

Lifetime Protection Series from Standard Life

keyfacts

Level Protection Plan

KEY FEATURES

Before you buy a Level Protection Plan, we want you to be sure that you know what the decision will mean for you: what this plan is, how it works, and what the risks are. This Key Features Document gives you the main points about the Level Protection Plan you're buying. We've enclosed a personal quotation showing you the guaranteed amount this plan would pay out if you make a claim during the plan's term. Please read it carefully and keep it with your plan documents. This Key Features Document is for a UK plan and for use by UK residents only.

Its aims

- To pay out a guaranteed amount if, during the term of the plan, you:
 - die
 - are diagnosed with a terminal illness, except in the last 12 months of the plan or until the last anniversary date of the plan before your 70th birthday, whichever is earlier
 - are diagnosed with one of the critical illnesses covered and have chosen this optional cover
 - suffer a total permanent disability and have chosen this optional cover.
- To pay the guaranteed amount (if we accept a claim) as a lump sum or regular income or a combination of the two, whichever you choose.
- The plan ends if we pay out for a claim, except a Critical Illness claim for Children's Benefit.

Your commitment

- To make monthly or yearly payments throughout the term of the plan
- or
- To make a single payment, if the term of the plan is less than five years. If the term is exactly five years, you can choose to make either a single payment or regular payments.

Risk factors

- Your plan has no cash-in value at any time. If you stop making payments, the plan and your cover will end (after 70 days from the date of the first missed payment), and you'll get nothing back.
- You must give us full, honest and accurate answers to all the questions we ask, both to support your application and at any time during the plan's term. If you withhold information, whether deliberately or not, we may not pay out.
- We will not pay out for a condition the plan excludes. For more information on our standard exclusions, please ask your financial adviser or local Standard Life office for our leaflet 'Definitions and Exclusions' (GEN200).



Questions and answers

What is a Lifetime Protection Series – Level Protection Plan?

- It's an insurance plan that pays out a guaranteed amount if, during the term of the plan, you:
 - die
 - are diagnosed with a terminal illness, except in the last 12 months of the plan or until the last anniversary date of the plan before your 70th birthday, whichever is earlier
 - are diagnosed with one of the critical illnesses covered and have chosen this optional cover
 - suffer a total permanent disability and have chosen this optional cover.
- Your payments to the plan will stay the same throughout the term of the plan. If Terminal Illness cover ends before your life cover ends, this will not affect your payments to the plan, which are guaranteed not to change throughout the term of the plan
- The guaranteed amount stays the same throughout the term of the plan unless you use an option to increase it. (For details of the options you can choose, see 'How flexible is it?')
- Before the plan starts, you choose how you want the guaranteed amount to be paid if there's a claim during the plan's term. It can be paid as:
 - a lump sum
 - an income for 3, 5, or 10 years, which can be paid monthly, quarterly, half-yearly or yearly in advance
 - a combination of lump sum and income.
- The plan can cover:
 - you only, or
 - you and your spouse or partner, or
 - you and another person as long as you can prove that you would suffer a financial loss on their death, or
 - a business or partnership to protect against financial loss if an individual dies or is diagnosed with a terminal illness during the plan's term.

- The plan automatically includes Free Accidental Death Benefit from your date of application until we accept or decline it (up to a maximum of 30 days). If you have an accident during that time and die within 90 days of the accident, we'll pay out the lower of:
 - £250,000, and
 - the amount you've asked us to pay out on your death.
- Please be aware that:
 - your Level Protection Plan isn't a savings plan. It has no cash-in value at any time
 - a terminal illness is different from a critical illness. A terminal illness means that you would have a life expectancy of less than 12 months. A critical illness wouldn't necessarily reduce your life expectancy (for example, blindness is one of the conditions covered by Critical Illness)
 - age and other restrictions apply. You may be refused cover or the guaranteed amount may be restricted. For details, please ask your financial adviser or local Standard Life office for our 'Lifetime Protection Series Guide' (LPS10)
 - the plan ends if we pay out for a claim, except a Critical Illness claim for Children's Benefit.

How flexible is it?

- Before your plan starts you can choose options that you can use at a later date. These options, which are available for an additional cost, let you increase the guaranteed amount you're insured for or extend the term of your plan. You can use these options up until the first of these dates:
 - the anniversary date of the plan before your 55th birthday
 - three years before the plan's end date (or until the plan's expiry date for the Mortgage Future Insurability and Term Extension option).

