



Jayesh Mistry
Westbourne Park Garage

“I didn't expect to have an **accident** but when I did the **money** from the friendly society was a **life saver**”



Davinder Chaand
Hounslow Heath Garage

“I've taken out a **savings plan** for **each of my kids**, when the plans pay out they'll be glad I did”



Malcolm Baker
Thornton Heath Garage

“I was really **pleased** with the payout on **my savings plan**, so pleased I've taken out another one”



sickness
and hospitalisation benefit



IMPORTANT INFORMATION

How much will the advice cost?

TFS does not give advice about its products but is happy to answer any factual questions you may have so that you can make an informed decision.

It is your responsibility to ensure the plan/product you choose meets your needs.

If you are unsure as to the suitability of a financial product you should contact an independent financial adviser. If you were introduced by a Registered Introducer that person may be entitled to a fee of £7.50.

Your right to cancel

We offer a cancellation period of 30 days which starts from when you receive your policy document and cancellation notice. If you decide to cancel you will receive a full unconditional refund of any premiums paid.

Complaints procedure

If you wish to complain about any aspect of the service you receive from the TFS please contact us at the address below. If the complaint is not dealt with to your satisfaction you can refer your complaint to the Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR (telephone 0845 080 1800). Complaining to the ombudsman will not affect your legal rights.

Compensation

If the Transport Friendly Society is unable to meet its liabilities, compensation may be payable by the Financial Services Compensation Scheme. Further information on the scheme is available from the Financial Services Compensation Scheme on 020 7892 7300 www.fscs.org.uk.

Law

In any legal disputes, the law of England will apply.

Regulation

The TFS is authorised and regulated by the Financial Services Authority and registered and incorporated under the Friendly Societies Act 1992, register number 434F. When you take out a policy with TFS you become a member of the Society and are subject to its rules, a copy of which is available on request.

Registered office: Transport Friendly Society Limited, 9 Betterton Street, London WC2H 9BH. Telephone: 020 7240 8886 Fax: 020 7379 8807 E Mail: Info@tfs.uk.com

Transport Friendly Society Limited
FREEPOST LON 224
9 Betterton Street
London
WC2H 9BR



Transport Friendly Society Limited
9 Betterton Street, London WC2H 9BH
Tel: 020 7240 8886 Fax: 020 7379 8807

Authorised and regulated by the Financial Services Authority

The Transport Friendly Society sickness and hospitalisation benefit

Transport Friendly Society (TFS) is a non-profit making mutual organisation that is run by public transport people for the benefit of public transport people. We were formed over 100 years ago to help our members and their families maintain their standard of living in times of sickness.

Sickness Benefit

TFS offers a straightforward sickness plan that will pay you a weekly sum if you are off work sick for more than a week and could even give you money back if you don't claim.

All you need to do is choose:-

- how much you want to pay and
- the number of weeks you wish to be paid for

All benefits payable are tax-free and in addition to any statutory or company payments.
(Based on our understanding of current legislation which may of course change in the future.)

Use the table below to work out how much your benefit will cost. Once you start a plan the cost **never goes up**.

Sick pay only	Benefit £35 per week	Benefit £70 per week	Benefit £105 per week
Age last birthday	Cost per week	Cost per week	Cost per week
16-30	£1.03	£2.03	£3.03
31-35	£1.13	£2.23	£3.33
36-40	£1.23	£2.43	£3.63
36-40	£1.23	£2.43	£3.63
41-45	£1.38	£2.73	£4.08
46-48	£1.48	£2.93	£4.38
49-51	£1.58	£3.13	£4.68
52-54	£1.68	£3.33	£4.98
55-57	£1.83	£3.63	£5.43
58-59	£1.98	£3.93	£5.88
No Claim Bonus			
For each year that you do not claim we will pay you £1 for every £7 benefit selected*			

(Subject to submission of a valid claim, benefit is payable from the **second week of any sickness for up to 12 weeks in any 12 month period**. The policy must have been running for a minimum of 26 weeks before you can submit a claim. Other levels of benefit and time periods are available on request.)

