



# GLOBAL PROTECTION PLAN INFORMATION BOOKLET 2014



The cover provided by your **Global Protection** Plan  
and important information when applying



## **AN INTRODUCTION TO OUR GLOBAL PROTECTION PLAN**

We want to provide you with an insurance plan you can rely on, so it is important that you fully understand the scope of the cover we provide. In this booklet we explain who can apply for our Global Protection plans and the maximum benefit limits you can apply for. There is also important information about the application process, the administration of the policy and your duty to disclose pre-existing conditions.

Please take time to read through this booklet.

### **THE GLOBAL PROTECTION PLAN**

The Global Protection Plan provides Life, Accident and Income cover. You may apply for Life cover, optional Accident benefit and Income cover with a choice of a 3 or 6 month deferment period. The optional Accident benefit is only available when also applying for Life benefit.

Please note the Life benefit is not an investment policy and does not hold a surrender value.

### **WILLIAM RUSSELL LIMITED**

William Russell is the administrator of the Global Protection plan. William Russell Limited is authorised and regulated by the UK Financial Services Authority. Reference number: 309314.

### **KEY FACTS AND PLAN AGREEMENT**

Please take time to read through our Key Facts document and our Plan Agreement, to ensure that the cover we offer meets your requirements. The Key Facts and Plan Agreement can be viewed through the links below

[Global Protection Plan Key Facts](#)

[Global Protection Plan Agreement](#)

### **THE INSURERS**

The Global Life plan is underwritten by Allianz Nederland Leven NV, Buizerdlaan 12, Postbus 9, 3430 AA Nieuwegein, The Netherlands. The Accident benefit and the Global Income plan is underwritten by Allianz Nederland Schadeverzekering NV, Coolsingel 139, Postbus 64, NL-3000 AB Rotterdam, Netherlands.

### **30-DAY MONEY BACK GUARANTEE**

When you receive your Global Protection Plan documents if you are not entirely satisfied with the terms of your cover and the extent of the benefits provided, we will refund the premium you have paid to us and cancel your cover from inception, provided that you confirm to us in writing your wish to cancel within the first 30 days of your cover, and subject to your having made no claim.

### **CONTACT DETAILS**

#### **William Russell Limited**

William Russell House,  
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Lightwater,  
Surrey GU18 5SS, UK

#### **General Administration**

Tel: +44 1276 486455  
Fax: +44 1276 486466  
[enquiries@william-russell.com](mailto:enquiries@william-russell.com)

#### **Policy Administration**

Tel: +44 1276 486455  
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[global.protection@william-russell.com](mailto:global.protection@william-russell.com)

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## ELIGIBILITY FOR COVER

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We can only consider an application for a Global Protection Plan from you if, at the time you apply for the plan:

- you are an expatriate, i.e., you do not live in your country of origin, or any country in which you hold a passport,
- you do not live in a country that is on our excluded country list - please refer to our website for the latest listing,
- you are in full-time or part-time employment, or self-employed,
- you are engaged in full-time household duties or retired (subject to the life insurance benefit restrictions below),
- you are at least eighteen (18) years of age, on the date that your plan commences,
- you are not more than sixty-four (64) years of age if you are applying for a Global Life plan and not more than fifty five (55) years of age if you are applying for a Global Income Protection plan, and
- your occupation is 100% office based, or you provide us with a full job description (see below):

## YOUR OCCUPATION

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If your occupation is not 100% office based we will need you to provide us with a full job description. Depending upon the risk your occupation poses, we reserve the right to decline to offer cover, or to accept your application subject to an increased premium, and/ or special terms.

If you require a licence to practice your occupation we will not be able to provide cover in respect of any loss of income arising from loss of your licence to practice your occupation.

## CHANGES IN YOUR OCCUPATION

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If your occupation changes at any time in the future you must tell us about this in advance. If your application is accepted and cover is commenced and your occupation subsequently changes to one that is not 100% office based all cover under the plan will automatically cease immediately upon commencement of your new occupation, unless we have agreed (in writing or by email) to continue cover. We will need to see your new full job description, before considering whether we can agree to continue your cover, if your new occupation is not 100% office based. We reserve the right to decline to continue cover, or to only offer to continue cover subject to an increased premium, and/ or special terms.

If we decline to continue your cover, or if we only agree to do so subject to an increased premium or special terms and you do not wish to accept the increased premium or special terms, your plan will be cancelled with effect from the date of commencement of your new occupation and a pro rata refund of premium will be paid to you.

