

Medical Equipment Cover



Premium Rate: £19.00 for every £500 (or part thereof)

Minimum Cover: £500.00

Minimum Premium: £19.00

Maximum Cover: £3000.00

Maximum Premium: £114.00

POLICY WORDING

What is covered

- **1.** If your medical equipment is lost, destroyed or stolen, we will pay you up to the value of the equipment not exceeding the sum insured shown in the schedule.
- **2.** If your medical equipment is damaged, you will be covered for repair costs up to the sum insured shown in the schedule.
- **3.** If your medical equipment is lost, destroyed, or stolen, you can **alternatively** be covered for the cost of hiring a replacement, where possible, up to the sum insured shown in the schedule.
- **4.** If your medical equipment is damaged, you can **alternatively** be covered for the cost of hiring a replacement, where possible. The hire cost and repair combined will be paid up to the sum insured shown in the schedule.

What is not covered

- 1. Any amount over & above the sum insured shown on the schedule.
- **2.** Where hire charges are claimed for in the event of the medical equipment being lost, destroyed or stolen, the maximum amount payable for the combination of both hire & replacement shall not exceed the sum insured shown on the schedule.

- **3** Where hire charges are claimed for in the event of the medical equipment being damaged the maximum amount payable for the combination of both hire & repair shall not exceed the sum insured shown on the schedule.
- **4.** The first £75 of any claim for repair or replacement costs, representing the policy excess applicable under this policy.
- **5 (a).** Loss or theft of or damage to the medical equipment during your outward or return journey if you do not obtain a written "carriers report" or "Property Irregularity Report (PIR)" in the case of an Airline. If you cannot report the loss, theft or damage to the carrier straight away, then you must do so within 7 days.
- **5 (b).** Loss or theft of or damage (if caused by a third party) to the medical equipment at any other time if you do not report the matter to the Police within 24 hours of the incident and obtain a police report.
- **5 (c).** Cover would not apply for items that have not been serviced correctly, for manufacturers faults, or mechanical failure, wear & tear, moths, vermin, weather and atmospheric conditions
- **5 (d).** Cover would not apply for items that have been left in or on a vehicle overnight.
- **6.** You are not covered for claims for which you receive compensation from someone else.

Conditions

- 1. You must take proper care of this equipment as if you were not covered under this policy.
- **2.** You must retain the damaged equipment so that we may inspect it. After payment of a claim, the equipment will become our property.
- **3.** The sum insured under this policy must be a reasonable and accurate valuation of the equipment insured. Whilst it is acceptable to increase the sum insured to take into account possible hire costs that may be necessary, you will not obtain any payment for the equipment which exceeds the retail value of the equipment up to a maximum of the sum insured.
- **4.** The sum insured under this policy must be a reasonable and accurate valuation of the equipment insured. In the event of a claim for damage, where the value of the equipment exceeds the sum insured, payment for repair will be made proportional to the premium paid. Where the claim is for total loss, you will not obtain any payment for the equipment which exceeds the sum insured.



Medical Equipment Cover Customer Equipment Information

CERTIFICATE NUMBER: MIA/MTIC/ROCK/00001

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Owners Details (Hospital/Group)

NAME:

ADDRESS LINE 1: ADDRESS LINE 2:

TOWN: COUNTY: POST CODE: TEL NUMBER: FAX NUMBER:

Borrowers Details

NAME:

ADDRESS LINE 1: ADDRESS LINE 2:

TOWN:
COUNTY:
POST CODE:
TEL NUMBER:
MOBILE NUMBER:
Equipment Details

DESCRIPTION OF ITEM:

MAKE OF ITEM:

MODEL NUMBER OF ITEM:

COVER START DATE:

COVER END DATE:

VALUE: £
AMOUNT PAID: £
Excess (Amount to be paid by the insured) £75