

Certificate Wording

# Twins and multiple birth insurance

Arranged by Marcus Hearn & Co. Ltd.



# Twins and multiple birth certificate

We are delighted to welcome you as a Twins and Multiple Birth Insurance customer.

This is to certify that in accordance with the authorisation granted under Contract Number WF0842259T to the issuing agent by Certain Underwriters at Lloyd's of London whose name, which will be supplied on application, may be ascertained by reference to the said Contract which bears the Seal of the Lloyd's Policy Signing Office, the said Underwriters are hereby bound for their own Part and not one for another, their Heirs, Executors and Administrators, subject to the terms, conditions, exclusion and limitations hereof to pay in accordance with the Schedule of Benefits as defined herein.

It is strongly recommended that you read your certificate to ensure that it provides the cover you require. If you are unsure on any aspect, please contact your insurance advisor.

As your insurer we will endeavour to respect the trust you have placed in us but, should you at any time be dissatisfied with our service, a complaints procedure is provided.

We look forward to providing you with the highest level of service and security.

## "Twins" insurance certificate (Multiple birth risk)

Please read the certificate, schedule and any endorsements as if they are one document.

**You** have made a written proposal and declaration to **us** for this insurance. The certificate is a contract between **you** and **us**.

**We** will insure **you** under the terms and conditions of the certificate after **we** have accepted **your** premium (and any tax payable on this).

## Meaning of words

### **Born**

Living at the time of delivery.

### **Expected Date of Birth**

The predicted date of birth which a doctor has confirmed in writing and which **we** have recorded in the schedule.

### **We or Us**

Marcus Hearn & Co Ltd., on behalf of Certain Underwriters at Lloyd's of London.

### **You/Your**

The person shown in the schedule as the insured person.

## The cover

### **What is insured**

- 1** If two children are **born** at the **expected date of birth, we** will pay the sum insured shown in the schedule.
- 2** If more than two children are **born** at the **expected date of birth, we** will pay double the sum insured shown in the schedule.

### **What is not insured**

A multiple birth:

- more than six weeks before the **expected date of birth** unless medical evidence is provided to **us** to show that the growth and development of the babies equates with the **expected date of birth**;
- which follows the use of any fertility treatment or fertility enhancing drugs;
- where a fully completed, dated and signed application form, doctor's certificate and payment has not been received within the first 11 weeks of the pregnancy and before any scan has taken place.

## Conditions

- 1 **You** must tell **us** of any claim as soon as is reasonably possible. **You** must also give us all the help and information **we** may reasonably need, within 30 days after the birth.
- 2 If **you** or anyone acting for **you** makes a claim knowing that it is false, **we** will not pay the claim. All cover under your certificate will cease.
- 3 This certificate is governed by the law that applies to where **you** reside within the United Kingdom. If there is a dispute as to which law applies, it will be English Law.

## Making a claim

If **you** wish to claim, tell **us** as soon as possible by telephone or letter. **We** will then send **you** a claim form. **You** and a doctor, midwife or nurse who was at the birth must fill it in and **we** will require evidence of the date(s) of any scans carried out during the period of pregnancy. Please return to Marcus Hearn & Co. Ltd. within 30 days of the birth.

## Our Complaints procedure

**We** aim to provide a standard of service that will leave **you** with no cause for complaint. However, if **you** feel that **we** have not met the high standards **we** set ourselves, **you** can take the following action:

- 1 In the first instance contact:  
**your** insurance adviser  
or write to:

Marcus Hearn & Co Ltd.  
Lloyd's Cover Holders  
Marcus Hearn House  
65/66 Shoreditch High Street  
London E1 6JL  
Telephone: **020 7739 3444**

- 2 If **you** are not satisfied with the way a complaint has been dealt with **you** may ask the Complaints and Advisory Department at Lloyd's to review **your** case without prejudice to **your** rights in law. The address is:

Complaints and Advisory Department  
Lloyd's  
One Lime Street  
London  
EC3M 7HA  
Telephone: **020 7327 5693**

- 3 In the unlikely event that **we** cannot resolve any difference, **you** may ask the Financial Ombudsman Service (FOS) to review **your** case.

Financial Ombudsman Service  
South Quay Plaza  
183 Marsh Wall  
London E14 95R  
Telephone: **0845 0801800**  
email: **enquiries@financial-ombudsman.org.uk**

**You** may contact the FOS at any stage of **your** complaint. **Your** legal rights will not be affected.

## Compensation

**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation should **we** be unable to meet our obligations. Further information is available on **www.fscs.org.uk** or you may contact the FSCS on **020 7892 7300**.

