

SWORN POLICE INSURANCE

GL AIG 2998/08



**AMERICAN INTERNATIONAL ASSURANCE COMPANY (BERMUDA) LIMITED
trading as AIG Life**

SWORN POLICE INSURANCE POLICY NO. GL AIG 2998/08

**FOR THE PROVISION OF LIFE, TOTAL AND PERMANENT DISABLEMENT
AND CRITICAL ILLNESS INSURANCE TO INSURED PERSONS**

The *Policy* is issued by the *Company* to the *Policy Owner* described in the *Policy Schedule*.

In consideration of the *Policy Owner* paying the *Premium* the *Company* agrees, subject to the *Policy's* terms, conditions and exclusions, to pay the *Benefit* due upon proof being given, to the satisfaction of the *Company*, of:

- (1) the happening of an *Event* for which a *Benefit* is payable;
- (2) the identity of the *Insured Person* or *Partner* concerned; and
- (3) proof of the age of the *Insured Person* or *Partner*.

The *Policy* is issued in New Zealand and governed in accordance with the laws of New Zealand. All amounts referred to in the *Policy* are stated in New Zealand currency and all monies payable whether by or to the *Company* shall be payable in New Zealand currency.

Words that are in *italics* are words that have had their meaning defined. These meanings are found under the Definitions, or within a section or Schedule of the *Policy*. Any word or expression defined under the *Policy* will have the same meaning wherever it appears.

The headings used in the *Policy* are purely descriptive in nature and are not to be used for interpretative purposes.

The *Company* has caused the *Policy* to be executed as at the *Commencement Date*.

SIGNED on behalf of American
International Assurance Company
(Bermuda) Limited trading as AIG Life



Definitions

Whenever the following words or phrases are used in the *Policy* this is what they mean:

Activities of Daily Living

The activities set out in Schedule 3.

Amount Insured

The amount determined in accordance with Schedule 4.

Amount Payable

The *Amount Insured* as at the date of an *Event* subject to the *Minimum Benefit*.

Annual Salary

An *Insured Person's* basic yearly salary from *Employment* with the *Employer*. To avoid confusion this does not include any benefits or allowances.

Benefit

The *Amount Payable* upon the happening of an *Event*.

Category A Insured

A *Police Officer* or a *Police Service Employee* who:

- (i) is a member of the Police Welfare Fund Ltd; and
- (ii) has been accepted by the *Company* for *Insurance Cover*.

Category B Insured

A *Police Officer* who:

- (i) is not a member of the Police Welfare Fund Ltd; and
- (ii) has been accepted by the *Company* for *Insurance Cover*.

Claim

Written notice given to the *Company* by the *Policy Owner*, of an *Event* that may give rise to payment of a *Benefit* under the *Policy*.

Company

American International Assurance Company (Bermuda) Limited (New Zealand Branch) trading as AIG Life. We or us or AIG Life shall also mean the *Company*.

Continuation Cover

The *Benefits* under the Police Welfare Fund General Insurances Limited Supplementary Life Insurance Plan for an *Insured Person* and/or *Partner* following election of the Continuation Option in accordance with clause 8.

Critical Illness

Limited to the following *Illnesses*, each individually defined in Schedule 2:

• Accidentally Acquired HIV	• Major Burns
• Alzheimer's Disease	• Major Head Trauma
• Blindness	• Major Organ Transplant
• Chronic Liver Failure	• Multiple Sclerosis
• Chronic Lung Disease	• Muscular Dystrophy
• Coma	• Paralysis
• Coronary Artery Bypass Surgery	• Parkinson's Disease
• Critical Cancer	• Permanent Loss of Hearing
• Heart Attack	• Permanent Loss of Speech
• Heart Valve Surgery	• Pulmonary Arterial Hypertension (Primary)
• Kidney Failure	• Stroke
• Loss of Independence	• Surgery to the Aorta



Day

Any day of the week including a weekend or public holiday in New Zealand.

Diagnosis / Diagnosed

The first definitive *Diagnosis* made in writing by a *Medical Practitioner* based upon specific evidence, or in the absence of such specific evidence, based upon radiological, clinical, histological or laboratory evidence, acceptable to the *Company*.

Where specified in the definition of certain *Critical Illnesses* in Schedule 2, specialist *Diagnosis* must be obtained.

