Insurance for Group Personal Accident

Certificate of Insurance

POLICY DETAILS

Certificate Number		B0793NM2410528/001		
Type of Cover		Personal Accident Insurance		
Policyholder		Paydesk		
Address	1	4 th Floor		
	3	3 Cavendish Square		
	L	ondon		
	V	V1G OPW		
Country	L	nited Kingdom		
Start Date:	(01/07/2024		
End Date:	3	0/06/2025		
	E	Both days inclusive at local standard time	e at the principle address of the	
	i	nsured		
BENEFITS AND	LIMITS:			
Section 1	A	Accidental death only		
Section 2	Ν	Medical expenses from an accident including medical evacuation		
	а	nd repatriation		
SUMS INSURED): Ś	100,000		
		<i>'</i>		
OPERATIVE PER	<u>KIOD:</u>			

24 hours whilst working on behalf of the contracting media groups including to and from normal place of residence



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ZONES (in which the Insured Person is afforded cover):

Global Conflict:	Covered
Conflict 2:	Covered
Conflict 3:	Covered
Conflict 4:	Covered
Conflict 5:	Covered
Rest of the world:	Covered

CONDITIONS:

As per the Insurance for group personal accident policy V5.0

DEDUCTIBLE:

\$250 each and every loss – Section 2

CHOICE OF LAW JURISDICTION:

This Insurance shall be governed by and construed in accordance with the law of England and Wales.

INSURER:

Atlas Life Insurance (PCC) Ltd which is licensed and regulated by the Seychelles Financial Services Authority.

INSURED PERSONS:

As declared by the policyholder.

PREMIUM:

As charged by the insurer.