Lifestyle option: lets you increase your guaranteed amount:

- within 6 months of your marriage
- on the birth or legal adoption of a child. Or you can take out a Family Income Protection Plan instead.

Increase option: lets you increase the guaranteed amount on every fifth anniversary of your plan.

Extension option: lets you extend the term of your plan on every fifth anniversary of your plan.

Mortgage Future Insurability and Term Extension option: lets you increase the guaranteed amount and/or extend the term of your plan within 6 months of an associated increase in your mortgage or extension of its term. When you use this option you may need to increase your plan's term, as the new expiry date must be at least 3 years after the date this option is used.

- To include these options you must normally be under 50 when your plan starts, and other restrictions may apply. Your plan schedule will confirm which options you've included in your plan and the exact date that an option ends.

- Before or after the plan starts, you can include any of the following benefits in your plan for an additional cost:
 - Critical Illness
 - Total Permanent Disability
 - Waiver of Premium
 - Accidental Death Benefit.
- The options and benefits are further described below and under 'What other benefits can I choose?'

When does the plan pay out?

- We pay out if, during the term of the plan, you:
 - die
 - are diagnosed with a terminal illness and not expected to live for more than 12 months
 - are diagnosed with one of the critical illnesses covered and have chosen this cover
 - suffer a total permanent disability and have chosen this cover.
- We won't pay out for terminal illness:
 - during the last 12 months of the plan
 - after your 70th birthday. Your plan won't include this cover if you're aged 69 or older when you take it out.

How do I make a claim?

- To make a claim please either call 0131 225 2552 and ask for our Life Claims Department, or write to:

Life Claims Department
The Standard Life Assurance Company
Standard Life House
30 Lothian Road
Edinburgh
EH1 2DH.

Details of the evidence required to support a claim are given in the policy provisions booklet (LPS62), which will form part of your plan document (which is issued after you accept any offer of cover made). A copy is also available on request.

Critical Illness and Total Permanent Disability cover

- You can choose Critical Illness or Total Permanent Disability cover before your plan starts or add it at a later date.
- If you choose this cover, the guaranteed amount will be the same as the amount payable on death.

Critical Illness pays out if you're diagnosed with one of the illnesses or conditions listed below. It automatically includes Total Permanent Disability within the list of conditions covered.

Total Permanent Disability pays out if you become totally and permanently disabled, and (depending on the definition shown in your plan documents) you are unable to carry out your own occupation, or you cannot perform at least three of the eight Activities of Daily Working (ADW).

- Your plan may contain a combination of the own occupation and ADW definitions if, from the start of your plan to your plan's expiry date, it provides cover worth more than:
 - £2 million for Critical Illness cover, or
 - £250,000 for Total Permanent Disability cover (if you choose this as a separate benefit without adding Critical Illness cover).

The ADW definition may apply to plans with lower guaranteed amounts.

- Your whole plan will use the ADW definition if:
 - you don't have a current occupation that provides you with earnings
 - your occupation or a medical condition won't allow you to have the own occupation definition.
- You could be refused cover or have certain conditions excluded because of your circumstances. For details of the standard exclusions and own occupation, ADW and Total Permanent Disability definitions, please ask your financial adviser or local Standard Life office for a copy of our leaflet 'Definitions and Exclusions' (GEN200).

What is included in the Critical Illness cover?

- The critical illnesses and conditions that the plan covers are:

Alzheimer's Disease	HIV infection from Blood Transfusion
Aorta graft surgery	HIV infection from Physical Assault
Aplastic Anaemia	Kidney failure
Bacterial Meningitis	Liver failure
Benign brain tumour	Loss of limbs
Blindness	Loss of speech
Cancer	Major organ transplant
Coma	Motor Neurone Disease
Coronary artery by-pass surgery	Multiple Sclerosis
Creutzfeldt-Jakob Disease	Paralysis/paraplegia
Deafness	Parkinson's Disease
Dementia before age 65	Stroke
Heart attack	Third degree burns
Heart valve replacement or repair	Total permanent disability
HIV infection for Emergency and Healthcare Services	
- Certain conditions may be excluded depending on your circumstances.
- If you choose this cover, your children are automatically covered for certain critical illnesses and conditions. We call this Children's Benefit. It has separate definitions, exclusions and limitations.
- For definitions, exclusions and limitations of the illnesses and conditions covered, including Children's Benefit, and the medical evidence we'll require for a claim, please ask your financial adviser or local Standard Life office for our leaflet 'Definitions and Exclusions' (GEN200).

