
permanent and irreversible

Third degree burns
covering 10% of the surface area of the body or 10% of the face or head

Urinary bladder removal

Children's specific critical illness conditions

A child becomes eligible for the children's specific critical illness cover 12 months after the start of the policy.

Cerebral palsy

Children's intensive care benefit

Cystic fibrosis

Hydrocephalus

Muscular dystrophy

Spina bifida myelomeningocele or myeloschisis

Plus... Definition

An eligible child is a...

- natural child
- legally adopted child (who will be covered from the date of their adoption); or
- step child by marriage or registered civil partnership (who will be covered from the date of marriage or civil partnership).

and who is:

- younger than 18 years; or
- younger than 22 years and attending school, college or university full time during the period of cover (this includes work placements but excludes breaks from education, such as a gap year).

All children's core, terminal illness and additional critical illness claims must be in respect of an eligible child who is:

- at least 30 days old when symptoms began or the condition becomes evident or death occurs (children's funeral cover).

What other benefits or options are available?

Accidental Death Benefit while we assess your application

The unexpected can happen at any time so we provide free accidental death benefit for up to 90 days while we are assessing your application, up to the time we offer terms under which we will cover you. The amount of cover is the total life cover on all your applications up to a maximum of £300,000.

The cover starts once all the application details have been submitted and ends when the first of these events happens:

- 90 days from receipt of the application details; or
- We accept, decline or postpone cover; or
- You indicate that you do not want to proceed with the application.

The benefit is paid on the death of an applicant as a result of bodily injury caused by accidental, violent and visible means. Death must occur within the 90 days period.

We will not pay any claims where the accidental death is caused by suicide, self-inflicted injury, hazardous pursuits, alcohol or drug abuse, war or civil commotion, flying (other than as a passenger in a commercially licensed aircraft) or accidents that happened before you applied.

The death benefit will only be paid once either under the Accidental Death Benefit or the policy itself.

Waiver of premium benefit

You can add waiver of premium benefit at the start of your policy for an extra cost:

- We will pay your premiums if, before your 70th birthday or the end date if earlier, you are unable to work as a result of illness or incapacity (subject to a minimum deferred period of 13 weeks).
- When you make a claim under the waiver of premium benefit then we will assess the claim against the occupation you had when you took out the policy.
- When you no longer meet the eligibility criteria your claim will end and you will be responsible for paying premiums again.
- The waiver of premium benefit can be removed from the policy at anytime. However, once the benefit has been removed it cannot be re-added.

Total and Permanent Disability

You can add total and permanent disability benefit at the start of your policy for an extra cost:

- We will make a payment if you become totally and permanently disabled and the disability is expected to last throughout your lifetime with no prospect of improvement.

Inflation-linked option

You can choose to add the inflation-linked option to Level Term plans at the start of your policy to help protect the cover amount against the effects of inflation. Each year we will give you the option to increase your cover amount by the change in the Retail Prices Index (RPI). We will limit the increase in RPI to a maximum increase of 10% and it will never go down if RPI turns negative.

Your premiums will increase at a higher percentage than the cover as the cost of providing cover gets more expensive with age.

If you decide not to increase the cover amount we won't offer to increase it again.

This option is not available to Decreasing Term policies.

Increase options

Circumstances change over time and you may want to increase your cover. Our policy may allow you to increase it at specified events without needing to provide further information about your state of health.

Increase options are included in your policy unless our quotation (also called Personalised illustration or Acceptance Terms) states they are not included. These are only available if you are aged 54 or under when you make the increase.

At any single specified event the most you can increase by is 50% of the initial cover amount or £150,000, whichever is lower. You can increase your cover amount again at subsequent specified events up to a total maximum increase in the cover amount of £200,000.

The specified events we allow are:

- Getting married or entering into a civil partnership; or
- Birth or adoption of a child; or
- Increasing your mortgage due to moving into a new property or making home improvements; or
- An increase in your salary of 10% or more as a result of promotion, gaining a recognised professional qualification or change of employer or job.