In the event of any doubt regarding the appropriateness or correctness of the *Diagnosis*, the *Company* will have the right to have an independent acknowledged expert in the relevant field of medicine, selected by the *Company* and at the *Company's* expense, examine the *Insured Person* or the evidence used at arriving at the *Diagnosis*. The opinion of such expert as to the *Diagnosis* will be binding on the *Policy Owner*, the *Insured Person* and the *Company*.

Employer

The Crown acting for the New Zealand Commissioner of Police and where the context so permits shall include any New Zealand Police Service Organisation as may be agreed from time to time between the *Policy Owner* and the *Company*.

Employment

Formal engagement on a permanent basis with the *Employer* for which an *Annual Salary* is received, not including any periods of *Leave without Pay*.

Event

In relation to:

- (a) the *Life or Terminal Illness Benefit*: the death or *Diagnosis* of a *Terminal Illness* of an *Insured Person* or *Partner*.
- (b) the *Total and Permanent Disablement Benefit*: the *Total and Permanent Disablement* of an *Insured Person*.
- (c) the *Critical Illness Benefit*: the *Diagnosis* of a *Critical Illness* of an *Insured Person*.

Evidence of Insurability

Information (including but not limited to health information) material to the *Insurance Cover* sought, together with such other particulars as required by the *Company*, to enable the *Company* to determine whether to accept an *Insured Person* and/or *Partner* for *Insurance Cover* (or a variation of such) and if so, what the terms, conditions and exclusions of such *Insurance Cover* will be.

Illness

Illness, sickness, disease or debilitating or degenerative condition that is not an *Injury*.

Injury

External or internal bodily injury caused, independently of any other cause, solely and directly by violent, accidental, external and visible means.

Insurance Cover

The *Benefits* under the *Policy* for a particular *Insured Person* including, if applicable, *Partner Cover*.

Insurance Profit

The amount determined in accordance with Schedule 6.

Insured Person

A person who is a *Police Officer* or a *Police Service Employee* and has *Insurance Cover* under the *Policy*.

Last Day of Duty

The last *Day of Employment* on which an *Insured Person* is actively at work and performing the normal duties of his/her *Employment*.

Leave Without Pay

A period of leave approved by the *Employer* during which an *Insured Person* is not in receipt of an *Annual Salary*.

Medical Practitioner

A person approved by the *Company*, registered with the Medical Council of New Zealand to render medical or surgical services, and who holds an Annual Practising Certificate. For *Diagnoses* made outside New Zealand, the definition of *Medical Practitioner* shall mean any appropriately qualified medical practitioner approved by the *Company*. It does not include an *Insured Person*, *Partner* or any immediate family member, colleague or business partner of the *Insured Person* or *Partner*.



Minimum Benefit

The minimum *Benefit* payable for a *Claim* as set out in Schedule 5.

Partner

A spouse, de facto partner or civil union partner (as those terms are defined in the Property (Relationships) Act 1976) of a *Category A Insured*.

Partner Cover

A *Partner Life Benefit* for a *Category A Insured*.

Police Officer

A person who is:

- (a) in the *Employment* of the *Employer*; and
- (b) in receipt of an *Annual Salary* or is on *Leave Without Pay*; and
- (c) either:
 - (i) a Constable as defined in the Policing Act 2008; or
 - (ii) a person or one of a group of people, agreed upon by the *Company* and the *Policy Owner*, and specified in Schedule 7 attached.

Police Service Employee

A person who is:

- (a) in the *Employment* of a New Zealand Police Service Organisation included as an *Employer* under the *Policy* as agreed by the *Policy Owner* and the *Company*; and
- (b) in receipt of an *Annual Salary* or is on *Leave Without Pay*.

Policy

The Sworn Police Policy No. GL AIG 2998/08, together with the Schedules attached, the *Policy Schedule*, the application of the *Policy Owner* and any amendments.

Premium

The fortnightly amount calculated in accordance with the formula on the *Policy Schedule*.

Profit Share

The division of the *Insurance Profit* from the *Policy*, between the *Company* and the *Policy Owner*, as calculated by the formula set out in Schedule 6.

Terminal Illness

An *Illness*, *Diagnosed* by a *Medical Practitioner*, as being likely to result in the death of an *Insured Person* or *Partner* within twelve (12) months of *Diagnosis*.

