



# INSURANCE DISCLOSURE STATEMENT

## WALKAWAY TOTAL LOSS PROTECTION™ GAP INSURANCE

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## INTRODUCTION

This **Disclosure Statement** contains important information. It is a guide to help you understand the insurance coverage your automotive dealer has arranged for you. We have made available to you in this **Disclosure Statement** all of the important information you will need to decide whether this is the right product for you. However, you could have questions that you cannot answer with this **Disclosure Statement**. That is why we have licensed, trained insurance professionals who are willing to assist you. You can contact Insurance Insight and speak to a licensed broker by calling 1-877-833-1419.

The detailed terms, conditions, exclusions and limits of your insurance coverage are set out in the insurance **Certificate** provided to you together with this **Disclosure Statement**. The **Certificate** describes coverage under a non-participating group master policy (the “**Group Master Policy**”). Under a “non-participating” policy the persons insured do not share in the insurer’s earnings or profits. Your **Selling Dealer** is the group policyholder under the **Group Master Policy**, which is issued by the **Insurer** for the benefit of the lender or lessor named in your Financing Agreement (the “**Financial Institution**”) who financed the purchase or lease of your **Vehicle** identified by the VIN on the **Certificate**. The **Group Master Policy** describes the **Benefits** in the event of a **Qualifying Event**. If there are inconsistencies between the **Certificate** and the **Group Master Policy**, the **Group Master Policy** governs.

Please take the time now to review the information on the **Certificate** and advise the **Broker** of any errors or missing information. Contact the **Broker** by telephone at 905-766-4613 or 1-877-833-1419 or by email at [contactus@insuranceinsight.ca](mailto:contactus@insuranceinsight.ca). If you’re using email, please include the Certificate Number in the subject line.

A copy of the **Group Master Policy** can be made available to you upon your written request to the **Insurer** at the address set out in the **Certificate**.

In the rest of this **Disclosure Statement**, and in the **Certificate**, capitalized words and phrases highlighted in **bold print** have special meanings. Those words, phrases and special meanings are contained in your **Certificate** under Section Six “Words and Phrases with Special Meanings”.

This insurance is provided as part of your automotive lease or loan transaction.

## PRODUCT OVERVIEW

### WHAT AM I INSURED FOR?

This insurance has been developed to help you repay the **Financial Institution** who loaned you the money to purchase the **Vehicle** or pay the amounts owing to the **Financial Institution** who leased you the Vehicle. The **Financial Institution** could be your bank or it could be a finance company affiliated with the manufacturer of your **Vehicle**.

If an event covered by the **Certificate** happens, called a “**Qualifying Event**”, the amount that we pay your **Financial Institution** on a claim is measured by the “**Balance Due**” on your **Loan** or **Lease** up to the limit described below under “What We Will Pay”.

This insurance pays your **Financial Institution** the difference between either the **Automobile Insurance Payout** or the **Vehicle Value at Date of Loss** plus **Sales Tax(es)**, whichever amount is greater, and the **Balance Due** under your **Financing Agreement** if one of the following **Qualifying Events** occurs in Canada or the United States during the **Coverage Term** of the insurance:

- Your Vehicle has been declared a **Total Loss**; or
- Your Vehicle has been **Stolen and not Recovered**.

Payment of the **Benefit** will be made directly to the **Financial Institution** of the **Balance Due** on your outstanding **Loan** or **Lease** up to a **Maximum Benefit** of CDN\$50,000. If your **Vehicle** has been rendered a **Total Loss** or has been **Stolen and not Recovered**, we will pay the **Selling Dealer** the **Loyalty Credit** to be applied to reduce the purchase price of a vehicle to replace the **Vehicle**, provided that you purchase the replacement vehicle within one hundred and fifty (150) days of the **Automobile Insurance Payout** to you by the **Automobile Insurer**. The **Maximum Benefit** of \$50,000 is the most we will pay, including the **Loyalty Credit**.

