

Policy Summary

keyfacts[®]

You may purchase this cover if **you** own a Snooper device.

This Policy Summary does not contain the full terms and conditions of **your** policy. Please refer to the Policy Document section.

This policy covers:

1. One specified Snooper device (the **insured device**) whilst in the United Kingdom, Isle of Man and Channel Islands.
2. The cost of replacement as a direct result of theft.
3. The cost of repair (or replacement if it cannot be repaired) as a direct result of accidental damage, malicious damage, water or liquid damage.
4. The cost of repair (or replacement if it cannot be repaired) as a direct result of **electrical or mechanical breakdown** which occurs at least 12 months after the date the **insured device** was purchased new, and after expiry of the manufacturer's warranty.
5. A maximum of two (2) accepted claims during any 12-month period.

Please refer to **section C** of the Policy Document for full details.

This policy does not provide cover for:

- The policy **excess** of £25 for the first claim, and £50 for the second claim during any 12-month period
- **Electrical or mechanical breakdown** of the **insured device** arising within at least the first 12 months from the date the **insured device** was purchased new, and during the manufacturer's warranty
- The period of 30 days after policy set-up, except for theft, unless **you** have taken out this cover within seven (7) days of purchasing the **insured device**, as stated on the **proof of purchase**
- Theft of the **insured device** from an unattended motor car, van, minibus, bus or lorry, unless the **insured device** is secured in a glovebox or locked boot. The vehicle must be locked and all security devices activated. If the vehicle does not have a glovebox or boot, the **insured device** will not be covered whilst the vehicle is unattended
- The **insured device** whilst it is in a vehicle other than a car, van, minibus, bus or lorry (for example, a scooter or motorcycle)

- The **insured device** whilst it is in an occupied or unsecured public hire or private hire car, taxi, minibus or bus, unless the driver was in sight of the **insured device** at the time the theft or damage was caused
- Theft of the **insured device** from an unattended building or premises, unless evidenced damage was caused in gaining entry to, or exit from, the premises
- Theft or damage where the **insured device** has been left unsecured in a public place or a place to which others have access
- Theft or damage where the **insured device** has been passed to someone else, other than **your family members** or staff employed by **you**
- Loss or damage to the **insured device** whilst in transit, for example, by post or courier
- Loss of the **insured device**

Please refer to **sections H, I** and **J** of the Policy Document for full details.

Price

The cost of the policy is £2.99 or £4.99 per month depending on the Snooper model **you** have specified, the model and price will be specified on **your certificate**. This includes any taxes which may apply.

The policy is automatically renewed each month, with the **monthly payment** being taken by Direct Debit. If **you** wish to change the **insured device** on cover **you** must telephone **us**.

Claims

Should **you** need to register a claim, please telephone **us** on **0870 143 0403***.

Please have **your** policy ID number to hand.

Please refer to **section D** of the Policy Document for full details.

Conditions on making a claim

1. The Police must be informed within 24 hours of discovering any theft or malicious damage for which **you** wish to make a claim, obtaining an incident reference number.
2. **You** must register a claim with **us** within 48 hours of discovering any **incident** for which **you** wish to claim by contacting Customer Services.

3. **You** must complete and return the claim form to **us** within 14 days of receiving it, ensuring that **you** have followed the procedure detailed on the claim documentation.

Please refer to **section E** of the Policy Document for full details.

Cancellation

You may cancel this policy within the first 14 days after receiving these terms. **We** will refund **your** payment, although if a claim has been made during this period, **you** may be required to pay for the **services** provided. The full payment will be retained if the policy is cancelled after 14 days. **You** should contact **us** on **0870 143 0403*** to cancel the policy.

Please refer to **section K** of the Policy Document for full details.

If **you** wish to cancel this policy after the first 14 days of receiving these terms, **you** must provide at least 30 days' notice. In this event, no refund of any premium will be due.

If **you** change the **insured device** **you** will need to cancel this policy and take out a new policy.

Enquiries/Complaints

Should **you** have an enquiry or complaint, **you** can contact **us** on **0870 143 0403***. Any complaints may be raised without prejudice to **your** right to take legal proceedings. If after making a complaint **you** are still unhappy and **you** feel the matter has not been resolved to **your** satisfaction, **you** may be entitled to contact the Financial Ombudsman Service.