Total and Permanent Disablement

For *Insured Persons* aged sixty four (64) years or younger either:

- (a) the loss of two limbs or the sight of both eyes or the loss of one limb and the sight of one eye (where limb is defined as the whole hand or the whole foot and loss means loss by permanent severance or irrecoverable use);

or

- (b) a disability suffered solely through *Injury* or *Illness* which has prevented the *Insured Person* from engaging in the normal duties of his/her *Employment* for a continuous period of six (6) months and which in the opinion of the *Company*, after the *Insured Person* has undergone all reasonable treatment, including rehabilitation, and after consideration of all medical evidence, has rendered the *Insured Person* incapable of ever again attending to the normal duties of his/her *Employment* or to any occupation for which he/she is fitted by knowledge, training or experience.

For *Insured Persons* aged between sixty five (65) and seventy (70) years:

- (a) to be constantly and permanently unable to perform at least two of the *Activities of Daily Living* without the physical assistance of someone else (if the *Insured Person* can perform the activity on their own by using special equipment, the *Company* will not treat the *Insured Person* as unable to perform that activity).

Whole Person Function

As defined in the American Medical Association publication '*Guides to the Evaluation of Permanent Impairment*' 4th Edition.



General Conditions

1. Commencement of Cover

1.1 Police Officers

- (a) a *Police Officer* commencing *Employment* for the first time will automatically be accepted under the *Policy* as a *Category B Insured* without clause 3 below applying.
- (b) subject to clauses 1.1(c) and 1.1(d) below, an application by a *Police Officer* to become a *Category A Insured* must be in accordance with clause 3 below.
- (c) a *Police Officer* who is required to complete training at the Royal New Zealand Police College may, from the *Day* of commencement of the training up to the first *Day* of the *Police Officer's* first posting at a Station in New Zealand, elect to become a *Category A Insured* without clause 3 below applying.
- (d) a *Police Officer* who is not required to complete training at the Royal New Zealand Police College may, within ninety (90) *Days* of commencing *Employment* for the first time, elect to become a *Category A Insured* without clause 3 below applying.

1.2 Police Service Employees

- (a) a *Police Service Employee* may only apply to be a *Category A Insured* under the *Policy*. Subject to clause 1.2(b) below, an application by a *Police Service Employee* to become a *Category A Insured* must be in accordance with clause 3 below.
- (b) a *Police Service Employee* may, within ninety (90) *Days* of commencing *Employment* for the first time, elect to become a *Category A Insured* without clause 3 below applying.

1.3 On each *Due Date* the *Policy Owner* will notify the *Company* in writing of the total number of both *Category A Insureds* and *Category B Insureds*.

2. Nomination of a Partner

2.1 A *Category A Insured* may nominate one (1) *Partner* at any one time for *Partner Cover* for the *Amount Insured* provided that the *Partner* is less than seventy (70) years of age. Subject to clause 2.2 below, an application by a *Category A Insured* to nominate a *Partner* for *Partner Cover*, must be in accordance with clause 3 below.

2.2 An *Insured Person* electing to become a *Category A Insured* pursuant to clause 1.1(b), 1.1(c) or 1.2(b) above may, at the time of election, nominate a *Partner* for *Partner Cover* without having to comply with clause 3 below.

2.3 The *Partner Cover* may be cancelled at any time by the *Category A Insured* giving written notice to the *Policy Owner*. Any nomination, variation or cancellation of the *Partner Cover* by the *Category A Insured* must be made in writing in a form prescribed by the *Policy Owner* and agreed to by the *Company* from time to time.

3. Application for, or Variation of, Cover

3.1 A *Police Officer* or a *Police Service Employee* may at any time, by written application to the *Company*, apply for *Insurance Cover* or vary his/her *Insurance Cover* including any *Partner Cover*. Variations may include but are not limited to:

- (a) changing from a *Category B Insured* to a *Category A Insured* (*Police Officers* only),
- (b) the addition of *Partner Cover* for a *Category A Insured*,
- (c) a *Category A Insured* changing their nominated *Partner*.

3.2 The *Company* in determining whether to accept the application may require *Evidence of Insurability* from the *Police Officer* or *Police Service Employee*. In addition to any request from the *Company*, when applying for or varying their *Insurance Cover*, a *Police Officer* or *Police Service Employee* is under a duty to disclose all material information to the *Company* whether asked for or not (**Duty Of Disclosure**). If the *Duty of Disclosure* is breached the *Company* may avoid the *Insurance Cover* for that particular *Insured Person* or, if a variation, the variation of the *Insurance Cover*.

