

ADVISERS PLEASE RETAIN A SIGNED COPY OF THIS DOCUMENT AND ONLY SEND IT TO US IF WE REQUEST IT

Important Notes

The Plan will not start until we have assessed and accepted your application, and the first premium becomes payable.

In most instances your premiums will be as originally quoted. We may offer you revised terms but occasionally we may not be able to offer any terms.

Please do not assume we will write to your doctor for your medical details. It remains your responsibility to complete your application form fully. If you are in any doubt about your medical history please consult your doctor before completing your application.

We may ask you to contact your doctor if we are waiting for reports that we have asked for.

If we ask you to attend a medical examination, we will need to share the application form with another company we have authorised. They will make the arrangements for the examination to take place.

We may need to send your application and medical records to our reinsurer or underwriting company for their opinion or agreement of the terms offered, or, we may need to send them at a later stage for purposes relating to managing the policy. You can get details of general reassurance principles and details of any company we use to assess your application, from our head office.

We have a confidentiality policy in place, which means we hold your medical information securely and access is limited to authorised individuals who need to see it.

You are entitled to ask for a copy of our standard terms and conditions and a copy of your application form at any time.

Your Statutory Rights under the Access to Medical Reports Act 1988

We *may* need to get medical reports to support your application. Before we can ask any doctor that you have consulted to fill in a report, we need your written permission under the Access to Medical Reports Act 1988. You can give your consent by signing the declaration at the end of this document.

Your rights under the Act:

You do not need to give your permission, but if you do not, we may not be able to go ahead with your application. This does not prevent you from applying to other companies for insurance.

If you do not wish to see the report from your doctor we will not notify you before applying for one.

You can ask to see the report before the doctor returns it to us. If this is the case, we will tell the doctor to keep the report for 21 days so that you can arrange to see it. If you have not made arrangements to see the report within this time, your doctor will send the report to us.

If you choose not to see the report at this stage, you may ask the doctor for a copy within six months of it being sent to us. We can send a copy of the report to your doctor if you ask to see it at a later date.

You can withdraw your consent or if you think that any part of the report is not correct or is misleading you may ask the doctor to amend it. If your doctor refuses to make the amendments, you may ask him or her to attach a statement outlining your views, which will accompany the report.

Your doctor can withhold access to the report if he or she feels that it would cause physical or mental harm to you or others. Your doctor must tell you and you will be limited to seeing any remaining part of the report.

The medical report your doctor completes asks about the following:

- Your current health.
- Any care, medication or treatment you are currently receiving.
- The results of referrals or tests you are waiting for.
- Any time off work in the last three years.
- Your past health.
- Details of any relevant illness, trauma, or referrals for specialist advice or treatment, hospital admissions, consultations with your GP or any other medical adviser, therapist or counsellor. In particular whether you have a history of:
 - Malignancy (cancer), cardiovascular (heart) disease, diabetes and degenerative (gradually worsening) diseases
 - Musculoskeletal disease or injury, for example, arthritis, rheumatism, back problems or any other disorder of the joints or muscles
 - Anxiety, depression, neurosis (such as phobias, obsessions and so on), psychosis (a mental disorder where you lose contact with reality), stress or fatigue
 - Suicidal thoughts or attempts at suicide
 - Conditions related to drug or alcohol misuse or chewing tobacco.
- Details of any biopsies, blood tests, electrocardiograms (heart tests), height, weight if measured in the last two years, urinalyses (tests on urine), x-rays or other investigations.
- Any blood pressure readings in the last three years.
- Any history of disease among your parents or brothers or sisters that you have told your doctor about.

We have asked your doctor not to reveal information about:

- Negative tests for HIV, hepatitis B or C.
- Any sexually-transmitted diseases unless there could be long-term effects on your health.
- Predictive genetic test results unless there is a favourable test result that shows that you have not inherited a condition your family suffers from.

The information you and your doctor provide about your health may result in us:

- Refusing to provide insurance
- Increasing premiums above standard rates
- Setting premiums at standard rates.

If you have any questions about your rights under the act or questions relating to the process of getting, assessing or storing medical information, please write to:

Chief Medical Officer
progress from Royal Liver
Jessop House
Jessop Avenue
Cheltenham
GL50 3SH

Plan No / App No: _____

Client Name: _____

Date of Birth: _____

Please tick this box if you wish to see the medical report before it is sent to progress from Royal Liver:

Declaration

- I agree to you asking any doctor I have consulted about my physical or mental health to provide medical information so you may assess my proposal. You may gather relevant information from other insurers about any other applications for life, critical illness, sickness, disability, accident or private medical insurance that I have applied for. I authorise those asked to provide medical information when they see a copy of this consent form. This form allows you to gather medical reports after the start of the Plan, or after my death, to support any claim made on the Plan proceeds.
- This information can also be used to maintain management information for business analysis.

By signing this declaration I am allowing you to process my application using the information that I have given. You may also use this information to process any claim made on this Plan.

I have read the Declaration, Important Notes and information relating to my rights under the Access to Medical Reports Act 1988.

Print Name _____

Signed _____ Dated _____

Doctor's
Name and
Address

Please post this signed Declaration page to:

**IFA Operations
progress from Royal Liver
Jessop House
Jessop Avenue
Cheltenham
GL50 3SH**