Under European law, **you** and the **insurer** may choose which law will apply to this contract. English law will apply unless both parties agree otherwise, in writing, prior to the start of the policy. The contract is written in English and all communication by **us** with **you** will be in English.

Please refer to **section M** of the Policy Document for full details.

Compensation Scheme

The parties to this contract are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme if they cannot meet their obligations. Most insurance contracts are covered for 100% of the first £2,000 and 90% of the remainder of the claim, without any upper limit. **You** can get more information about the compensation scheme arrangements by contacting the FSCS on **020 7892 7300** or by visiting their website at **www.fscs.org.uk**

Please refer to **section M** of the Policy Document for full details.

Status disclosure

This cover has been brought to **you** by Performance Products Limited (FRN 458305) who is an appointed representative of Lifestyle Services Group Limited. The cover has been arranged by Lifestyle Services Group Limited (FRN 315245) with a single provider, London General Insurance Company Limited (FRN 202689). The companies are authorised and regulated by the Financial Services Authority (FSA), which can be checked on the FSA website **www.fsa.gov.uk/register** or by phoning **0845 606 1234**. If **you** need to register a complaint, please contact the Customer Relations Department, Lifestyle Services Group Limited, PO Box 395, CREWE, CW1 6WT. If Lifestyle Services Group Limited cannot settle **your** complaint, **you** may be entitled to refer it to the Financial Ombudsman Service. **We** are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations.

Demands and Needs Statement

You are the owner of a Snooper device and believe insurance protection against it suffering theft, damage or breakdown would be beneficial to **you**. **You** have been advised of the details of the policy in the summary of cover, including the main benefits, main exclusions and limits of the cover, and are not aware of any other insurance policy that **you** currently have that makes this policy unsuitable. **You** are aware of **your** obligation to provide all material information and have made a reasoned decision on the basis of the information provided in the policy summary, and also have a period of 14 days after receiving these terms to cancel the contract if **you** wish to re-consider **your** decision.

Snooper Device Protection

Policy Document

These terms and conditions, and **your certificate** should be read as one document. Words or expressions that have a particular meaning are shown in **bold type** and shall have the same meaning wherever they may appear.

The policy, which is governed by these terms and conditions, has been brought to you by Performance Products Limited. The cover has been arranged by Lifestyle Services Group Limited who deals with the **administration** of this insurance, the collection of **your monthly payment** and the handling of claims.

The **insurer** may change these terms in certain circumstances, upon giving 30 days' notice in writing to **you** at **your** last known address. Acceptance of cover is at **our** discretion.

Your policy is based on the information **you** gave to **us** verbally or otherwise about **you** and **your** personal details when **you** applied for the insurance. These details are confirmed on **your certificate**. The terms detail what is covered and what is not covered, how claims are settled and other important policy information.

Our part of the contract is as follows:

- Cover will only apply during the **period of insurance**, the starting date being shown on **your certificate**
- **We** will continue to collect **your monthly payment** by Direct Debit until the policy is cancelled
- Where **we** attach a special meaning to a word it is shown in **bold type**
- **We** will handle claims on behalf of the **insurer**
- **We** will hold money on behalf of the **insurer**

Your part of the contract is as follows:

- **You** must pay a minimum of one month's cover in advance for each **period of insurance** of one month
- **You** must ensure that all payments due to **us** have been made without deduction or set-off
- **You** must adhere to all the conditions detailed in these terms
- If **we** do not receive **your monthly payment**, **your** cover will expire immediately
- If **you** cancel **your** Direct Debit without notifying **us**, **your** cover will expire immediately
- The **insured device** stated on the **certificate** must be **your** property or responsibility or the property or responsibility of **your family members** or staff employed by **you**

You can request another copy of these terms. They are also available in large print, audio and Braille versions. If **you** would like a copy in any of these formats, please call Customer Services on **0870 143 0403*** or write to:

Customer Services
Lifestyle Services Group Limited
PO Box 395
CREWE
CW1 6WT

Under European law, the parties to this contract may choose which law will apply to this contract. English law will apply unless both parties agree otherwise in writing prior to policy inception.