If the increase option does not meet your needs or is not available, you may still be able to change your policy, however you will have to provide up to date information about your state of health and lifestyle.

Is there a maximum amount of Life Insurance plus Critical Illness cover I can have?

Yes, the table below shows the maximum amount of cover you can apply for based on your age at the time of your application:

Your current age(s) when you applied for the policy	Maximum cover amount
18 – 40	£750,000
41 – 45	£450,000
46 – 50	£350,000
51 – 60	£200,000
61 – 65	£100,000
66 and over	£0

- These limits:
 - apply across all of your Life Insurance plus Critical Illness Level Term and Decreasing Term policies but do not apply to any other Countrywide Assured policy.
 - apply to each adult individually. For example, for 2 adults, both aged 50, taking out a joint life policy, the maximum cover amount would be £350,000. If the same adults took out 2 single life policies then the maximum amount of cover under each policy would also be £350,000.
 - do not include increases in sum assured after the policy has commenced as a result of use of the inflation-linked option or the use of an increase option.
- If at the point of making a claim it becomes evident that the total of cover, for all of your Life Insurance plus Critical Illness policies, is more than the limits shown, then we will pay the relevant limit (shown above). We will refund any overpaid premiums.

How much will my payments be?

- Your **Acceptance Terms** shows the amount you will need to pay for your chosen benefits. This cost will not increase.
- Your cost is based on a number of factors. These include:
 - the amount of insurance
 - your age(s)
 - your occupation(s)
 - whether you take part in a hazardous pastime
 - your health and medical history
 - whether you smoke, have previously smoked or used vaping or nicotine replacement products in the last 12 months
 - the length of time your policy lasts
 - our charges
 - whether you have selected the waiver of premium benefit
 - whether you have selected the total and permanent disability benefit
 - whether you have selected the decreasing cover basis or not.

What are the charges?

- Your payments include the cost of providing the insurance.

What if I stop paying?

- Your policy will lapse 60 days after the last payment was paid. You cannot exchange the policy for cash because it is designed to provide protection insurance cover and is not a savings plan. If you decide to stop paying, the cover provided will end and the policy will stop without value.
- It is only possible to restart the policy within 30 days of it lapsing. You will have to make any outstanding payments.

Can I change from yearly to monthly payments?

- You can change from yearly to monthly, or monthly to yearly, at the policy anniversary. You may also select which day of the month you want us to collect the payment. All payments must be made by Direct Debit instruction.

Can cover continue after a claim?

- The policy will always end after the payment of the full sum assured.
- However, if a person makes a claim under a joint-life policy, the person who did not claim can ask us for a replacement policy just for him or her.
- The new policy will be a single life policy on the same terms as the existing policy and the person will not need to provide any more health or lifestyle information.

What about tax?

- The claim payment is normally free from all UK Capital Gains and Income Tax.
- Death benefits may be subject to inheritance tax unless you put the policy in trust. Your professional adviser can give you more details of how this works.
- The information regarding taxation is based on our understanding of current legislation as at June 2022 which may be altered and depends on your financial and other circumstances.

Can I change my mind?

- You have the right to change your mind and cancel the policy within 30 days of receiving the Cancellation Form from us.
- If you change your mind within the 30 days and do not want the policy, we will give you your money back.
- If you cancel the Policy at any time after the 30 day period you will not receive any money.

Can I change a joint-life policy if my circumstances later change?

- You may be able to split a joint life policy into two single life policies if you divorce or your civil partnership is dissolved. This is only available if the policy has been taken out to protect a mortgage and a new mortgage is being taken out or the existing one rearranged in the name of only one of the lives being covered. The cover amount and the length of time the policy lasts under each single life policy cannot be greater than under the original joint-life policy.


Can I change the sum assured and policy term after the policy has been started?