## CAUTION

IN ORDER FOR THE INSURER TO PAY THE BENEFIT, IN ADDITION TO EXPERIENCING A QUALIFYING EVENT, NO LATER THAN THIRTY (30) DAYS AFTER YOU SUBMIT THE CLAIM TO THE INSURER, THE AUTOMOBILE INSURER MUST HAVE REMITTED TO THE FINANCIAL INSTITUTION (OR YOU HAVE COLLECTED AND REMITTED TO THE FINANCIAL INSTITUTION) ALL AMOUNTS OF COLLISION AND THEFT INSURANCE COVERAGE UNDER THE AUTOMOBILE INSURANCE POLICY AND ANY OTHER INSURANCE OR INDEMNITY AGREEMENT PAYABLE IN THE EVENT THAT THE VEHICLE IS RENDERED A TOTAL LOSS OR IS STOLEN AND NOT RECOVERED TO BE APPLIED AGAINST THE BALANCE DUE ON THE VEHICLE UNDER THE FINANCING AGREEMENT.

## WHO IS THE INSURED?

The person named as the “buyer” or “lessee” in the contract with the **Selling Dealer** for the purchase or lease of the **Vehicle** is the person insured. The name of the buyer or lessee who signed the purchase contract or lease should also appear on the first page of the **Certificate**. In this statement and in the **Certificate**, the buyer or lessee insured under the **Certificate** is called “You” or “Your”. The **Financial Institution** will receive all payments under the **Certificate**.

## AM I ELIGIBLE?

To be eligible for coverage, on the **Effective Date**:

1. You must be indebted to your **Financial Institution**, pursuant to a **Financing Agreement**;
2. The **Lease Term** or **Loan Term** in the **Financing Agreement** must be equal to or less than ninety-six (96) months;
3. You must be the person or company named as the “Buyer” in your **Financing Agreement**;
4. You must be at least 18 years of age and, in the case of a company, an individual who is at least 18 years of age with signing authority on behalf of the company must sign this **Certificate**;
5. You must be an individual living in Canada or a company with a registered office located in Canada;
6. You must be named as the insured under a valid **Automobile Insurance Policy** with **Collision & Theft Coverage** in force for the **Actual Cash Value** of the **Vehicle**;
7. All other insurance required by your **Financing Agreement** or applicable law must be in effect naming the **Financial Institution** as first loss payee;
8. The **Vehicle** must not be more than seven (7) years older than the model year currently available new on the **Effective Date**;
9. The **Original Obligation** must be less than or equal to the **Maximum Obligation**;
10. The number of months in the **Coverage Term** stated above must be equal to the number of months in the **Lease Term** or **Loan Term** stated in the **Financing Agreement**; and
11. You have signed the **Application**.

## WHO IS THE INSURER?

Trisura Guarantee Insurance Company (“**Trisura**”) is the **Insurer**, referred to in this **Disclosure Statement** as “We”, “Us” or “the Insurer”. Here is how you can contact **Trisura**:

PHONE: 1-844-936-1619

FAX: 1-866-603-2120

EMAIL: [walkaway-tp@trisura.com](mailto:walkaway-tp@trisura.com)

MAIL: Bay Adelaide Centre 333 Bay Street, Suite 1610. Toronto, Ontario. M5H 2R2

WEB: [www.trisura.com](http://www.trisura.com)

**Trisura** is authorized to conduct insurance business by the federal Office of the Superintendent of Financial Institutions ([www.osfi-bsif.gc.ca](http://www.osfi-bsif.gc.ca)) and by the insurance regulator in your province.

## WHO IS THE INSURANCE BROKER?

Insurance Insight Inc. is the broker that administers the insurance and is available to answer your questions. Insurance Insight Inc. is referred to in this **Disclosure Statement** and in the **Certificate** as the “**Broker**” or “**Insurance Insight**”.

Here is how you can contact Insurance Insight:

PHONE: 1-877-833-1419 or 905-766-4613

FAX: 905-629-8969

Email: [contactus@insuranceinsight.ca](mailto:contactus@insuranceinsight.ca)

MAIL: 1333 Dorval Drive, Suite 102 Oakville, Ontario. L6M 4G2

WEB: [www.insuranceinsight.ca](http://www.insuranceinsight.ca)

Insurance Insight is an insurance broker licensed in your province.