3.3 If the *Company* accepts the application:

- (a) the *Company* may apply special terms, conditions, exclusions and/or premium to the *Insurance Cover* or variation of such; and
- (b) the *Company* will notify the *Policy Owner* of its acceptance and any special terms, conditions, exclusions and/or premium to be applied; and
- (c) the *Insurance Cover* or variation will commence on the date of acceptance or such other date as the *Company* may nominate.

4. Premium Payment

4.1 The *Premium* is payable by the *Policy Owner* to the *Company* fortnightly on a *Day* agreed upon by the *Policy Owner* and *Company* from time to time (the **Due Date**).



5. Default

- 5.1 If the *Premium* is not paid on the *Due Date (Default)*, the *Policy Owner* has thirty (30) *Days* during which to rectify the *Default (Default Period)*, whilst continuing to pay the further *Premium* due on each subsequent *Due Date*. If, during the *Default Period* a *Claim* arises, no *Benefit* will be payable until the *Default* is rectified.
- 5.2 If the *Default* is not rectified within thirty (30) *Days* from the *Due Date*, the *Company* will give the *Policy Owner* notice of intention to lapse the *Policy*. If, the *Default* has not been paid within thirty (30) *Days* from the date of the notice of intention to lapse the *Policy*, the *Policy* will automatically lapse and all *Benefits* will be deemed forfeited from the date of the *Default*. Any *Claims* arising after the day of *Default* will not be payable.
- 5.3 Within ninety (90) *Days* of the *Policy* lapsing, the *Policy* may be reinstated on the same terms and conditions as prior to the *Default*, subject to:
- the *Company's* written consent to reinstatement,
 - payment of the total amount of *Premium* outstanding for the period from *Default* to reinstatement,
 - any such *Evidence of Insurability* as the *Company* may require from the *Policy Owner* as to the health and eligibility for *Insurance Cover* of any or all *Insured Persons* and *Partners*,
 - the *Company* applying any such special terms, conditions, exclusions and/or premium in regards to any alteration in the circumstances or health of any *Insured Person* or *Partner* since the *Default*,
 - any *Claims* arising between the *Default* and reinstatement of the *Policy* being payable.

6. Termination of Cover

- 6.1 The *Insurance Cover* for an *Insured Person* will automatically terminate on the earlier of:
- the seventieth (70th) birthday of the *Insured Person*; or
 - the date on which a *Benefit* is paid for an *Event* involving the *Insured Person*; or
 - the date on which the *Insured Person* commences a period of *Leave Without Pay*; or
 - the date of termination of the *Policy*; or
 - the latter of:
 - the date the *Policy Owner* receives notice (either oral or written) of the *Insured Person's* intention to cease *Employment* for any reason other than those listed at 6.1 (a) to (d) above; or
 - the *Insured Person's Last Day of Duty*.
- 6.2 The *Partner Cover* for the nominated *Partner* of a *Category A Insured* will automatically terminate on the earlier of:
- the seventieth (70th) birthday of the *Partner*; or
 - termination of the *Category A Insured's Insurance Cover* in accordance with clause 6.1; or
 - the date of cancellation of the *Partner Cover*, in accordance with clause 2.3; or
 - the date of notice of change of *Partner* in accordance with clause 3; or
 - the date of termination of the *Policy*; or
 - the death of the *Partner*.
- 6.3 With effect from the date of termination:
- no further *Premium* will be payable for the *Insured Person's Insurance Cover* from the next in time *Due Date*,
 - all *Benefits* of the *Insurance Cover* will become nil,
 - a *Benefit* will only be payable for an *Event* which occurred prior to the date of termination, subject to the death of an *Insured Person* or *Partner* being the reason for termination.

7. Leave Without Pay

- 7.1 Notwithstanding clause 6.1 (c) above, if an *Insured Person* commences a period of *Leave Without Pay*, the *Company* may, at its discretion, agree to continue the *Insurance Cover* during the period of *Leave Without Pay*.
- 7.2 Without limiting in any way the *Company's* right of discretion in deciding whether to agree to a continuation of *Insurance Cover* for an *Insured Person* on *Leave Without Pay*, it is a condition precedent to any continuation of *Insurance Cover* that:
- at least 14 *Days* prior to the period of *Leave Without Pay* commencing, the *Company* receives written notice from either the *Insured Person* or the *Policy Owner* as to:
 - the intention of the *Insured Person* to take *Leave without Pay*,
 - the date of commencement of *Leave Without Pay*,
 - details of the *Insured Person's* proposed activities during the period of *Leave Without Pay*,
 - the total expected period of *Leave Without Pay*.
 - the *Company* gives its written agreement to the continuation of *Insurance Cover* during the period of *Leave Without Pay*.