- If you need to change the cover amount or the length of time the policy is in force you can ask us to amend it.
- Where you increase the amount of cover, or increase the length of time the policy is in force, we will ask you to provide us with up to date health and lifestyle information so we can assess whether we can provide cover and on what terms.

How do I make a claim?

- To make a claim, please contact our Customer Services Department on **0333 0155600** or email **queries@countrywideassuredplc.co.uk**
- When a claim is made, we may make further enquiries about the cause of death, the terminal illness, the total and permanent disability or the specific critical illness being claimed for. Failure to provide the correct information could mean a delay in the payment of a valid claim.

Where can I find out more?

We have more information and all our downloadable documents on our dedicated  website **countrywideassured.co.uk**

Data Protection Notice

You may interact with Countrywide Assured plc (referred to as 'Countrywide Assured', 'we', 'us' or 'our' in this DPN) in any one (or more) of the following capacities: as data controller, a policyholder, joint policyholder, employer policyholder, trustee, insured person, professional adviser, beneficiary, next of kin, personal representative, executor claimant, or member. No matter which capacity you interact with Countrywide Assured, you will be referred to as 'you' or 'your' in this DPN. Any personal data about yourself (provided by you or about you by another party) or which you provide about someone else will be treated in accordance with the applicable laws and regulations in any relevant jurisdiction relating to privacy or the use or processing of personal data; Countrywide Assured takes its privacy obligations very seriously.

Using personal data

We use personal data to undertake activities relating to the setting up, administration and renewal of our policies, products and services. This includes processing applications and handling any claims. For the majority of our business we will rely on the performance of our contractual arrangements with you as the legal basis for processing.

We do not use personal data for marketing purposes and we do not make your personal data available to third parties for the purpose of direct marketing.

The nature of our business is to provide investments, life and pensions cover, critical illness, income protection and employer related group products. To do this we need to use the personal data provided to carry out analysis of actuarial risks (risks of gains or losses), mortality and morbidity risks and pricing. This will be carried out in accordance with the Institute & Faculty of Actuaries' data handling protocols.

We use underwriting software to process some applications and quotations which will use an element of automated decision making.

Exceptionally, we may rely on our legitimate interests to process your personal data. When we do, we will demonstrate compelling legitimate grounds for doing so.

We rely on legitimate interest to process your personal data for statistical analysis, which helps us to improve our processes, products and services. The purpose of this statistical analysis is not to make decisions about you directly, but to undertake data analysis to help us to improve our processes, our products and services. Additionally, we will process your personal data to undertake market research, including customer feedback surveys. To maximise the security of your information, we pseudonymise your personal information where possible. This means removing information from which you can be directly identified.

For employer-related group insurance products the DPA permits appropriate information about employees to be provided by an employer to an insurer without individual consent (including details of long-term absentees, current and previous claimants, and medical underwriting decisions).

For employer-related group products the DPA permits that members may individually withdraw their consent. In those instances Countrywide Assured will be unable to provide cover for that individual.

When medically underwriting or assessing a claim we will obtain consent from the employee.

Sharing personal information

We share personal data only on the basis of the purposes for which it was collected. This notice is intended to illustrate the instances where data may be shared. However, we will share your data only for the limited and compatible purposes for which it was originally obtained:

- with other Countrywide Assured group companies including those outside the European Economic Area (EEA).
- with any of our service providers, reinsurers and / or regulators.
- with other insurers and government agencies, including without limitation Her Majesty's Revenue and Customs (HMRC), Department of Work and Pensions (DWP).
- in order to prevent, detect or investigate financial crime including fraud or other criminal activity, we may share your data with other companies (including private investigators), organisations (including fraud prevention agencies and databases), public bodies (including the police) and associations and credit reference agencies.
- we will not share your medical information with anyone other than yourself without your consent except as described in the next bullet point. This includes your employer, spouse, other relatives, friends or your legal or professional adviser. In some circumstances, it may be appropriate to advise your employer about your medical information, for example, to recommend alternative supportive therapy. However, we will seek your consent in such circumstances.
- for employer-related products and services only, some medical information related to underwriting decisions and non-medical information about you

necessary for lawful policy and claim administration purposes will be shared with your employer.

