

Deana D'Monte  
76 Millfield  
Folkestone  
CT18 7DQ

20 April 2018

Dear Deana,

Welcome to Beagle Street

We hope you've found our service quick and easy to use so far. As an online alternative to the traditional world of life insurance we want to make it as simple, transparent and affordable as possible. Please find enclosed a copy of your policy for future reference. This is also backed up by a virtual copy, which is stored for safe keeping in your online account to ensure it is never lost.

We want to make it as easy as possible for your friends and family to claim if you die; as sitting on unclaimed money is morally wrong. So to help us, there are just two things you need to do as a new Beagle Street customer:

- Visit [www.beaglestreet.com](http://www.beaglestreet.com) to log in to your account, if you haven't already done so

You can refer to your account at any time to see the details of your cover. You can also have a look at the free extras available to you as a Beagle Street customer which we hope you'll find useful now or in the future.

- Read the [Policy Schedule, Payment Details and Statement of Facts](#) enclosed

Please check and let us know if anything is missing, incorrect or doesn't look quite right. This step is important because we refer back to these details if and when you need to claim. Failure to disclose correct and complete information may result in a claim not being paid or your policy being cancelled.

If you have any questions or need to call us our number is 0800 0582929

[Mon-Fri 8:00am - 9:00pm, Sat 9:00am - 5:00pm, Sun 10:00am - 3:30pm].

Thank you for choosing Beagle Street.

Yours sincerely



Matthew Gledhill  
Managing Director



## Deana D'Monte

Your policy number is

**128939019**

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You have a 20 year policy for £75,000 of life cover that decreases gradually over the term.

This expires on

**19 April 2038**

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If you or your dependents need to make a claim call

**0800 0729831**

**Deana D'Monte, your Beagle Street policy number is 128939019**

### **Your Payment Details and Policy Schedule are below**

Please take a few minutes to read how much your cover costs, the date each month that we'll take payment and a summary of your cover. If you see anything wrong or if you come across any unexpected details please call us to let us know.

If you have any more queries about your cover there's detailed information in your terms and conditions booklet.

**Your cover cost per month** **£11.49**

### **This works out as:**

Life insurance £11.49

You'll be paying £11.49 by direct debit from this bank account below:

Account holder	Ms D D'Monte
Account number	****3759
Sort code	11-01-02

Your first payment will be taken on or around 02 May 2018, then all future payments will be taken on or around the 15th day of each month, until your last payment on 20 March 2038.

### **Refunds**

We will pay any refund due to the bank account we hold on file.

### **Direct Debit Guarantee**

This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits. If there are any changes to the amount, date or frequency of your Direct Debit, BISL Limited will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request BISL Limited to collect a payment, confirmation of the amount and date will be given to you at the time of the request. If an error is made in the payment of your Direct Debit, by BISL Limited or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society. If you receive a refund you are not entitled to, you must pay it back when BISL Limited asks you to. You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

Name: Deana  
D'Monte  
Date of birth: 06 April 1968  
Mobile phone number: -  
Other contact number: 07999250495  
Address: 76 Millfield, Folkestone, CT18 7DQ

## Cover details

You have Decreasing term life insurance Cover: £75,000

Your cover runs for 20 years  
Starting 20 April 2018  
Ending 19 April 2038

The lump sum we'll pay out if you die reduces every month and is designed to pay off the balance on the diminishing household debts or costs you have. For example, the amount you owe on a mortgage with a 6% interest rate will reduce over time and so will your life cover. To see how this works for your household log in to your account at [www.beaglestreet.com](http://www.beaglestreet.com) to view your cover.

## When is it time to claim?

Life insurance: the policyholder dies or is diagnosed with a terminal illness

Is anything excluded from your policy ?

There are no exclusions

## Deana D'Monte, here is your Statement of Facts

This is what you've told us about yourself and what we've based your cover and premiums on. Please take a few minutes to check it. If there are any mistakes, inaccuracies or omissions it may invalidate your cover so call us immediately on 0800 0582929. We'll let you know of any changes we need to make to your cover and/or premium as a result.

You answered 'yes' to confirm that you are a UK resident, that you are not awaiting the results of any medical tests or need to have any medical tests, and that the maximum sum we can assure for a person of your age has not been exceeded by this cover. You also confirmed that in the last 3 months you have not noticed or been made aware of; any breast, testicular or skin changes including but not limited to a lump, swelling, firmness or hardening; a mole that's changed in appearance or required monitoring; any unexplained bleeding or weight loss; a cough that has lasted more than 3 weeks.