## MAXIMUM BENEFIT LIMITS FOR THE GLOBAL LIFE PLAN

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You may apply for life benefit of up to twenty (20) times your gross annual earnings at the time you make your application, subject to a maximum benefit of US\$1,500,000 or £900,000 or €1,200,000. NB. If you have any other life insurance cover, the total of your other life insurance cover and your Global Life plan cover must not exceed twenty (20) times your gross annual earnings at the time you make your application.

In the event of a claim, we may require proof that your gross annual earnings were equal to or more than one twentieth of your Global Life plan cover and your other life insurance cover combined at the time you make your application.

If you are a houseperson, student, retired person or voluntary worker the maximum benefit you can apply for is US\$160,000 or £100,000 or €160,000.

## MAXIMUM BENEFIT LIMITS FOR THE ACCIDENT BENEFIT

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When you apply for a Global Life plan you may also apply for Accident Benefit equal to or less than your Global Life plan cover, subject to a maximum Accident Benefit of US\$500,000 or £300,000 or €500,000.

If you are also applying for a Global Income plan, the maximum Accident Benefit you can apply for is equal to or less than your Global Life plan benefit, subject to a maximum Accident Benefit of US\$335,000 or £200,000 or €335,000.

## ACCIDENTS ARISING FROM PARTICIPATING IN HAZARDOUS ACTIVITIES

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The Accident benefit does not cover you for accidents arising from hazardous activities. If you intend to participate in any hazardous activities please let us know in advance, so that we can let you know whether or not we can cover the specific activity and at what cost.

Hazardous activities are those activities that increase the risk of an accident or death. They include (but are not limited to):-

Abseiling, Ballooning, Bobsleigh, Bungee Jumping, Flying (other than in a scheduled airliner as a passenger), Hang Gliding, High Diving, Hunting on horseback, Motor cycle riding, Mountaineering, Parachute Jumping, Paragliding, Parascending, Potholing, Racing of any kind other than on foot, Scuba Diving to a depth of more than 30 meters, Skiing off-piste, Luge, Snow-boarding off-piste, White water rafting.

## MAXIMUM TOTAL BENEFIT FOR THE GLOBAL LIFE AND ACCIDENT BENEFIT COMBINED

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The total combined benefit of your Global Life and Accident Benefit cannot exceed US\$1,500,000 or £900,000 or €1,200,000.

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## MAXIMUM BENEFIT LIMITS FOR THE GLOBAL INCOME PLAN

If you become disabled, the maximum annual benefit we will pay you is the LOWER of –

The benefit you have insured which will be shown on your Certificate of Insurance, or

75% of the gross annual earnings you are earning at the time of your disability, LESS any other income you are entitled to receive, or US\$144,000 or £90,000 or €144,000.

Other income includes any disability benefit you are entitled to receive from the state or another insurance company, any salary or payments from your employer or business, or any pension you receive.

You may therefore only apply for benefit up to 75% of your current gross annual earnings, reduced by the amount of any other income you know are entitled to receive if you become disabled, so that the total of your income plan benefit and any other income, does not exceed 75% of your gross annual earnings. The amount of benefit you apply for must not exceed US\$144,000 or £90,000 or €144,000.

It is important that you review your Global Income plan benefit periodically to ensure that you are never over-insured. We do not refund premiums if the amount of benefit we pay you is less than the amount you have insured.

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## GROSS ANNUAL EARNINGS IF YOU ARE EMPLOYED

If you are an employee, your gross annual earnings are defined as being the basic annual salary including contractual bonuses before the deduction of income tax. Contractual bonuses mean bonuses that are paid to you are part of your employment contract.

It does not include any benefits in kind such as a car, living accommodation, or non contractual, discretionary bonuses, or over-time.

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## PERFORMANCE RELATED COMMISSION PAYMENTS

If you are an employee, but your earnings are based directly on your sales performance, we will take into account 50% of your commission earnings over the 12 month period leading up to your disability when we assess your gross annual earnings for a claim under the Income Protection plan.

If your commission earnings fluctuate, we will take an average of your commission earnings during the period of 36 months immediately preceding the onset of your disability.

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## GROSS ANNUAL EARNINGS IF YOU ARE SELF-EMPLOYED

If you are self-employed, your gross annual earnings are your gross personal income from your business during the 12 months immediately preceding the onset of your disability, and before the deduction of income tax.

If your earnings fluctuate, we will take an average of your gross annual earnings during the period of 36 months immediately preceding the onset of your disability, when we assess any claim under the Income Protection plan.

Income you receive from savings and investments can not be included in your gross annual earnings.