## WHAT IS THE AMOUNT OF COVERAGE?

**You must ensure that the maximum amount of Actual Cash Value of the Vehicle is paid by the Automobile Insurer in the event of a Total Loss. Before settling with your Automobile Insurer, contact the Broker at [vehiclevalue@insuranceinsight.ca](mailto:vehiclevalue@insuranceinsight.ca) for a complimentary vehicle valuation from the *Canadian Black Book* guide for your Vehicle.**

The **Benefit** payable to the **Financial Institution** will be equal to the LESSER OF:

Your **Balance Due**

**MINUS**

the greater of the **Automobile Insurance Payout**

OR

the **Vehicle Value at Date of Loss** plus **Sales Tax(es)**

**MINUS**

Any **Excess Deductible**, which is the amount of any deductible under your **Automobile Insurance Policy** that exceeds \$1,000 and that was applied to the **Automobile Insurance Payout**.

The most that we will pay under this insurance is Fifty Thousand Dollars (CDN\$50,000), which we call the

**Maximum Benefit.** The **Maximum Benefit** will not exceed \$50,000 regardless of the amount of the loss or the number of persons or organizations making claims; claims made or suits brought; **Vehicles Stolen and Not Recovered**; **Vehicles** declared a **Total Loss**; coverages provided by the **Certificate** and **Group Master Policy**; **Qualifying Events**; or **Occurrences**. The **Maximum Benefit** includes the **Loyalty Credit**.

If we have issued more than one WALKAWAY Total Loss Protection certificate to you, the most that we will pay to one or more **Financial Institutions** under all WALKAWAY Total Loss Protection certificates issued to you in relation to different vehicles for any single **Occurrence** is \$50,000. An “Occurrence” in respect of **Total Loss** is the same event and as respects a vehicle **Stolen and not Recovered** is an act or series of acts by a person or group of persons resulting in the **Vehicle** being **Stolen and Not Recovered**.

## **WHO IS THE BENEFICIARY?**

The beneficiary of this insurance is your **Financial Institution** as outlined in your **Financing Agreement**.

## **WHEN DOES MY INSURANCE COVERAGE START?**

Your insurance coverage starts on the **Effective Date** identified on the first page of your **Certificate**, the day you sign the **Financing Agreement**.

You can only purchase a WALKAWAY Total Loss Protection certificate on the date you sign your **Financing Agreement** or within thirty (30) days of that date (the “**Grace Period**”) if you advise your **Selling Dealer** and the **Broker** in writing. Any certificate issued after that date is void. If you purchase your **Certificate** during the **Grace Period**, and a **Qualifying Event** begins or occurs during the **Grace Period**, you will not be covered under the **Certificate** and your premium will be refunded.

## **HOW LONG DO I HAVE COVERAGE FOR?**

Your insurance coverage is valid for the term of your **Financing Agreement**.

## **CAN COVERAGE END BEFORE THE END DATE?**

Your coverage will end before the **End Date** if:

- you write to your **Selling Dealer** and request that the insurance be cancelled;
- your **Loan** is paid in full, rewritten, refinanced or otherwise discharged;
- your **Lease** is terminated;
- your **Vehicle** is repossessed, or sold; or
- a **Benefit** is paid to your **Financial Institution**.

## **WHAT IS THE TOTAL RETAIL COST OF THIS COVERAGE?**

The total retail cost of your coverage will depend on the **Loan Term or Lease Term**, the **Original Vehicle Value** and the principal amount of the **Loan** or the capital amount of the **Lease**. The total **Retail Price** of the **Certificate** is set out on the first page of your **Certificate**. The breakdown of that amount among: the premium remitted to the **Insurer(s)**, the fee you paid to the **Selling Dealer** and the fee paid by the **Selling Dealer** to the **Broker** is specified under “Retail Price” in **Section Six – Words and Phrases with Special Meanings** in your **Certificate**.

The taxes applicable to your **Certificate** will depend on the province your **Selling Dealer** is located in. Ask your **Selling Dealer** what the applicable tax rate is for your province.

