



# NOTTINGHAMSHIRE POLICE FEDERATION INSURANCE SCHEME

## SCHEME BENEFITS effective from 1 September 2009

Serving Member	Entry Level Scheme	Full Scheme
Life Insurance	£50,000	£100,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured	20% of sum insured
Permanent Total Disablement (due to accident)	£50,000	£100,000
Loss of eye, limb or hearing (due to accident)	£5,000	£10,000
Temporary Total Disablement (excluding first 7 days up to 104 weeks)	£NIL	£14 p/week
Critical Illness	£5,000	£10,000
Child Critical Illness	£1,250	£2,500
Child Death Grant	£2,000	£2,000
Regulation 28 Sick Pay	£100 p/week for up to 26 weeks	£100 p/week for up to 26 weeks
Red Arc Assistance	Family cover	Family cover
Denplan	Key Cover	Key Cover
Home Emergency Assistance	Included	Included
Identity Theft Protection	Included	Included
Family Travel Policy	Worldwide	Worldwide
Legal Expenses	Included	Included
<b>CALENDAR MONTHLY SUBSCRIPTION</b>		<b>£21.25</b>
Weeks of service 1-52	<b>Nil</b>	
Weeks of service 52-104	<b>£10.15</b>	
NB - At week 105 of service. Entry Level Scheme members automatically transfer to the Full Scheme		
<b>Spouse/Cohabiting Partner of Serving Member</b>		
Life Insurance	£25,000	£50,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured	20% of sum insured
Critical Illness	£2,500	£2,500
Child Critical Illness	£625	£625
Denplan	Key Cover	Key Cover
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£3.85</b>	<b>£6.80</b>

The benefits arranged under this insurance scheme are provided strictly under the terms of insurance policies taken out and owned by the Trustees of the scheme. Copies of the policies are available to view at the Police Federation Office. Subscription to the scheme entitles the member to the benefits provided by the scheme but confers no ownership of any of the underlying policies, which are vested in the Trustees.

# RETIRED MEMBER BENEFITS with effect from 1 September 2009

## Retired Member Aged Under 60

Life Insurance	£50,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Permanent Total Disablement (due to accident)	£10,000
Loss of Eye, Limb or Hearing (due to accident)	£5,000
Red Arc Assistance	Family cover
Denplan	Key Cover
Home Emergency Assistance	Included
Identity Theft Protection	Included
Family Travel Policy	Worldwide
Legal Expenses	Included
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£19.45</b>

## Retired Member Aged 60 to 64 inclusive

Life Insurance	£25,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Permanent Total Disablement (due to accident)	£10,000
Loss of Eye, Limb or Hearing (due to accident)	£5,000
Red Arc Assistance	Family cover
Denplan	Key Cover
Home Emergency Assistance	Included
Identity Theft Protection	Included
Family Travel Policy	Worldwide
Legal Expenses	Included
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£19.45</b>

## Retired Member Aged 65 to 69 inclusive

Life Insurance	£4,000
Red Arc Assistance	Family cover
Denplan	Key Cover
Home Emergency Assistance	Included
Identity Theft Protection	Included
Family Travel Policy	Worldwide
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£19.25</b>

## Spouse/Cohabiting Partner Aged under 60 of Retired Member

Life Insurance	£25,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Denplan	Key Cover
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£5.50</b>

## Spouse/Cohabiting Partner Aged 60 to 64 (inclusive) of Retired Member

Life Insurance	£15,000
Terminal Prognosis Advance on Life Insurance	20% of sum insured
Denplan	Key Cover
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£5.50</b>

## Spouse/Cohabiting Partner Aged 65 to 69 (inclusive) of Retired Member

Life Insurance	£2,000
Denplan	Key Cover
<b>CALENDAR MONTHLY SUBSCRIPTION</b>	<b>£5.50</b>

# Explanation of Benefits

## Life Insurance

On death of a member or spouse/partner who are covered under the scheme the cash benefit detailed in the current benefits table becomes payable. The scheme is written in Trust so that if a member dies, the proceeds can be paid, by the Trustees, to the member's dependants quickly, free of tax and without having to wait for probate. Members should ensure that they have an up-to-date beneficiary nominated and have lodged the details with the Federation Office, to assist the Trustees in the event of a claim. If a beneficiary aged 63 or under receives a terminal prognosis of 12 months or less, they may apply to the Trustees for an advance of the life insurance of 20% of the relevant sum insured.