- we will not share non-medical information concerning you with your spouse, other relatives, friends or your legal or professional adviser unless you provide your consent to us in writing.
- for insurance related products, with your own doctor or relevant medical professionals.
- with selected third-party suppliers for the purposes of statistical analysis to help us improve our products, services and processes.
- with selected third-party research agencies and providers of market research services, including customer feedback surveys; and/or
- in any circumstances if permitted or required to do so by law or if we have your consent to do so.

International Transfers

Given the global nature of our business, we use third party suppliers and outsourced services (including cloud-based services), which can require transfers of personal data outside of the EEA and countries that have an EU adequacy decision. In doing so, we ensure there are contractual arrangements in place with those organisations who have organisational and technical measures to protect your personal data.

Retention of your personal data

We will keep your personal data only for so long as is necessary and for the purpose for which it was originally collected. In particular, for so long as there is any possibility that either you or we may wish to bring a legal claim under this insurance, or where we are required to keep your personal data due to legal or regulatory reasons.

Post Brexit – UK departure from the European Union

On 31 January 2020 the UK left the European Union ('EU'), ceasing to be a member. EU law requires that all entities processing the data of EU citizens that are not established in the EU designate in writing a Representative in the EU to be addressed in addition to or instead of that entity by EU citizens on all issues related to data processing. In order to meet our requirements, each Countrywide Assured entity listed above which processes the personal data of EU citizens has designated Countrywide Assured Irish Holding Company Limited, an Irish registered entity within the Countrywide Assured group, as its Representative. The Representative may also be called upon to cooperate with competent supervisory authorities with regard to ensuring compliance with the General Data Protection Regulation ('GDPR').

Contractual clauses in place between Countrywide Assured and its group entities and external suppliers are compliant with the GDPR, which ensures that personal data provided to Countrywide Assured is processed in accordance with our instructions and the requirements of the GDPR. Countrywide Assured will continue to follow and apply all appropriate data protection legislation including that provided by the UK Government and the Information Commissioner's Office (ICO) with regards to data protection.

Your rights and contact details of the Information Commissioner's Office (ICO)

You may have the right to require us to:

- provide you with further details on the use we make of your personal data or your special categories of data.
- provide you with a copy of the personal data that you have provided to us or which we hold.

- update any inaccuracies in the personal data we hold.
- delete any special category of data or personal data for which we no longer have lawful grounds to use.
- cease processing of your personal data that is based on consent, by withdrawing your consent to that particular processing.
- cease any processing based on legitimate interests grounds, unless our reasons for undertaking that processing outweigh any prejudice to your data protection rights; and
- restrict how we use your personal data whilst a complaint is being investigated.

In certain circumstances, we may need to restrict the rights listed above in order to safeguard the public interest (e.g. the prevention or detection of crime), our interests (e.g. the maintenance of our legal responsibilities) and for the performance of our contract with an employer who is the policyholder for employer-related products and services.

How we use your personal information

For information on how we use your data, please see our Privacy Policy at countrywideassured.co.uk/privacy-policy

If you have any questions or are unhappy about how your personal information is used please contact us:

Countrywide Assured plc, 2nd Floor, Building 4, West Strand Business Park, West Strand Road, Preston, Lancashire, PR1 8UY.

In the unlikely event that you are dissatisfied with our response, you have the right to take the matter up with the Information Commissioner's Office (ICO), whose address is:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow Cheshire, SK9 5AF.

Independent financial advice

Getting up to date and independent advice could save you money in the long run. It's important to view an adviser's upfront fee alongside the potential long-term savings in areas such as tax and charges.

Finding a local independent adviser is easy. Visit **unbiased.co.uk**

Any questions?

Call: **0333 0155600**

Email: **queries@countrywideassuredplc.co.uk**

Visit: **countrywideassured.co.uk**

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