The contract is written in English and all communication by **us** with **you** will be in English.

A Definitions

Administrator/Administration

Lifestyle Services Group Limited (FRN 315245) and the **services** provided to **you**. Contact details can be found in **section O**.

Certificate

Certificate of Insurance.

Electrical or mechanical breakdown

The actual breaking or burning out of any part of the **insured device** caused by, or arising from, internal electronic, electrical or mechanical defects, or defective or faulty materials, or workmanship, causing stoppage of normal operation and necessitating immediate repair or replacement before normal operation can be resumed. **You** will not be covered during the manufacturer's warranty period.

Excess

The policy excess of £25 applies to the first claim, and £50 applies to the second claim during any 12-month period, payable by **you**.

Family members

An individual who resides at the same permanent address as **you** and which has one of the following relationships: **your** brother or sister, mother or father, grandmother or grandfather, uncle or aunt, niece or nephew, spouse, partner with whom **you** have resided for at least six (6) months, or a child of which **you** or **your** partner are the legal guardian.

Incident

Any event that may lead to a claim being made for repair or replacement of the **insured device**. Any incident involving a crime must be reported to the Police within the given timescales. **You** must obtain an incident reference number.

Insured device

The Snooper device which **you** have specified to be covered, which is identified by the **serial number** and detailed on **your certificate**.

We will cover the accessories provided in the box at the time of purchase, if they are stolen or damaged at the same time as the insured device.

Insurer

London General Insurance Company Limited (FRN 202689), whose main business is general insurance. Registered office of Combined House, 15 Wheatfield Way, Kingston Upon Thames, Surrey, KT1 2PQ, Registered Number 1865673.

Monthly payment

The monthly amount payable by **you** under the policy terms for the insurance cover and the provision of **services**.

Period of insurance

The time period for which **you** have a valid policy with the **insurer** with the **monthly payment** being paid in advance and the Direct Debit remaining in place for future payments.

Proof of purchase

The receipt provided at the point of sale that details the **insured device**, or similar documentation that provides proof that **you** own or are responsible for the **insured device**, or **your family members**, or staff employed by **you** own or are responsible for the **insured device**.

Serial number

The serial number of the **insured device** which we will use to identify it.

Services

The work we undertake for **you** in arranging the insurance and acting as an intermediary between **you** and the **insurer**.

We/Us/Our

The **administrator**.

You/Your

The person named on the **certificate**.

B Price

The cost of the policy is £2.99 or £4.99 per month depending on the Snooper model **you** have specified, the model and price will be specified on **your certificate**. This includes any taxes or additional charges which may apply.

The policy is automatically renewed each month, with the **monthly payment** being taken by Direct Debit.

If **you** wish to change the **insured device** on cover **you** must telephone **us**.

C Cover

Cover will be provided for:

1. One specified Snooper device (the **insured device**) whilst in the United Kingdom, Isle of Man and Channel Islands.
2. The cost of replacement as a direct result of theft.
3. The cost of repair (or replacement if it cannot be repaired) as a direct result of accidental damage, water or liquid damage, or malicious damage.
4. The cost of repair (or replacement if it cannot be repaired) as a direct result of **electrical or mechanical breakdown** which occurs at least 12 months after the date the **insured device** was purchased new, and after expiry of the manufacturer's warranty.
5. Two (2) accepted claims during any 12-month period.

D How to make a claim

To make a claim please contact Customer Services on **0870 143 0403***

Monday-Friday 9.00am – 6.00pm

Please have **your** policy ID number to hand. If **your** claim is for theft or malicious damage, **you** must inform the Police within 24 hours of discovery and ask for an incident reference number.