What will stop the Critical Illness or Total Permanent Disability cover paying out?

We won't pay out a Critical Illness or Total Permanent Disability claim if:

- you die within 28 days of the date of diagnosis. We would pay out the amount payable on death instead
- the illness or condition giving rise to the claim:
 - is excluded by any specific terms we apply when we accept your application. If exclusions apply, we'll list them in your terms of offer letter and plan schedule
 - relates to aviation (other than as a fare-paying passenger), drug abuse, failure to follow medical advice, self-inflicted injury, war or civil commotion.
- a Children's Benefit claim relates to:
 - a condition that runs in the family or is present from birth
 - symptoms that first arose before the start date of the plan.

For definitions, exclusions and limitations of the illnesses and conditions covered, including children's conditions, and the medical evidence we'll require for a claim, please ask your financial adviser or local Standard Life office for our leaflet 'Definitions and Exclusions' (GEN200).

What other benefits can I choose?

- You can increase your guaranteed amount or extend the plan's term in certain circumstances as described above. You must choose these options before your plan starts. For details of all plan options and the restrictions that apply, please ask your financial adviser or local Standard Life office for our 'Lifetime Protection Series Guide' (LPS10).
- You can add Critical Illness and Total Permanent Disability cover as described above.
- You can add Waiver of Premium and Accidental Death Benefit as described below.

Waiver of Premium

- Waiver of Premium covers your regular payments to your plan if an illness or disability stops you working for six months or more.
- For the first six months of your claim you must continue to make payments to your plan. After that, Waiver of Premium will cover your payments until you're able to return to work.
- When you return to work your claim ends and you must start making payments again.
- You can add Waiver of Premium to your plan until the first of these dates:
 - the last anniversary of your plan before your 56th birthday
 - the date your plan is due to end.

- You can continue to have Waiver of Premium in your plan until the first of these dates:
 - the last anniversary of the plan before your 65th birthday
 - the date your plan is due to end.
- Any payments we are making for a claim will also continue until the first of these dates.
- You cannot change your level of cover during a claim for Waiver of Premium.
- We will agree to waive payments if you become disabled and meet the definition of disability shown in your plan documents. The three possible definitions of disability are:
 - you are unable to carry out your own occupation,
 - you are unable to carry out any occupation for which you may be suited,
 - you cannot perform at least three of the eight Activities of Daily Working.

Certain conditions may be excluded and cover is not included for all occupations. For details of the definitions of disability available and standard exclusions, please ask your financial adviser or local Standard Life office for a copy of our leaflet 'Definitions and Exclusions' (GEN200).

Accidental Death Benefit:

- If you die within 90 days of an accident, we'll pay out:
 - the guaranteed lump sum amount you're insured for on death, plus
 - an additional amount of Accidental Death Benefit up to a maximum of £250,000, which will equal your guaranteed lump sum amount.
- It covers only the guaranteed amount (or part of it) payable as a lump sum. If there's a claim, it won't take account of any amount payable as an income.
- You can add this option to your plan until the first of these dates:
 - the anniversary date before your 55th birthday
 - the plan's end date.

What will my payments be?

- Your personal quotation shows you the payments for the cover you've chosen.
- Your payments are based on:
 - your age and sex
 - if you smoke or not
 - the amount of cover you've chosen
 - the term of your plan
 - the options you've chosen.

- You can make regular payments monthly by direct debit, or yearly by direct debit or cheque. If the term of your plan is:
 - exactly five years you can choose to make a single payment by cheque
 - less than five years, you must pay in a single payment by cheque.

What are the charges?

- There are no separate charges. All our charges and expenses are included in your payments.

What if I stop paying?

- If you stop making payments, the plan and your cover will end, and you'll get nothing back.

What about tax?

- The guaranteed amount we pay out will normally be free from UK Income Tax and Capital Gains Tax.
- The amount we pay on any claim could increase the value of your estate for Inheritance Tax purposes. As the actual effect will depend on your personal circumstances, we suggest you get specialist advice on Inheritance Tax.
- Tax law and tax reliefs may change. The information we've given is based on our understanding of the law and Inland Revenue practice when we published this Key Features Document. We recommend that you take professional advice about tax.

Can I change my mind?

- You have a legal right to cancel your contract if you change your mind. When we accept your application we'll send you a Cancellation Notice that confirms the actual steps that must be taken in order to cancel the contract. The Cancellation Notice confirms that you have a 30 day period to consider if you want to change your mind. This 30 day period starts from the date you receive the Policy Schedule and Policy Provisions (Terms and Conditions of the policy). During this period, if you decide you want to cancel, you should send your cancellation instruction to the address provided in the Cancellation Notice. We'll then return any payments you have made. Please make sure that you include your plan number in any correspondence with us.