- 7.3 If the *Company* agrees to the continuation of the *Insurance Cover*, the terms, conditions and exclusions of the *Policy* (including the *Premium* due on each *Due Date*) will continue to apply to the *Insured Person's Insurance Cover*, subject to any special terms, conditions, exclusions and/or premium applied by the *Company* for the period of *Leave Without Pay*.
- 7.4 If the *Company* decides not to continue the *Insurance Cover* during the period an *Insured Person* is on *Leave Without Pay* or if clause 7.2 above is not complied with in full, the *Insurance Cover* will terminate upon the commencement of the period of *Leave Without Pay* in accordance with clause 6.1(c) above. Upon the return of the *Insured Person* to *Employment*, the *Insured Person* will be required to apply for *Insurance Cover* in accordance with clause 3 above.

8. Continuation Option

- 8.1 If the *Insurance Cover* for an *Insured Person* terminates for the first time in accordance with clause 6.1(e) above, and the *Insured Person* is under the age of sixty five (65) years, the *Insured Person* is entitled, within sixty (60) *Days* of the date of termination, to apply for *Continuation Cover* under the Police Welfare Fund General Insurances Limited Supplementary Insurance Plan (the **Supplementary Policy**).
- 8.2 If an *Insured Person* is entitled under clause 8.1 above to apply for *Continuation Cover* and at the date of termination of his/her *Insurance Cover* was a *Category A Insured* and had *Partner Cover* for a nominated *Partner*, the *Partner* is also entitled to apply for *Continuation Cover* under the *Supplementary Policy*.
- 8.3 The offer of *Continuation Cover* is only available to *Insured Persons* or *Partners* who do not have, and have never had, *Continuation Cover* under the *Supplementary Policy*.
- 8.4 The terms and conditions of the offer of *Continuation Cover* are:
- (a) for eligible *Insured Persons*:
 - (i) under the age of sixty (60) years, *Benefits* include *Life* and *Critical Illness*,
 - (ii) over the age of sixty (60) years but under sixty five (65) years, a *Life Benefit* only.
 - (b) for eligible *Partners*, a *Life Benefit* only.
 - (c) the *Amount Insured* will not in any circumstances exceed the *Amount Insured* for the *Insured Person* (and if applicable the *Partner*) at the date the *Insurance Cover* terminated.
 - (d) the *Premium* to be paid by the *Insured Person* (and if applicable the *Partner*) will be subject to the rate charged in accordance with their age at the date of election to apply for *Continuation Cover*.
 - (e) the *Continuation Cover* will be subject to the standard terms, conditions and/or exclusions of the *Supplementary Policy* as well as any special terms, conditions and/or exclusions applied by the *Company*.
 - (f) prior to acceptance of the *Continuation Cover* the *Insured Person* (and if applicable the *Partner*) must provide the *Company* with:
 - (i) such evidence of health (including blood tests) in relation to possible infection with the human immunodeficiency virus (HIV) and/or AIDS, as shall be acceptable to the *Company*; and
 - (ii) where the *Premium* of the *Supplementary Policy* selected is subject to variation based on the smoking habits of the *Insured Person* (and if applicable the *Partner*), such declaration as the *Company* may require.

9. Claims

- 9.1 The *Policy Owner* will give notice to the *Company*, in the form prescribed by the *Company*, of any *Event* which may give rise to a *Claim* under the *Policy*, within six (6) months of the occurrence of such *Event*.
- 9.2 If a *Claim* is made under the *Policy*, the *Policy Owner*, the *Insured Person* and/or the *Partner* must provide the *Company* with any information and/or assistance it requires in assessing the *Claim*. This may include the *Company* instructing a *Medical Practitioner* and/or an independent acknowledged expert in the relevant field of medicine, to examine at its expense, the *Insured Person* or any information provided in support of a *Claim*.

10. Fraud

- 10.1 If any *Claim* is in any respect fraudulent or if any false declaration is made or false or incorrect information is used in support of a *Claim*, the *Company* will not pay the *Claim* and the *Insured Person's Insurance Cover* will be immediately terminated.