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## APPLYING FOR THE GLOBAL PROTECTION PLAN

You must complete and sign a Global Protection Plan application form giving full, complete and accurate information about your state of health. You must also give full details about your occupation and about any hazardous activities you participate in including sporting and recreational activities.

Your original, completed and signed application form must be submitted to us together with a certified original copy of your current passport which includes your photograph and your signature. In addition we will require one original or certified bill confirming your current mailing address. This can be a utility bill, a credit card statement or bank statement less than four months old.

By certified we mean certified by a banker, lawyer, serving police officer, embassy official, chartered accountant, notary public, or medical doctor. The certifier must use the following wording "I hereby certify that I have met the individual and this is a true likeness and copy of the original document". The certifier must sign over an official stamp. Their name must be printed in block capitals and they must state their occupation and their full address and contact telephone number and email address.

Upon receipt of your fully completed application form we will confirm what additional medical evidence we will require in order to consider your application.

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## MAKING A FULL DECLARATION ABOUT YOUR MEDICAL HISTORY

You must disclose on your application form all pre-existing medical conditions.

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## YOUR OBLIGATION TO DISCLOSE ALL FACTS RELATING TO YOUR MEDICAL HISTORY, YOUR OCCUPATION AND YOUR ACTIVITIES

Your completed, signed and dated application form is an integral and crucial part of your Global Protection plan agreement with us and the cover we provide. When you apply for cover you must ensure that your application form has been fairly, fully and accurately completed and that you have made a full disclosure of all the facts relating to your health, your occupation and your leisure activities.

We rely on the information you supply to us in your application form when we decide whether or not to accept your application and whether or not we need to apply special terms.

We may accept your application with or without special terms, or we may refuse to accept your application at our sole and complete discretion and without being required to give any reason for our decision.

If a claim is submitted for illness, injury or death which is caused by or related to a pre-existing condition or related medical condition which you omitted to tell us about on your application form, or you omitted to tell us everything about, we will refuse to pay that claim.

If your application form omits facts, or contains materially incorrect or incomplete facts, we have the right to declare your plan void. Alternatively we may impose special terms on your particular plan which will apply from your date of entry.

Please therefore take the greatest care to ensure that not only is your application form completed fully and accurately, but also that you have not withheld any facts which may have some effect on the terms upon which we accept your application for cover.

If after completing, signing and dating your application form any changes occur in the facts you have given us, such as a change in your state of health, you must tell us in writing about the change and we reserve the right to decline to accept your application or to accept your application with special terms.

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## **ADDITIONAL MEDICAL EVIDENCE**

We reserve the right to request medical evidence such as a full medical examination and additional medical tests and/or medical reports. We will advise you of our exact medical requirements upon receipt of your fully completed application form.

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## **PRE-EXISTING CONDITIONS AND RELATED CONDITIONS**

Your plan will not cover pre existing medical conditions or conditions related to pre existing medical conditions for which symptoms have appeared prior to the commencement of cover, irrespective of whether any medical treatment was sought. If you are suffering from any symptoms at the time of making your application you must declare these. We will not pay benefit if death, disability or accident is caused by or associated with a pre-existing condition or a related condition, unless that medical condition has been fully disclosed to us and we have agreed in writing to cover you for this pre-existing medical condition.

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## **OUR ACCEPTANCE TERMS**

When we have received sufficient information about your state of health, your occupation and your hazardous activities, together with a certified copy of your current passport, and an original or certified copy of a recent utility bill, we will assess your application and, if we decide to accept your application, we will issue our Acceptance Terms Invoice which will state the terms upon which we are prepared to accept your application, and the premium required to put your plan into force.

If we accept your application subject to a medical premium loading, and/or a medical exclusion, or we decline your application due to medical reasons, due to confidentiality laws, we can and will only disclose the reason for the loading, exclusion or decline to your personal physician. If you wish to know our reason, you must write to us, stating the name and address of your physician, and giving us your consent to write to him or her with our reason.

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## **IF YOU PASS A BIRTHDAY BEFORE WE RECEIVE YOUR PREMIUM**

If you pass a birthday or there is a premium rate increase between the date on which we issue our acceptance terms invoice and the date you pay your premium, you must pay the higher premium before we will commence your cover.

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## **COMMENCEMENT OF COVER**

Once we have issued our Acceptance Terms Invoice, not before, your cover can commence from the date on which we receive your premium provided that we receive your premium no later than 60 days after the date of our Acceptance Terms Invoice – and subject always to the disclosure clause stated below. We cannot commence your cover until we have received payment of your first premium and we will not backdate cover to before the date on which we receive your first premium.

If we do not receive your first premium within 60 days of the date of our Acceptance Terms, we will require a new application form and we reserve the right to request new medical evidence.