(Total weekly benefit together with payments from all other sources must not exceed 75% of your normal weekly earnings)

*No Claim Bonus will be paid as a lump sum, providing contributions have been paid for at least 5 years, either:-

- Upon your death at any time whilst the plan is in force, or
- After you reach age 60, cease eligible employment and stop contributing to the plan, or
- If you are medically discharged from eligible employment before your 60th birthday and stop contributing to the plan (subject to satisfactory medical evidence)

Hospitalisation Benefit

No one likes to think it will happen to them but sometimes long-term illness can lead to a stay in hospital. This can result in extra expense including travelling costs for family and friends coming to visit.

For a few pence more it is possible to take out additional cover to help meet these costs, the table below gives you details of the small weekly premium for this extra benefit.

N.B. Hospitalisation cover is only available as an addition to the sickness plan it cannot be taken out separately.

Hospitalisation	Benefit £7 per night	Benefit £21 per night	Benefit £35 per night
Age last birthday	Cost per week	Cost per week	Cost per week
16-30	26p	78p	£1.30
31-35	28p	84p	£1.40
36-40	31p	93p	£1.55
41-45	34p	£1.02	£1.70
46-50	37p	£1.11	£1.85
51-54	42p	£1.26	£2.10

How do I apply for sickness and hospitalisation cover?

It couldn't be easier - just complete the application form attached, tear, seal and post. You don't even need a stamp!

APPLICATION FORM

Single/Married/Widowed/Divorced/Separated _____

Date of Birth _____

Full Name _____ Mr/Mrs/Miss

Address _____

Postcode _____ Tel no. _____

Email _____

Occupation _____

Sickness benefit required

Weekly benefit payable for 12 weeks (please tick)

£35 **£70** **£105**

(Other terms of benefit are available on request)

Hospitalisation benefit

(available only if you have Sickness Benefit)

Benefit per night (please tick)

£7 per night **£21** per night **£35** per night

Total cost of benefit £ _____ per week/month

DECLARATION TO BE SIGNED BY THE APPLICANT

I declare to the best of my knowledge and belief that the foregoing statements are true and complete and that I am now in good health. I understand that this Application shall form the basis of the contract between me and the Society and that failure to disclose any facts which may be regarded as material (ie facts likely to influence the acceptance of this proposal) may cause the insurance to be declared void. I agree to conform to the rules of the Society.

Data Protection Act – The information disclosed in this Application will be used solely by Transport Friendly Society Limited. However, the Society may use the information for marketing purposes such as contact by post, email or other means regarding your investment and insurance needs. If you do not wish to hear about such other products please tick this box.

Date _____ Signature _____

Introducer _____



Jayesh Mistry
Westbourne Park Garage

“I didn't expect to have
an **accident** but when I did
the **money** from the friendly society
was a **life saver**”



Payroll Mandate - Employees Payroll Deduction Mandate

Mr/Mrs/Miss _____

Full Name _____

Garage/Location _____

Bus Company _____

Employee Number _____ Grade _____

National Insurance _____

Pay Frequency

(please tick)

Weekly 4 Weekly Monthly

I hereby authorise my Employer to deduct from my pay, until further notice in writing from me, the contributions payable by me each pay day, as provided in the Rules of the Transport Friendly Society Limited and to pay the amounts so deducted to the Society.

Date _____ Signature _____

Note - The Pay Clerk will commence deductions as soon as possible after receipt of this mandate from the Society. Please check your pay advice to ensure that this request has been correctly applied.

For use by the Society and Employer

Employee Number _____

*Amount to be deducted _____

Pay Frequency

(please tick)

Weekly 4 Weekly Monthly

*This is the total amount to be paid and replaces any existing mandate in favour of the Transport Friendly Society