11. Claims Discharge

- 11.1 Every *Benefit* payable hereunder will be paid by the *Company* to the *Policy Owner* at its Head Office or at such other Branch Office of the *Policy Owner* as may be selected by the *Policy Owner* or to such person or persons as the *Policy Owner* may by notice in writing to the *Company* direct, and the receipt by the *Policy Owner* or any such person or persons of the *Amount Payable* will be an absolute discharge to the *Company* and shall be final and conclusive evidence for all purposes that the *Benefit* has been duly paid to and received by the person lawfully entitled thereto and all claims and demands whatsoever against the *Company* in respect of such money have been fully and truly satisfied and discharged.



12. Policy Amendment

12.1 The *Company* reserves the right to amend, from time to time, the terms, conditions and/or exclusions of the *Policy* including those contained in the *Policy Schedule* and Schedules to the *Policy*, upon giving ninety (90) *Days* notice in writing to the *Policy Owner* of its intention to do so.

13. Worldwide Cover

13.1 The *Insurance Cover* provided by the *Policy* is 24-hour worldwide cover for all *Insured Persons* normally residing in New Zealand.

13.2 If an *Insured Person* is temporarily residing outside New Zealand, then subject to the *Premium* continuing to be paid, the *Insurance Cover* will continue for up to two (2) years from the date of first departure from New Zealand. Temporary visits back to New Zealand of less than sixty (60) *Days* will not constitute an *Insured Person* returning to reside in New Zealand.

13.3 If an *Insured Person* is temporarily residing outside New Zealand for longer than two (2) years, the *Company* will be entitled to (including retrospectively) apply such special terms, conditions, exclusions and/or additional *Premium* or *Premium* loading to the *Insurance Cover* as it sees fit in the circumstances, having regard to the nature and location of the overseas residency.

14. War Provision

14.1 In the event of war (whether declared or undeclared) or any act of invasion, in any way involving a country in which an *Insured Person* is located due to his/her *Employment*, the *Insurance Cover* will continue subject to the *Company* being entitled to (including retrospectively) apply such special *Premium* on the *Insurance Cover* as it sees fit in the circumstances, having regard to the nature and location of the war or act of invasion. If the increased *Premium* is not paid when required by the *Company*, any *Claim* directly or indirectly arising out of or in any way connected to, such war or invasion will not be payable.

14.2 Notwithstanding clause 14.1, should an *Insured Person* and/or *Partner* be located in a country for less than seven (7) *Days* following the initial outbreak of war (whether declared or undeclared) or any act of invasion, the *Insurance Cover* will continue without any special *Premium* being applied.

15. Policy Termination

15.1 The *Company* or the *Policy Owner* may terminate the *Policy* by giving the other party ninety (90) *Days* notice in writing. At the date of termination of the *Policy*:

- (a) the *Company* will prepare a statement of *Premium* detailing all *Premium* payable by or refundable to the *Policy Owner*
- (b) all *Benefits* under the policy will cease and no *Insurance Cover* will be provided by the *Policy* on any ongoing basis
- (c) the *Company* will prepare a statement of the *Profit Share* for the period from the *Policy Commencement Date* (or any subsequent *Renewal Date*) to the date of termination detailing the *Profit Share* payable by, or refundable to, the *Company* in accordance with the formula set out in Schedule 6.

16. Rates Guarantee

16.1 The *Company* guarantees the *Premium* rates for a period of two (2) years from the *Policy Commencement Date* provided that:

- (a) the number of *Insured Persons* does not fluctuate by more than 20%; and
- (b) the insurance formula for cover does not change.

17. Exclusions

17.1 A *Total and Permanent Disablement Benefit* or *Critical Illness Benefit* is not payable for any *Claim* where an *Insured Person* ceasing *Employment* pursuant to Sections 74 or 76 of the Policing Act 2008, was directly or indirectly caused by or resulted from:

- (a) any intentionally self-inflicted *Injury* or attempt at suicide, whether the *Insured Person* is sane or insane
- (b) subject to clause 14 above, war, whether declared or not, or any act of war or invasion
- (c) alcoholism, drug or substance abuse.

17.2 A *Critical Illness Benefit* is not payable for any *Claim* where an *Insured Person* ceasing *Employment* pursuant to Sections 74 or 76 of the Policing Act 2008, was directly or indirectly caused by or in any way involved:

- (a) any psychological condition, whether arising from the *Insured Person's Employment* or from any other cause.