## Permanent Total Disablement

This benefit is provided should the member suffer total permanent and irreversible disability such that the benefit member is unable to perform any gainful employment and such that the member is unable to exist independently and requires continual supervision and frequent attention of a third party for activities of daily living. Such disabilities must be established for a continuous period of twelve calendar months before the benefit can be paid.

## Accidental Loss of Use Benefit

This benefit is payable should the Benefit Member suffer a permanent loss of sight of one or two eyes, the use of one or more limbs at or above the wrist or ankle or the permanent total loss of hearing. This benefit is payable only if the loss of use occurs as the result of an accident occurring during the currency of this policy.

## Temporary Total Disablement (including Post Traumatic Stress Disorder)

This Benefit is payable on the temporary total physical disability of a Benefit Participant provided that such disability occurs as the direct result of an Accident and results in absence from work within 90 days of the date of the accident. A Benefit Participant will be considered as temporarily totally disabled if the Benefit Participant is totally unable to perform the usual duties of his or her occupation. All claims must be notified within ninety days of initial absence. Benefit will also be paid under this section if a member suffers Post Traumatic Stress Disorder as a result of attending an incident on police duty. Such Post Traumatic Stress Disorder must be the clear result of a single incident that was documented in the police records and be of sufficient severity to prevent the performing of the duties of a police officer. The Benefit in respect of any one Accident shall not be paid for more than the Benefit period shown in the Policy Schedule. No benefit shall be paid for any period of absence commencing more than three hundred and sixty five days from the date of accident.

Level of benefit is fixed at level applying at date of original accident.

This Benefit is calculated on the basis of a seven day week or proportion thereof.

## Exclusions applicable to Permanent Total Disablement, Loss of Use Benefit and Temporary Total Disablement Benefit

No exclusions apply due to injury or illness incurred in the bona fide execution of police duty, whether or not the Benefit Member is formally on duty at the time. Otherwise no Benefit shall be payable under this Policy if a claim occurs directly or indirectly from any of the following causes:-

- 1) War (whether declared or not) other than civil war or any act incidental thereto
- 2) Whilst engaged as a passenger, or otherwise, in aeronautics (other than as a fare-paying passenger) or in underwater operations.
- 3) Any breach of the law by the Member.

- 4) Misuse of alcohol or drugs.
- 5) Taking part in any Hazardous Pursuit. Other than in the Bona Fide execution of police duty the following pursuits are deemed to be hazardous.
  - a) Diving or skin diving involving the use of underwater breathing apparatus.
  - b) Rock climbing or mountaineering involving the use of ropes or guides.
  - c) Potholing.
  - d) Aerial activity other than as a fare-paying passenger in a recognised airline.
  - e) Hunting on horseback.
  - f) Driving or riding in any form of race.
  - g) Bungee jumping.

### Critical Illness

Serious illness can add financial worries to the emotional upset that accompanies it. This benefit provides cash in the event of a member being diagnosed with one of the listed critical illnesses and surviving for 28 days following diagnosis. No benefit will be payable for any illness where the condition or any related condition, or symptom existed before the member became insured for this benefit. Claims should be made within 90 days following diagnosis.

### Child Critical Illness

This benefit is paid when a dependent child, of a member, who is aged between 6 months and 17 years is first diagnosed with one of the listed critical illnesses.

### Child Death Grant

This benefit is paid upon the death of a child of a member, aged between 6 months and 17 years.

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### The listed illnesses are:-

- |   |   |   |
|---|---|---|
| <ul style="list-style-type: none"> <li>• Alzheimer's Disease</li> <li>• Aorta Surgery</li> <li>• Benign Brain Tumour</li> <li>• Cancer</li> <li>• CJD</li> <li>• Coma</li> <li>• Coronary Artery (By-Pass) Surgery</li> </ul> | <ul style="list-style-type: none"> <li>• Heart Attack</li> <li>• Heart Valve Replacement or Repair</li> <li>• H.I.V. (A.I.D.S.) and Hepatitis B Virus<br/><small>(Contracted in a documented duty related situation)</small></li> <li>• Total Loss of Hearing</li> <li>• Total Loss of Sight</li> <li>• Total Loss of Speech</li> </ul> | <ul style="list-style-type: none"> <li>• Major Organ Transplant</li> <li>• Motor Neurone Disease</li> <li>• Multiple Sclerosis</li> <li>• Parkinson's Disease</li> <li>• Paralysis</li> <li>• Irreversible Renal Failure</li> <li>• Severe Burns</li> <li>• Stroke</li> </ul> |
|---|---|---|