## **ARE THERE ANY PERIODS DURING WHICH COVERAGE WILL NOT APPLY?**

If you purchase the insurance during the **Grace Period**, and the **Vehicle** has been rendered a **Total Loss** or has been **Stolen** and not **Recovered** during the **Grace Period**, you and the **Vehicle** will not be covered and the entire **Retail Price** will be refunded.

## **ARE THERE ANY WAITING PERIODS?**

No.

## **HOW WILL I RECEIVE CONFIRMATION OF MY INSURANCE COVERAGE?**

You will receive the **Certificate** from your **Selling Dealer** along with a copy of this **Disclosure Statement** after you sign the **Financing Agreement**, and the **Application**. The insurance **Certificate** will serve as confirmation of your insurance coverage.

## **RENEWAL**

### **CAN I RENEW MY INSURANCE AFTER THE END DATE?**

This insurance is not renewable.

## **RESTRICTIONS AND EXCLUSIONS**

### **WHAT ARE THE COVERAGE RESTRICTIONS AND EXCLUSIONS?**

#### **CAUTION**

**YOU ARE LIABLE TO PAY ALL OF THE FOLLOWING COSTS, WHICH ARE NOT COVERED UNDER THE CERTIFICATE:**

- (I) ANY COSTS INCURRED BY THE CUSTOMER TO DELIVER A NOTICE OF CLAIM, PROOF OF LOSS OR TO COMPLETE ANY REPORT OR STATEMENT IN RELATION TO A CLAIM FOR A BENEFIT THAT IS REQUIRED BY THE INSURER OR THE BROKER;
- (II) ANY FINES, CHARGES, DEBTS OR LIENS REGISTERED AGAINST THE LICENCE OR TITLE TO THE VEHICLE, INCLUDING ANY COSTS ASSOCIATED WITH THEIR DISCHARGE, ANY LIABILITIES OR DEBTS ARISING OUT OF THE OWNERSHIP, USE OR OPERATION OF THE VEHICLE, AND ANY SECURITY INTEREST (OTHER THAN IN FAVOUR OF THE FINANCIAL INSTITUTION);
- (III) ANY ADDITIONAL BALANCE DUE;
- (IV) ANY AMOUNTS DEDUCTED FROM THE AUTOMOBILE INSURER'S SETTLEMENT DUE TO WEAR AND TEAR, PRIOR DAMAGE, UNPAID INSURANCE PREMIUMS, SALVAGE, TOWING AND STORAGE AND OTHER CONDITION ADJUSTMENTS;
- (V) ANY OTHER COST INCURRED BY THE CUSTOMER IN COMPLYING WITH THE GROUP MASTER POLICY AND THE CERTIFICATE;
- (VI) ANY PAYMENTS OWING TO THE FINANCIAL INSTITUTION ON THE CUSTOMER'S LOAN OR LEASE THAT ARE IN ARREARS OR WERE DEFERRED AT THE TIME THE CUSTOMER'S CLAIM WAS APPROVED;

- (VII) THE DIFFERENCE BETWEEN SIMPLE INTEREST AND INTEREST CALCULATED USING ANY METHOD OF CALCULATION OTHER THAN SIMPLE INTEREST IN RESPECT OF A LOAN OR LEASE;
- (VIII) ANY DELINQUENT PAYMENTS OWING TO A FINANCIAL INSTITUTION ON THE LOAN OR LEASE AT THE TIME A CLAIM HAS BEEN APPROVED BY THE INSURER; AND
- (IX) ANY COST OR VALUE ATTRIBUTABLE TO OR CLAIMED BY THE CUSTOMER IN RELATION TO MODIFICATIONS OR ALTERATIONS TO THE VEHICLE EXCLUDING STANDARD OR OPTIONAL EQUIPMENT AVAILABLE FROM THE MANUFACTURER OF THE VEHICLE AND MANUFACTURER'S FACTORY-APPROVED CONVERSION PACKAGES AND DEALER INSTALLED OPTIONS CUSTOMARILY INCLUDED IN USED CAR VALUE GUIDEBOOKS.