E Conditions on making a claim

1. If **you** have purchased this cover more than seven (7) days after the Snooper device was purchased (the date shown on the **proof of purchase**), **you** will be unable to make a claim for a period of 30 days after policy set-up, except for theft.
2. **You** must register a claim with **us** within 48 hours of discovering any **incident** for which **you** wish to claim by contacting Customer Services.
3. The Police must be informed within 24 hours of discovering any theft or malicious damage for which **you** wish to make a claim, obtaining an incident reference number.
4. **You** must complete and return the claim form to **us** within 14 days of receiving it, ensuring that **you** have followed the procedure detailed on the claim documentation.
5. We will advise **you** when and where **you** should send the **insured device** once we have assessed **your** claim. When **you** send the **insured device**, it must be sent by secure means. The **insured device** remains **your** responsibility until it has been received.
6. **You** must ensure that no one but **our** approved agents carry out repairs for which **you** intend to claim.
7. **You** must provide **proof of purchase** to demonstrate ownership of the **insured device**.
8. **You** must pay the policy **excess** of £25 for the first claim, and £50 for the second claim during any 12-month period.

F What will happen when your claim is approved

1. We may settle a claim for the **insured device** by repairing it, by replacing it, or by payment to **you** by cheque or BACS transfer. We will choose the method of settlement.
2. The settlement we offer for the **insured device** will be based on the current market value of the **insured device** or one of similar specification and functionality (where the **insured device** is no longer available on the general market).
3. Replacement devices will come from available stock (which may be refurbished). If the same model is not available, the replacement will be of a similar specification and quality, which will be determined by **us**.
4. If the stolen **insured device** is recovered after the claim is approved, it shall become the property of the **insurer** and must be returned to **us** immediately.
5. Damaged devices, parts and materials replaced by **us** shall become the property of the **insurer**.
6. If the **insured device** has been stolen, it may be disabled through Performance Products' security systems. Any attempt to re-register will be detected.
7. The replacement device will automatically be covered under **your** policy unless **you** have asked for it not to be covered.
8. We reserve the right to discontinue cover if **you** have made two (2) successful claims in any 12-month period. In this instance we will write to **you**.

G Important things that you and/or your family members or staff employed by you must do

1. Use the **insured device** in accordance with the manufacturer's instructions.
2. Take reasonable care to prevent theft or damage to the **insured device**. If it is considered that **you** and/or **your family members** or staff employed by **you** have not done so, **your** claim may not be accepted.
3. Advise **us** if any of **your** personal details change, or if **you** wish to change the **insured device** to be covered.
4. Inform **us** of any theft, damage or breakdown covered by **your** policy within the given timescales.
5. Advise **us** by telephone if **you** intend to cancel **your** policy or Direct Debit payment.

H Theft and damage exclusions

Cover will not be provided for:

1. Theft of the **insured device** from an unattended motor car, van, minibus, bus or lorry, unless the **insured device** is secured in a glovebox or locked boot. The vehicle must be locked and all security devices activated. Damage must be caused by the thief and evidence provided with **your** claim. Cover will not be provided if the vehicle cannot be secured against unauthorised entry.
2. If the vehicle does not have a glovebox or boot, the **insured device** will not be covered whilst the vehicle is unattended.
3. The **insured device** whilst it is in an occupied or unsecured public hire or private hire car, taxi, minibus or bus, unless the driver was in sight of the **insured device** at the time the theft or damage was caused.
4. The **insured device** whilst it is in a vehicle other than a car, van, minibus, bus or lorry (for example, a scooter or motorcycle).
5. Theft of the **insured device** from any unattended building or premises unless evidenced damage was caused in gaining entry to, or exit from, the premises.
6. Theft or damage where the **insured device** has been left unsecured in a public place or a place to which other people have access.
7. Theft or damage where the **insured device** has been passed to someone else other than **your family members** or staff employed by **you**.

I Electrical or mechanical breakdown

Cover will not be provided for:

1. Loss or damage caused by, or during, maintenance or modification of the **insured device**, unless it is carried out by **our** approved agents.
2. **Electrical or mechanical breakdown** of the **insured device** which occurs during the first 12 months after the date the **insured device** was purchased new, and whilst the **insured device** is covered under the manufacturer's warranty
3. Any breakdown or failure caused by placing or using the **insured device** in a location or environment not in accordance with the manufacturer's instructions.