### Conditions applicable to Critical Illness

1. All non-invasive cancers in situ, tumours in the presence of any human immunodeficiency virus, Lymphoma and Kaposi's sarcoma in presence of any human immunodeficiency virus and any skin cancer other than malignant melanoma are excluded.
2. Coronary artery bypass surgery means the undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of two or more coronary arteries with bypass grafts. Balloon angioplasty, laser relief or any other procedures are excluded.
3. Aorta Surgery means the thoracic and abdominal aorta but excludes its branches.
4. Major organ transplant includes actual undergoing as a recipient of a transplant of a heart, liver, lung, pancreas or bone marrow.
5. Benign Brain Tumour is a non-cancerous tumour in the brain, which has resulted in neurological deficit for a continuous period of six months. Cysts, granulomas, malformations in, or of, the arteries or veins in the brain, haematomas and tumours in the pituitary gland or spine are specifically excluded.
6. Coma is defined as an unconsciousness, with no reaction to stimuli, continuing for at least 96 hours. Life support systems must be required throughout the period of unconsciousness.

7. Stroke is defined as any cerebrovascular incident producing neurological sequelae lasting more than 24 hours and including infarction of brain tissue, haemorrhage and embolism from an extra cranial source. Evidence of permanent neurological deficit must be produced.
8. Parkinson's Disease caused by carbon monoxide self poisoning or drug induced Parkinson's Disease is not covered under this policy.
9. Severe burns constitutes First degree burns covering at least 60% of the total body surface area or Second Degree Burns covering at least 40% of the total body surface area or Third degree burns covering at least 20% of the total body surface area.
10. Heart Attack - Death of a portion of heart muscle as a result of inadequate blood supply to the relevant area. Diagnosis will be based on all of the following criteria:-
  - a) a history of chest pain
  - b) new electrocardiographic changes
  - c) elevation of cardiac enzymes.
11. Complete and Permanent Loss of Use of two or more limbs through paralysis. Disability must be established for a continuous period of 12 months and must be supported by neurological evidence.
12. Irreversible Renal Failure relates to end stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either renal dialysis or renal transplant as a recipient is initiated.

### **Regulation 28 Cover (Sick Pay)**

If a member suffers a pay cut under regulations, a benefit of £100 per week will become payable for up to 26 weeks. This benefit will cease upon the earlier return to work, casting or resignation.

### **Conditions applicable to Regulation 28 Cover (Sick Pay)**

Benefits will cease after the benefit period or on early return to work or discharge. If a Benefit Member is offered recuperative duties and a return to full pay and such duties are declined without reasonable cause, the benefit will cease. Shift allowance and other allowances are not included.

### **Red Arc Assistance**

If you, or any member of your family residing with you are diagnosed with a serious illness (e.g. cancer, heart attack, stroke or MS) they will be eligible to use this service. A personal nurse advisor will help them decide what extra help and support may be required. This might include:

- A specialist nurse home visit.
- Therapy.
- Counselling.
- Links to specialist charities.
- Information on special equipment and home adaptation.

Your personal nurse adviser will be there to help you, and the service is free of charge and confidential. If you think you may be eligible you should ring RED ARC on 01273 716700 in normal business hours.

### **Provider - Red Arc Assistance**

## Denplan Emergency and Injury Dental Benefits (Key Cover)

Key Dental Cover from Denplan provides you with cover for treatment necessary as a result of a dental injury or emergency anywhere in the world.



- **Worldwide dental injury**

Cover for up to £2,500 of treatment per dental injury (for up to four incidents per policy year) to the teeth or supporting structures which is directly caused suddenly and unexpectedly by means of a direct external impact/blow to the mouth.

- **Worldwide emergency dental treatment**

In the UK: up to £200 of treatment per incident for up to four incidents per policy year. Outside the UK: up to £400 of treatment per incident for up to two incidents per policy year. A dental emergency is dental treatment provided at the initial emergency appointment urgently required for the relief of severe pain, arrest of haemorrhage, the control of acute infection or a condition which causes a severe threat to your general health. There is an overall maximum of £800 per policy year for this benefit.

- **Hospital cash benefit**

£50 for each night you stay overnight in hospital, up to £1000 per policy year, for dental treatment under the care of a consultant specialising in dental or maxillofacial surgery in relation to a head or neck condition.