**THE INSURER WILL NOT COVER CLAIMS WHERE QUALIFYING EVENT(S) WERE CAUSED OR CONTRIBUTED TO BY ANY OF THE FOLLOWING:**

- (I) WAR OR ANY ACT OF WAR, WHETHER DECLARED OR UNDECLARED;
- (II) SUICIDE, OR INTENTIONALLY SELF-INFLICTED INJURY, WHILE SANE OR INSANE;
- (III) THE DRIVER WAS UNABLE TO MAINTAIN PROPER CONTROL OF THE VEHICLE BECAUSE HE OR SHE WAS DRIVING OR OPERATING THE VEHICLE WHILE IMPAIRED OR HAD OVER 80 MG OF ALCOHOL IN THE BLOOD OR WAS UNDER THE INFLUENCE OF INTOXICATING SUBSTANCES, EXCEPT FOR DRUGS TAKEN AS PRESCRIBED BY A DOCTOR;
- (IV) ANY POISONOUS SUBSTANCE, GAS, OR FUMES OF ANY KIND VOLUNTARILY TAKEN, ADMINISTERED, ABSORBED OR INHALED;
- (V) GAMBLING, BETTING OR WAGERING BY THE CUSTOMER;
- (VI) THE COMMISSION OR ATTEMPTED COMMISSION BY THE CUSTOMER OF AN ASSAULT OR CRIMINAL OFFENCE;
- (VII) AN INTENTIONAL ACT COMMITTED BY THE CUSTOMER;
- (VIII) FREEZING, MECHANICAL OR ELECTRICAL BREAKDOWN OR FAILURE OF THE VEHICLE;
- (IX) REPOSSESSION OF THE VEHICLE, EVEN THOUGH THE CUSTOMER HAS NOTIFIED THE INSURER OF A CLAIM OR COULD HAVE MADE A CLAIM PRIOR TO THE REPOSSESSION OF THE VEHICLE; CONVERSION, EMBEZZLEMENT OR SECRETION BY ANY PERSON IN LAWFUL POSSESSION OF THE VEHICLE;
- (X) CONVERSION, EMBEZZLEMENT OR SECRETION BY ANY PERSON IN LAWFUL POSSESSION OF THE VEHICLE;
- (XI) CONFISCATION OF THE VEHICLE BY OR IN THE NAME OF A GOVERNMENT AUTHORITY;
- (XII) THE VEHICLE BEING OPERATED, USED, OR MAINTAINED IN ANY RACE, SPEED CONTEST, STREET RACING OR OTHER SIMILAR CONTEST WHETHER SANCTIONED OR NOT SANCTIONED;
- (XIII) THE VEHICLE WAS BEING USED AS A COMMERCIAL VEHICLE, REGARDLESS OF WHETHER A COMPANY IS NAMED AS THE "BUYER" IN THE FINANCING AGREEMENT; AND



(XIV) APPLYING AN ELECTRICAL CHARGE TO THE VEHICLE.