J General Exclusions

Cover will not be provided for:

1. Loss of the **insured device**.
2. The policy **excess** of £25 for the first claim, and £50 for the second claim during any 12-month period.
3. Theft, damage or breakdown caused whilst the **insured device** is outside the United Kingdom, Isle of Man and Channel Islands.
4. Loss or damage to the **insured device** whilst in transit, for example, by post or courier
6. Software, faulty software, software connection problems, and loss or corruption of digital content saved to the **insured device**, however caused. It is recommended that a back-up copy of any data is kept.
6. The cost of any subscription or update service **you** subscribe to.
7. Any consequential loss (business or personal) resulting from any loss of use of the **insured device**.
8. Where the **serial number** cannot be determined and/or **proof of purchase** cannot be provided to prove ownership.
9. Damage due to wear and tear, depreciation or gradual deterioration.
10. Damage due to any process of cleaning, adjustment, repair, maintenance or dismantling unless it is carried out by **our** approved agents.
11. Installation, removal, or subsequent relocation in a vehicle, or any **electrical or mechanical breakdown** as a result of such.
12. The cost of cosmetic repairs.
13. Theft, damage or breakdown caused by war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, or insurrection by military or usurped power.
14. Theft, damage or breakdown arising out of any wilful act or negligence of the user.
15. Any claim arising from, or in connection with, the repossession of the **insured device** by any bank, finance, leasing or similar company, or person acting with such authority, and/or the confiscation or impounding of the **insured device** by any Police, Customs or Government Authority.
16. People who are not permanently resident in the United Kingdom.
17. Any consequential loss incurred by **you** during the **administration** of the policy or at the time of a claim.
18. The period of 30 days after policy set-up, except for theft, unless **you** have taken out this cover within seven (7) days of the date of purchase of the **insured device**, as stated on the **proof of purchase**.

K Cancelling the policy

1. If the policy does not meet **your** requirements, please telephone Customer Services immediately on **0870 143 0403*** or write to:
Customer Services
Lifestyle Services Group Limited
PO Box 395
CREWE
CW1 6WT
2. **You** have the right to cancel this policy within the first 14 days of receiving these terms. **We** will refund **your** payment, although if a claim has been made during this period, **you** may be required to pay for the **services** provided. The full payment will be retained if the policy is cancelled after 14 days.
3. If **you** wish to cancel this policy after the first 14 days of receiving these terms, **you** must provide at least 30 days' notice. In this event, no refund of any premium will be due.
4. If **you** change the **insured device** **you** will need to cancel this policy and take out a new policy.
5. **We** may cancel this policy with immediate effect by registered letter to **you** at **your** last known address in the event of **you** submitting any fraudulent or inaccurate information. Any refund will be at **our** discretion.
6. **We** may cancel this policy (except where point 3 applies) by providing at least 30 days notice of intention to cancel. **We** will write by registered letter to **you** at **your** last known address. **We** will not refund any payment **you** have made.
7. Cancellation or unsuccessful collection of **your** Direct Debit will be considered as a cancellation of **your** policy. **We** will attempt to collect **your** payment twice before the collection is considered unsuccessful.

L Fraud

Identity fraud is a serious problem in the United Kingdom. **Your** details will be used to help prevent fraud of this nature occurring to **you**.

If **you** receive information that **your** details have been used for fraudulent purposes, please call Customer Services on **0870 143 0403*** and ask to be transferred to the Security and Risk Management team.

Alternatively, **you** can write to:

Security and Risk Management
Lifestyle Services Group Limited
PO Box 395
CREWE
CW1 6WT

The personal details which were supplied to **us** during the application process will be used to combat fraud. These details will be retained for legal reasons for a reasonable period after **your** policy expires, and for up to one year after **your** policy expires in relation to fraud specifically. The contract between **you** and **us** is based on mutual trust. If **you** (or anyone acting for **you**):

- Make a claim under the policy knowing the claim to be false or fraudulently exaggerated in any respect
- Make a statement in support of a claim knowing the statement to be false in any respect, or submit a document in support of a claim knowing the document to be forged or false in any respect
- Make a claim in respect of any theft or damage caused by **your** wilful act, or with the intent to defraud **us** or the **insurer**

then:

- **We** shall not honour the claim
- **We** shall not honour any other claim which has been or will be made under any policy held by **you**
- **We** shall not make any return of payments made for cover and **we** may, at **our** option, cancel the policy
- **We** may be entitled to recover from **you** the cost of any claim already paid under this policy (if necessary the cost may be recovered through the instigation of court proceedings)

- We may be entitled to recover from **you** the cost of any investigation into a fraudulent claim under this policy (if necessary the cost may be recovered through the instigation of court proceedings)
- We may inform the police, government or regulatory bodies of the circumstances

Details of claims may be put onto a Register of Claims through which insurers share information to prevent fraudulent claims. A list of participants and the name and address of the operator are available on request.