- **Dentist call-out fees**

Up to £100 per incident for up to two incidents per policy year for a dentist in the UK to re-open the practice between the hours of 6.00pm and 8.00am on weekdays or weekend and bank holidays or outside the UK, outside the practice's normal working hours to provide emergency dental treatment or treatment in the event of an accidental dental injury.

- **Mouth cancer cover**

Up to £12,000 towards one course of treatment for up to eighteen months following diagnosis (smokers are included).

- **24 hour worldwide emergency helpline, Access a dental emergency helpline anywhere in the world**

Key Dental Cover provides you with a 24-hour dental emergency helpline to help you find a dentist anywhere in the world if you need one as a result of a dental injury or emergency.

Just call 0800 7315 052 (in the UK) or +44(0)1962 844571 (outside the UK).

### Receive treatment from all types of dentists

You can enjoy the benefits of Key Dental Cover whether you are treated by a Denplan, private or NHS dentist.

### Claiming couldn't be simpler

Claiming is easy as you are not required to gain authorisation from us prior to receiving treatment. Simply pay your dentist for all treatment received, obtain proof of treatment and a receipt, complete a simple claim form and you should receive settlement within 10 working days. Claim forms are available by calling Denplan free on 0800 838 951 and are also available to download from the Federation internet and intranet sites.

## Summary of main exclusions

- Treatment prescribed, planned, advised or taking place on or before the commencement date of the policy or for claims under the injury or emergency benefit for treatment required as a result of an incident that occurred prior to the commencement date of the policy.
- Dental Injury caused in the consumption of food (including foreign bodies contained within the food). Please note that cover for emergency dental treatment for the relief of pain, is not excluded if caused in the consumption of food.
- Treatments in connection with dental injuries must commence within a period of 6 months and must be completed within 24 months of the date of the original incident.
- Any treatment relating to damage or injury caused whilst participating in contact sports (including training) unless the recommended mouth protection is worn.
- Any treatment not deemed to be clinically necessary including tooth whitening and orthodontics unless the treatment is specifically related to a dental injury covered by this policy.
- Implants and all costs associated with the preparation and fitting of such a device.
- Treatment for mouth cancer diagnosed before or within 90 days after you joined Denplan or for which tests or consultations began within those 90 days, even if the diagnosis is not made until later.

Should you wish to supplement the Key Dental Cover detailed earlier, you may upgrade your cover as detailed below:

## UPGRADE OPTIONS FOR YOUR EMERGENCY AND INJURY DENTAL COVER

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Benefits	Elementary Dental Cover	Essential Dental Cover	Essential Plus Dental Cover	Extensive Plus Dental Cover
Routine examinations (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £50 per policy year	Up to £50 per policy year	Up to £100 per policy year
Hygiene treatments (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £60 per policy year	Up to £60 per policy year	Up to £120 per policy year
Dental x-rays (and NHS band 1 treatment)	100% reimbursement for NHS treatment	Up to £40 per policy year	Up to £40 per policy year	Up to £80 per policy year
Remedial or restorative treatments (and NHS band 2 & 3 treatment) Including, but not limited to, fillings, crowns, bridges and dentures	100% reimbursement for NHS treatment	80% of the cost up to £200 per policy year	80% of the cost up to £1000 per policy year	80% of the cost up to £2000 per policy year
<b>Member</b>	£7.85	£12.30	£15.35	£27.90
<b>Member/Partner</b>	£14.45	£22.75	£28.35	£51.70
<b>Member &amp; Children</b>	£12.50	£19.65	£24.60	£44.65
<b>Family</b>	£19.35	£30.45	£38.15	£69.30

Rates are per person per month payable by direct debit. There are no forms to fill in and acceptance is guaranteed.

**For further details call 0845 230 1654**

## Home Emergency Assistance

Home Emergency Insurance is a cost-effective insurance product that provides immediate assistance in the event of a domestic emergency. Home emergencies can be stressful and sometimes difficult to resolve, but with Home Emergency Insurance you will have peace of mind knowing that we are with you every step of the way, by not only appointing a suitably qualified contractor to attend your home but also meeting the costs associated with this.