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## **YOUR DUTY TO DISCLOSE A CHANGE IN YOUR STATE OF HEALTH BETWEEN SIGNING YOUR APPLICATION FORM AND PAYING YOUR PREMIUM**

If your health changes in any way between the time you complete and sign your application form and the date on which we receive your premium and commence cover you must disclose this change to us and provide us with full information about your state of health. We reserve the right to alter our acceptance terms or withdraw them completely if there is a change in your state of health during this period.

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## **YOUR PLAN DOCUMENTS**

Once we have commenced your cover and received all your documents we will issue you with a Certificate of Insurance that must be read in conjunction with the plan agreement and any special terms as stated on our acceptance terms invoice and on your Certificate of Insurance. Upon receipt of your Certificate of Insurance you should read the document carefully.

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## **SPECIAL TERMS**

Special terms are exclusions or conditions that we may apply to your cover in addition to the terms, conditions and exclusions explained in this booklet. Any special terms that apply to your plan will be stated on our Acceptance Terms Invoice and on your Certificate of Insurance.

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### 30-DAY MONEY BACK GUARANTEE

If you are not satisfied with your Global Protection plan, you can cancel the plan from inception. Provided we receive this instruction within 30 days of its issue, we will cancel your plan from inception and make a refund of the premium you have paid to us. If you decide to cancel, we will not reimburse you with any costs associated with the medical examination and tests carried out at our request.

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### CURRENCY

Cover is available in US Dollar, Sterling or Euro.

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### PREMIUMS

Our premiums are age-related and will increase as you get older. Premiums may also be subject to a medical loading, a country of residence loading or a loading in respect of your occupation or hazardous activities.

Your premiums must be paid to us in the currency of your plan.

Our premiums are reviewed annually and are not guaranteed for the duration of your plan.

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### MINIMUM PREMIUM

There is a minimum annual premium amount of US\$320 or £200 or €320.

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### CLAIMING REIMBURSEMENT OF YOUR MEDICAL FEES

To obtain reimbursement of the cost of any medical examination and/ or tests we have specifically requested, please complete a Reimbursement of Medical Fees form and return this to us, together with the original, receipted bills for the examination and/ or tests you have had.

Medicals can be completed by a doctor of your choice providing they hold recognised qualifications and all information must be in English.

Provided we receive your fully completed form and the original receipted bills within two months of your plan going into force, we will reimburse you, up to a maximum amount of £325 or US\$ 520 or €520 depending upon the currency of your plan. Medical fees will be refunded in your plan currency and not in the currency in which the bills are submitted.

We will only pay a reasonable and customary charge which means that if the cost of your medical examination and/ or medical tests is more than we would reasonably have expected to pay in your location, we will only pay the amount which is customarily charged and you will have to pay the rest.

If you have paid us an annual premium, provided you have given us full and complete instructions as to where to send the reimbursement, reimbursement will be made by us direct to your bank account at the end of the month following the month your plan goes into force.

If you pay for your plan in semi-annual, quarterly or monthly instalments, reimbursement will be sent direct to your bank account after your plan has been in force for a full 6 months.

If after we have issued our acceptance terms invoice you do not proceed with a plan we will not reimburse your medical fees, even if the reason you do not proceed is because we have accepted your application subject to special terms and/ or a premium loading. However if we decline to cover you at all due to medical reasons, we will reimburse your medical fees in accordance with the above limits.

If you cancel your plan within the first 12 months of cover, we shall deduct any reimbursement we have made to you in respect of medical fees, from your premium refund.

We will not reimburse any bills received by us more than 2 months after your plan commences.

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### APPOINTING A BENEFICIARY IN THE EVENT OF YOUR DEATH

If you have a Global Life plan we strongly advise that you consider appointing a beneficiary using our Beneficiary Nomination form.

If you do not appoint a beneficiary, the beneficiary(ies) of your policy shall be :-

Your spouse \*, failing him/ her

Your legally declared child(ren) in equal shares, failing him/her/them

Your Estate

\*Please note that in the event of a claim a partner may not have the same rights as attributed to a spouse. If you wish the proceeds to be paid to your partner, you must name your partner as beneficiary using our Beneficiary Nomination form.

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### YOUR PERIOD OF COVER

Your Global Protection plan will cover you for a period of 12 months.

Once your Global Protection plan has commenced you may continue to renew your cover each year subject to the agreement in force at the time of each subsequent renewal date.

Our premiums are age-related and will increase as you get older. The premiums are subject to change and cannot be guaranteed.

## Contact details

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