This is an important document and should be read with your policy schedule and terms and conditions.

### Measurements

Height in feet	5
Height in inches	4
Weight in stone	12
Weight in pounds	9
Dress/skirt size	18

### Tobacco & Alcohol

Have you used any tobacco products or nicotine replacement products (including e-cigarettes) in the last 12 months? No

In the last 5 years, have you used any of the following?  
Recreational drugs (for example, ecstasy, cocaine, cannabis); No  
Sedatives, stimulants or anabolic steroids not prescribed by a doctor

Do you regularly drink alcohol? No

### Future Travel

During the last 2 years have you lived for more than 3 months in Africa, Thailand or the Caribbean? No

During the next 2 years do you intend to spend more than 3 months at any one time outside the UK? No

### **Medical Information (1)**

A positive test for HIV or Hepatitis B or C or are you awaiting the results of such a test? No

Diabetes mellitus or sugar in the urine? No

Heart attack, angina, cardiomyopathy or any other heart condition? No

Stroke, subarachnoid haemorrhage (brain bleed) or narrowing of the arteries in the neck or head? No

### **Medical Information (2)**

Cancer, leukaemia, Hodgkin's disease, lymphoma, brain or spinal tumour? No

Multiple sclerosis, optic neuritis, paralysis or other disorder of the nervous system (brain, spinal cord or nerves)? No

Mental illness leading to a suicide attempt, self harm or hospitalisation? No

### **Medical Information (3)**

Had treatment or advice for an irregular heartbeat, raised blood pressure or cholesterol? No

Had asthma, recurrent bronchitis, emphysema or chronic obstructive pulmonary disease? No

Had any disorder of the liver, stomach, oesophagus or pancreas? No

### **Medical Information (4)**

Had any kidney, bladder, prostate disorder or urinary symptoms? No

Had depression, anxiety, stress, eating disorder, chronic fatigue or nervous breakdown? No

Seen a doctor for double vision, numbness, tingling or pins and needles? No

Been given medical advice to reduce your alcohol consumption? No

### Medical Information (5)

Suffered from any recurrent or persisting symptoms affecting your eyes or ears?	No
Had a lump or growth of any kind or a mole or freckle that has bled, changed colour or become painful?	No
Suffered from colitis, ulcerative colitis, Crohn's disease or bowel disorder?	No
Had any type of anaemia, haemochromatosis, thrombocytopenia, polycythaemia, haemophilia or other blood condition?	Yes
Please select your condition(s) from the following list (for multiple conditions please add one at a time)	Anaemia

### Anaemia

What type of anaemia do you or have you had? Iron Deficiency anaemia

### Iron Deficiency Anaemia Female

Have you been told the anaemia is due to menstrual loss, pregnancy or diet?	No
Are you under investigation or awaiting results of tests for your anaemia?	No
Have you been told that your anaemia is due to another medical condition?	No
Are you now no longer on treatment with no planned follow up?	Yes

### Medical Information (6)

Had gout, epilepsy, arthritis, reflux, hernia, irritable bowel syndrome, gall bladder disorder, thyroid disorder or deep vein thrombosis?	No
Been prescribed treatment (which lasted for more than 1 month) for any other condition?	Yes
Been under review or follow up or had any test or investigation for any other condition or symptom?	No
Please select your condition(s) from the following list (for multiple conditions please add one at a time)	Other

Please type the condition you are searching for and select each one that applies

Fibromyalgia

### **Soft Tissue Disorder**

When did you last have symptoms or seek medical advice or treatment for this problem?

3 years or more

### **Family History**

Alzheimer's

Multiple sclerosis

Cancer (including polyposis of colon)

Heart attack or Stroke

Diabetes

Huntington's disease

Polycystic kidney disease

Parkinson's disease

Motor neurone disease

None of the above

Don't know (e.g. adopted or estranged)

You Selected

Don't know (e.g. adopted or estranged)

### **Occupation**

Membership of the armed forces, territorial army or reservists?

Any non military aviation, pilot or crew (other than as a fare paying passenger)?

Any commercial diving?

Any offshore work on gas or oil platforms?

Any offshore fishing?

Working above ground level at heights of more than 15 metres (50 feet)?

Any work involving the use of explosives?

None of the above

You Selected

None of the above