Cover is provided 24 hours a day, 365 days a year for:

- Call-out charge
- Labour up to a maximum of 2 hours
- Parts and materials up to a maximum of £100 (inc VAT)
- Alternative accommodation up to a maximum of £250 (inc VAT)

The maximum payable per claim is £1,000 (inc VAT)

Emergencies covered are:

- Breakdown of the heating system
- Plumbing and drainage problems
- Home security including locks and windows
- Breakage or failure of your sole toilet unit
- Loss of domestic power supply
- Lost keys
- Vermin infestation

\*For breakdown of the heating system, it is a requirement under the terms and conditions that the boiler is under 15 years old and subject to an annual service. The cost of this service is NOT covered under this policy. You are free to determine who you use for an annual service. For your convenience and peace of mind, we have sourced Reactfast as a reliable provider of boiler servicing Nationwide. A standard service should cost between £65–£70. To arrange a service please call 0844 880 1139

## Claims Procedure

In the event of an emergency in the home, please telephone 0844 826 1765 as soon as possible providing us with your name, address, postcode, and the nature of the problem. It is important you notify us as soon as possible and do not appoint your own contractors as we will not pay the costs incurred and it could invalidate your cover. If the incident is not covered by this policy then we can still provide assistance which will be at your own cost. This may also be an event covered by your main buildings &/or contents insurance and we will seek to advise you accordingly. Please note that you should report any major emergency which could result in serious damage to the home or injury, to the Emergency Services or the company that supplies the service.

### Significant Features & Benefits

The Insurer will pay Costs & Expenses up to the Limit of Indemnity for claims reported during the period of insurance for the insured events shown below

### Significant Exclusions or Limitations

You always agree to use the Contractor nominated by us and the claim must be reported to us immediately after you first become aware of circumstances which could give rise to a claim under this policy

#### Limit of Indemnity

The Insurer will pay the following:

- a) Call-out charge, and/or
- b) Labour up to a maximum of 2 hours, and/or
- c) Parts and materials up to a maximum of £100, and/or
- d) Alternative accommodation costs up to a maximum of £250

The maximum payable per claim is £1,000

<p><b>1 MAIN HEATING SYSTEM</b> The total failure or breakdown of the main heating system in your home</p>	<p>Any claim</p> <ul style="list-style-type: none"> <li>relating to the central heating boiler which <ul style="list-style-type: none"> <li>is more than 15 years old and/or</li> <li>has not been subject to an annual service</li> </ul> </li> <li>relating to LPG fuelled, oil fired, warm air, solar and un-vented heating systems or boilers with an output over 60Kw/hr</li> </ul>
<p><b>2 PLUMBING &amp; DRAINAGE</b> The sudden damage to, or blockage or breakage or flooding of, the drains or plumbing system likely to cause damage to the home or its contents</p>	
<p><b>3 HOME SECURITY</b> Damage to or the failure of external doors, windows or locks which compromises the security of the home</p>	
<p><b>4 TOILET UNIT</b> Breakage to or mechanical failure of the toilet bowl or cistern resulting in the loss of function providing there is no other toilet in the home</p>	
<p><b>5 DOMESTIC POWER SUPPLY</b> The failure of the domestic electricity or gas supply</p>	<p>Any claim relating to the interruption, failure or disconnection of the mains electricity, mains gas or mains water supply</p>
<p><b>6 LOST KEYS</b> The loss of the only available keys, if you cannot replace them, to gain access to the home</p>	<p>Any claim relating to damage incurred in gaining access to the home</p>
<p><b>7 VERMIN INFESTATION</b> Vermin causing damage inside your home or a health risk to you</p>	
<p><b>8 ALTERNATIVE ACCOMMODATION COSTS</b> Your overnight accommodation costs including transport to such accommodation up to a maximum of £250 (including VAT) following a home emergency which renders the home uninhabitable</p>	<p><b>Exclusions Applicable to All Sections</b> Any claim</p> <ul style="list-style-type: none"> <li>where costs have been incurred before we accept a claim</li> <li>where there is no one at home when the contractor arrives</li> <li>involving a pre-existing problem</li> <li>arising from any wilful or negligent act or faulty workmanship (including any attempted repair or DIY)</li> <li>for effecting permanent repairs once the emergency situation has been resolved</li> <li>arising out of the failure to maintain any system or equipment or the replacement of parts that gradually wear and tear over time</li> <li>relating to garages (except where boilers are housed in a garage), outbuildings, boundary walls, fences, hedges, cess pits, fuel tanks or septic tanks</li> <li>where the property has been left unoccupied for more than 30 days consecutively</li> <li>covered by a manufacturer's, supplier's or installer's warranty</li> </ul>
	<p><b>Territorial Limit</b> The United Kingdom, Channel Islands and the Isle of Man.</p>

## Identity Theft Protection

The insurance will provide indemnity up to £50,000 for:

- Notarising affidavits
- Costs of sending certified mail
- Loan application fees
- Telephone expenses
- Loss of earnings (max £250 per day / £10,000 max)
- Legal fees

The insurance dovetails perfectly into the ID Theft Resolution Helpline service that will proactively manage an identity theft from discovery to full conclusion, as well as providing general ID theft prevention advice.