**THE INSURER WILL NOT COVER CLAIMS WHERE ANY OF THE FOLLOWING APPLY:**

- (I) THE CUSTOMER'S VEHICLE IS RENDERED A TOTAL LOSS OR STOLEN AND NOT RECOVERED BEFORE THE EFFECTIVE DATE;
- (II) THE CUSTOMER'S VEHICLE WAS PURCHASED OR LEASED UNDER A FINANCING AGREEMENT EFFECTED PRIOR TO THE EFFECTIVE DATE OF THIS CERTIFICATE;
- (III) THE SALE OF A CERTIFICATE WAS NOT REPORTED TO TRISURA WITHIN FORTY-FIVE (45) DAYS OF THE END OF THE MONTH DURING WHICH THE CORRESPONDING FINANCE AGREEMENT WAS EXECUTED;
- (IV) TITLE TO THE VEHICLE WAS PREVIOUSLY REGISTERED WITH A GOVERNMENT MOTOR VEHICLE AUTHORITY AS A SALVAGE OR REBUILT VEHICLE;
- (V) THE VEHICLE IS A RECREATIONAL VEHICLE (RV), MOTORCYCLE, SNOWMOBILE, SKIDOO, JET SKI WATERCRAFT, ATV, SCOOTER, WATERCRAFT, TRAILER; AND WE WILL NOT COVER ANY CLAIMS RELATING TO SPECIAL COMMERCIAL USAGE OPTIONAL EQUIPMENT, ACCESSORIES AND BODY COMPONENTS;
- (VI) THE FINANCIAL INSTITUTION OR CUSTOMER INTENTIONALLY CONCEALED OR MISREPRESENTED ANY MATERIAL FACT; ENGAGED IN FRAUDULENT CONDUCT; OR MADE A FALSE STATEMENT RELATING TO THIS INSURANCE IN REPORTING THE COVERAGE TO US OR IN SUBMITTING A CLAIM;
- (VII) THE QUALIFYING EVENT OCCURRED AFTER THE VEHICLE HAS BEEN REPOSSESSED;
- (VIII) THE VEHICLE IS HELD AS SECURITY UNDER ANY WHOLESALE, FLOOR PLAN, FIELD WAREHOUSE, OR ANY TYPE OF FINANCING TO A DEALERSHIP;
- (IX) THE VEHICLE IS MORE THAN SEVEN (7) MODEL YEARS OLDER THAN THE CURRENT MODEL YEAR AS AT THE EFFECTIVE DATE;
- (X) THE VEHICLE IS A COMMERCIAL VEHICLE; OR
- (XI) THE ORIGINAL LOAN PRINCIPAL BALANCE OR THE CAPITAL AMOUNT OF THE LEASE EXCEEDS ONE HUNDRED AND TWENTY-FIVE THOUSAND DOLLARS (CDN\$125,000).

**CLAIMS**

**HOW DO I SUBMIT A CLAIM?**

You must complete two (2) steps in order to make a claim:

1. **Notice of a Claim.** Within **thirty (30) days** after a **Qualifying Event** occurs contact the **Insurer** and notify us that you want to make a claim.
2. **Proof of Loss.** Within **ninety (90) days** after a **Qualifying Event** occurs or begins, we must receive a **Proof of Loss** from you. For details, look at the definition of "**Proof of Loss**" contained in your **Certificate** under Section Six "Words and Phrases with Special Meanings".

If you are absent or unable to give us **Notice of a Claim** or complete the **Proof of Loss**, your authorized representative may do so, provided that you confirm your representative's authority in writing and that your absence or inability to give notice or complete the **Proof of Loss** is explained to the reasonable satisfaction of the **Insurer**. In the case of your death, your **Estate Trustee** can provide **Notice of a Claim** or complete the **Proof of Loss**.

## WHAT IF I MISS THE 30/90 DAY DEADLINES?

### CAUTION

IF THE INSURER DOES NOT RECEIVE YOUR NOTICE OF A CLAIM WITHIN 30 DAYS OR YOUR COMPLETED PROOF OF LOSS WITHIN 90 DAYS OF THE QUALIFYING EVENT OCCURRING, THE INSURER MAY REFUSE YOUR CLAIM OR REDUCE THE AMOUNT THAT IT PAYS FOR YOUR CLAIM UNLESS IT WAS NOT REASONABLY POSSIBLE FOR YOU TO DELIVER A PROOF OF LOSS WITHIN THAT TIME PERIOD.

A CLAIM UNDER THE CERTIFICATE CAN BE MADE ONLY WITHIN ONE (1) YEAR AFTER THE QUALIFYING EVENT OCCURRED.

NO CLAIMS WILL BE APPROVED WHERE NOTICE OF A CLAIM IS GIVEN AFTER MIDNIGHT (IN THE TIME ZONE WHERE YOUR ADDRESS ON THE FIRST PAGE OF THE CERTIFICATE IS LOCATED) ON THE EXPIRY DATE

## EXAMPLES OF HOW THIS INSURANCE WORKS

Here is an example of how this insurance works. Assume you want to buy a 2017 Chevrolet Camaro for \$13,300. You owe \$6,700 on your previous vehicle and you want to combine that loan with your new loan. You pay \$1,000 down and take out a loan with your bank or credit union for \$19,000 ( $\$13,300 + \$6,700 - \$1,000$  down payment). Your loan is payable in equal monthly payments over five years at 6% annual interest.