At the end of the 30 day period you will be bound by the terms and conditions of the plan and any money received by Standard Life will not be refundable.

How to contact us

- Remember, your financial adviser will normally be your first point of contact.
- If you have any questions or would like to make any changes to your plan, you can phone us. We may monitor calls to improve our service.
- Phone: 0845 60 60 002, Monday to Friday 8am-6pm, Saturday 8am to 1pm.

You may prefer to contact us by writing to us:

The Standard Life Assurance Company
Standard Life House
30 Lothian Road
Edinburgh
EH1 2DH
United Kingdom

You can find out more about Standard Life on our website: www.standardlife.co.uk

Other information

How to complain

- We have a leaflet that summarises our complaint handling procedures. If you'd like a copy, please ask us.
- If you ever need to complain, first write to us at the above address. If you aren't satisfied with our response, you may be able to complain to:

The Financial Ombudsman Service
South Quay Plaza
183 Marsh Wall
London
E14 9SR

Phone: 0845 080 1800, switchboard: 020 7964 1000
Fax: 020 7964 1001

e-mail: enquiries@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

- Complaining to the Ombudsman won't affect your legal rights.

Information leaflets

- For more information about the cover the plan provides, options, definitions, limitations and exclusions, please ask your financial adviser or local Standard Life office for these additional information leaflets:
 - Definitions and Exclusions: GEN200
 - Lifetime Protection Series Guide: LPS10.
- We can also supply specimen plan documents on request.

Terms and conditions

- This Key Features Document gives a summary of Standard Life's Level Protection Plan. It doesn't include all the definitions, exclusions, terms and conditions. If you'd like a copy of these, please ask your financial adviser or contact us direct. Any specific exclusions and limitations that apply to your plan will be shown in your plan documents.
- We have the right to change some of the terms and conditions. We'll write and explain if this happens, and send you a copy of anything that has changed.

Law

- In legal disputes, the law that applies is usually the law of the country in which you are resident when you take out the plan.
- The English language will be used in all documents and future correspondence.

Compensation

- Where you receive advice from a qualified financial adviser, they should recommend a product that is suitable for you. You have a legal right to compensation if, at any time, it is shown that you have bought a recommended product that was not suitable for your needs at that time.
- The Financial Services Compensation Scheme (FSCS) has been set up to deal with compensation if firms are unable, or likely to be unable, to meet claims against them. For further information contact us on 0845 60 60 002.
- The amount of compensation available depends on the type of business and the circumstances of the claim. Insurance advising and arranging is covered for 100% of the first £2,000, and 90% of the remainder of the claim, without any upper limit. Further information is available from the FSCS.

The ABI Guide to Critical Illness

- General information about critical illness cover is contained in the ABI (Association of British Insurers) 'Guide to Critical Illness'. We'll send you a copy on request, or you can get a copy by writing to the ABI at 51 Gresham Street, London EC2V 7HQ.
- This document complies with the ABI Statement of Best Practice for Critical Illness Cover. Further details are in the plan schedule and standard provisions, which make up the plan. We recommend you seek specialist advice about the legal and tax information contained in this leaflet.

About Standard Life

- On 31 March 2004 it was announced that the Standard Life Board had concluded that, in principle, proceeding towards a demutualisation of the Company was in the best interests of the Company and its policyholders. The current timetable envisaged is that a proposal will be put to the members by the 2006 Annual General Meeting for implementation as soon as practicable thereafter. Non with profits policyholders, who are not in any event voting members, will not be eligible to participate in any demutualisation benefits.
- The Standard Life Assurance Company's (Standard Life's) product range includes life assurance, pensions and investments.
- Standard Life is on the Financial Services Authority Register. The registration number is 110464.

Standard Life has been assessed as having attained the standards under the Raising Standards Quality Mark Scheme.

The Standard Life Assurance Company* is a mutual company registered in Scotland (no SZ4) Head Office Standard Life House 30 Lothian Road Edinburgh EH1 2DH Tel (0131) 225 2552 *Standard Life may record and monitor telephone calls to help improve customer service.*

The Standard Life group includes Standard Life Pension Funds Limited* SLTM Limited* Standard Life Investments (Mutual Funds) Limited*

*Authorised and regulated by the Financial Services Authority

www.standardlife.co.uk