The helpline service is manned by security checked individuals who initially take details and then draft the required correspondence to all relevant parties (financial institutions and credit reference agencies).

If you think you or a family member residing with you has become a victim of identity fraud, please call the helpline on 0844 826 1739

**Insurer - The policy is administered by ARAG plc and underwritten by Brit Insurance Limited.**

## Family Travel Policy

This policy covers the member, their partner and dependant children under 18 years of age (under 21 if in full time education) and still living with parents, for any number of trips in any year up to 31 days per trip. It covers travel worldwide and also in the United Kingdom.

The main sections of cover are:

- Cancellation and curtailment up to £3,000
- Emergency medical expenses up to £5,000,000
- Personal Baggage up to £1,500
- Personal Money up to £500
- Personal liability up to £1,000,000
- Personal Accident up to £20,000

Other benefits are included. Please see travel policy for full details.

**Insurer: This travel insurance policy is underwritten by Millstream Underwriting Ltd (insured by Mondial Assistance Europe N.V.).**

## Main Conditions and Exclusions to Family Travel Policy

The policy contains an important Warranty and exclusions relating to existing health conditions. Please follow the instructions in the policy document and contact the Medical Pre-Screening service on **0845 643 2634** quoting reference **MT09/1094**, if you have any medical condition or circumstance which may affect your ability to travel.

An excess of £50 is applicable for most policy sections. The excess is payable per person, per section, per insured incident subject to a maximum of £100.

There are significant limitations and exclusions of cover for property, including valuables and money, that is left unattended or out of your immediate control and supervision. Please also note the requirements for notifications of loss/theft and the need for reports.

Full policy terms and conditions have been made available. If you require further copies please contact the Federation Office.

# Don't Forget!



## Your Police Federation Insurance Scheme now has cover for dental accidents & emergencies!

Should you or a covered partner have an accident, or simply a toothache that requires an urgent or emergency appointment with a dentist, you can claim costs back. This cover applies even if you visit your usual dentist. If you do not have a dentist or are away from home, Denplan will find you a dentist anywhere in the World. Claim forms are available by calling 0800 7315 052 or by contacting the Federation Office.

If you wish to upgrade your cover to include routine and remedial treatment Philip Williams & Co on **0845 230 1654**

## HOME INSURANCE THAT SHOULD SAVE YOU MONEY & COULD ALSO PAY FOR DINNER...

...£25 Marks & Spencer or Tesco voucher to welcome you as a client.



Great levels of cover, excellent value, our friendly, knowledgeable UK-based staff will find the right policy for you. Everybody requesting a Home Insurance quote will receive a **FREE** Parker pen, and as a welcome, every new policy holder will receive a £25 Marks & Spencer or Tesco voucher. Recommend a friend and you **BOTH** receive the vouchers\*.

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Tel: 01925 604 421 Fax: 01925 861 351

Philip Williams and Company are Authorised and Regulated by the Financial Services Authority  
\*Subject to terms and conditions, ask us for details.

## Legal Expenses

Legal expenses insurance is provided in your Federation Insurance Scheme through Roland Smith Limited, 1st Floor India Buildings, Brunswick Street, Liverpool, L2 0XH, which is authorised and regulated by the Financial Services Authority. Details of this insurance is available separately.

## Complaints Procedure

The Federation Insurance Scheme is arranged on behalf of the Trustees by Philip Williams and Company who are authorised and regulated by the Financial Services Authority registration number 308860. The Trustees are responsible for dealing with the insurance broker and organising the Policies. Any complaints about any aspect of the Federation Insurance Scheme should in the first instance be directed to the Trustees. We will then investigate any complaint; identify the appropriate person to speak to and then either resolve the matter with that organisation and the Member or arrange for the appropriate organisation to resolve it directly with the Member.

Therefore if you have any complaints about the Federation Insurance Scheme please contact the Federation Office on:

**Telephone 0115 967 2573**

**Fax 0115 967 6257**

Or simply write, giving details of your complaint to:

The Secretary  
Federation Office  
Police Headquarters  
Sherwood Lodge  
Arnold  
Nottingham  
NG5 8PP

These booklets are produced by



Philip Williams & Company, 35 Walton Road, Stockton Heath, Warrington WA4 6NW