Assume your vehicle is stolen a year later when your loan balance is \$15,928. Your auto insurance pays the actual cash value of the vehicle, which they determine to be \$9,380. You owe your bank or credit union \$6,548 ( $\$15,928 - \$9,380$ ). If you had purchased the WALKAWAY Total Loss Protection insurance, it would pay the \$6,548 to your bank or credit union and you would owe nothing.

## HOW LONG WILL IT TAKE THE INSURER TO PROCESS MY CLAIM?

The **Insurer** has thirty (30) days from the date they receive satisfactory **Proof of Loss** to process your claim. Satisfactory **Proof of Loss** means all the required information to assess your claim.

## HOW CAN I APPEAL A CLAIMS DECISION?

Should you disagree with any claim decision made, you can appeal it by contacting the **Insurer** or the **Broker** and requesting a review of your claim.

If, for some reason, you have a complaint or inquiry that we are not able to resolve to your satisfaction, you may communicate the complaint or inquiry in writing to:

General Insurance OmbudService  
10 Milner Business Court, Suite 701  
Toronto, Ontario M1B 3C6

## HOW DO I CANCEL THIS INSURANCE COVERAGE?

If you decide that you do not want this insurance, you have thirty (30) days after the **Effective Date** to cancel it. To cancel, you must advise the **Selling Dealer** in writing. The entire **Retail Price** will be refunded to your **Financial Institution** and credited against your **Loan** or **Lease**.

After midnight on the 30<sup>th</sup> day after the **Effective Date**, the insurance cannot be cancelled except where the **Financial Institution** repossesses the Vehicle, in which case a **Partial Refund** less a One Hundred and Twenty Five Dollar (\$125) administration fee will be credited against the outstanding **Loan** or **Lease**. All refunds will be paid to the **Financial Institution** and credited against your **Loan** or **Lease**.

## PRIVACY POLICY

Personal information is information about you as an identifiable individual. If you make a claim under this insurance that is based on a **Qualifying Event**, then we may have to collect, use, disclose and retain information about you to the extent necessary to adjudicate the claim. We will refer to personal information as your "**Information**".

We may collect **Information** from you, the **Insurer**, **Financial Institution** or other person who has knowledge of your **Information**. If you speak to us by phone, we may record and monitor the discussions for our mutual protection, deliver appropriate customer service and to confirm what we have discussed. You authorize those sources to give us the **Information**.

We limit collection, use and disclosure of **Information** to that which we require to determine that you are eligible for coverage, to administer this insurance product and our relationship with you, investigate and adjudicate claims made by you, and assist us in assessing and managing the risks of this insurance. If necessary, for these purposes, we may disclose your **Information** to insurers, financial institutions or other persons who have knowledge of your **Information** so that they can appropriately answer questions that we ask.

We may also disclose **Information**:

1. with your consent;
2. where permitted by law;
3. in response to a court order or other legal or regulatory process compelling disclosure;
4. to any person or organization to detect or combat fraud or other criminal acts or settle any actual or potential related loss or damage;
5. to protect our assets;
6. to collect any monies owing by you to us; or
7. to enforce your obligations to us.

By accepting the insurance, you consent to the collection, use and disclosure of the **Information** set out above. You have the right to withdraw your consent at any time which you can do by calling the **Broker** at 1-877-833-1419. We will explain the consequences of the withdrawal of consent, which may include cancellation of the insurance.

You consent to receiving commercial communications from the Broker by e-mail and other forms of electronic communication. These messages would include newsletters and surveys as well as information, offers, and promotions regarding its products and services or those of others that the **Broker** believes you might be interested in. You may withdraw your consent to receiving electronic communications from the **Broker** at any time by contacting the **Broker** at 1333 Dorval Drive, Suite 102, Oakville, ON L6M 4G2 or by telephone at 1-833-963-4613 or by email at [unsubscribe@insuranceinsight.ca](mailto:unsubscribe@insuranceinsight.ca).