M Enquiries/Complaints

We will always be fair and reasonable when handling **your** policy or claim. Should there ever be an occasion when **you** feel that **we** have not provided **you** with a satisfactory level of service, **we** would like **you** to inform **us** so that **we** can do **our** best to solve the problem. **We** will do everything possible to ensure that **your** query is dealt with promptly.

We will deal with all queries on behalf of the **insurer** and Performance Products Limited. The easiest way to contact **us** is to call **our** Customer Relations team on **0870 143 0403***

Alternatively, **you** can write to **us** at the following address, quoting **your** policy ID number in all correspondence:

**Customer Relations Department
Lifestyle Services Group Limited
PO Box 395
CREWE
CW1 6WT**

Our staff will attempt to resolve **your** query immediately. If this is not possible, **we** promise to acknowledge **your** query within five (5) working days of receiving it. In the unlikely event that **your** query has not been resolved within four (4) weeks of **our** receiving it, **we** will write and let **you** know the reasons why, and what further action **we** will take. Once **we** have resolved **your** query, **we** will confirm **our** response in writing.

If **you** are not satisfied with **our** decision, please contact **our** Customer Relations team on the above number.

If **you** have a complaint relating to the policy wording or contract, please contact the **insurer** at their registered address.

If **you** remain dissatisfied, **you** can, within six (6) months of **our** final decision, refer **your** query for an independent assessment to:

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



The parties to this contract are covered by the Financial Ombudsman Service who, once contacted, will liaise with **us** on **your** behalf. They will inform **you** directly of their decision. Referral to the Financial Ombudsman Service will not prejudice **your** right to take subsequent legal proceedings. Further information can be obtained from their website at www.financial-ombudsman.co.uk

The parties to this contract are covered by the Financial Services Compensation Scheme. In the unlikely event any of the parties to this insurance are unable to meet their liabilities, **you** may be entitled to compensation. The scheme covers 100% of the first £2000 of the claim, and 90% above this limit. Further information can be obtained from their website at www.fscs.org.uk

N Status disclosure

This cover has been brought to **you** by Performance Products Limited (FRN 458305) who is an appointed representative of Lifestyle Services Group Limited. The cover has been arranged by Lifestyle Services Group Limited (FRN 315245) with a single provider, London General Insurance Company Limited (FRN 202689). The companies are authorised and regulated by the Financial Services Authority, which can be checked on the FSA website www.fsa.gov.uk/register or by phoning **0845 606 1234**.

If **you** need to register a complaint, please contact the **Customer Relations Department, Lifestyle Services Group Limited, PO Box 395, CREWE, CW1 6WT**. If Lifestyle Services Group Limited cannot settle **your** complaint, **you** may be entitled to refer it to the Financial Ombudsman Service. **We** are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the scheme if **we** cannot meet **our** obligations.

For the purposes of the Data Protection Act 1998, the Data Controller in relation to the personal data **you** supply is Lifestyle Services Group Limited.

*0870 calls will be charged at a maximum 8p a minute from a BT line. Calls from non-BT phone lines may vary. Calls may be recorded or monitored for training/customer services purposes and/or the prevention or detection of crime.

O Other information

Performance Products Limited
Registered in England No: 3108359
Registered Office:
Cleaver House,
Sarus Court,
Stuart Road,
Manor Park,
Runcorn,
Cheshire,
WA7 1UL

Lifestyle Services Group Limited
Registered in England No. 5114385
Registered Office:
Phones 4u House, Ore Close
Lymedale Business Park
NEWCASTLE UNDER LYME
Staffordshire
ST5 9QD

London General Insurance Company Limited
Registered in England No: 1865673
Registered office:
Combined House
15 Wheatfield Way
Kingston Upon Thames
Surrey
KT1 2PQ