The Motor Vehicle Insurance Policy provides various coverage options, including Comprehensive, Third Party, Fire and Theft (TPFT), Third Party Only (TPO), and Fire and Theft Only (FT). Comprehensive coverage offers extensive protection for the insured vehicle and legal liability for damage to others' property. TPFT includes coverage for loss or damage from fire and theft, along with legal liability, while TPO covers only legal liability without vehicle damage. FT is limited to fire and theft for vehicles in storage or restoration. The policy specifies insured events and additional benefits, such as accidental death, accommodation expenses, and protection against uninsured drivers, with sub-limits for each coverage type.

Key conditions require policyholders to notify the insurer of any changes in vehicle use, driver restrictions, and the vehicle's roadworthiness. Exclusions include loss of use, depreciation, wear and tear, and mechanical failures. Policyholders must act honestly when making claims and provide necessary information for claim settlements. The policy can be canceled by the policyholder at any time with a refund for unused premium, while the insurer may cancel it for reasons such as non-disclosure, failure to pay premiums, or fraudulent behavior. The policy adheres to the Fair Insurance Code, with a formal complaints procedure for unresolved issues and an Insurance Claims Register to prevent fraud.

Policyholders are responsible for ensuring the sum insured reflects the repair or replacement cost of the insured items and must review the sum insured at each renewal, especially as vehicle values decrease over time. In claims involving multiple policies with the insurer, only the highest applicable excess will be payable, except for Business Risks or Contract Works policies. A Secured No Claims Bonus is available if the policyholder maintains the policy for five years without claims (excluding glass claims), protecting the maximum No Claims Bonus for the policy's duration.

The policy outlines specific conditions regarding vehicle use, stating that vehicles designated for 'Private' use are covered for personal, social, or volunteer activities but not for commercial purposes

unless specified. Vehicles marked for 'Business' use are covered for both private and business activities, but coverage is excluded for vehicles used for hire, carrying goods for trade, or participating in races or competitions unless pre-approved. Driver restrictions are strict; coverage is void if the driver exceeds legal alcohol limits, refuses testing, fails to stop at an accident scene, is under the influence of drugs, or is unlicensed. Modifications to the vehicle must be reported, and coverage is not provided for modifications that alter manufacturer specifications without prior agreement. Losses incurred while the vehicle is in an unsafe condition known to the policyholder are also excluded.

Coverage types include Comprehensive, TPFT, and TPO, with exclusions for loss of use, wear and tear, and certain mechanical failures. Automatic additional benefits under Comprehensive coverage include accidental death benefits, accommodation and travel expenses, glass breakage protection, and coverage for lost or damaged keys without affecting the No Claims Bonus. In the event of a total loss of a new vehicle (less than one year old or two years old with low mileage), the insurer will replace it or pay the last known price if the vehicle is no longer available. The policy also provides protection against uninsured drivers and covers trailers under similar terms as the vehicle.

Policyholders can choose their repairer, but costs will be limited to estimates from approved parties. Optional benefits, such as hire car coverage, are available for an additional premium, with specific conditions regarding the hire vehicle's specifications and costs. The policy outlines the process for repairs or replacements, ensuring that vehicles are restored to their pre-loss condition or compensated for repair costs.

For vehicles deemed uneconomic to repair or stolen and not recovered, if insured for 'Agreed Value', the insurer will pay the sum insured as stated in the schedule; if insured for 'Market Value', the payment will be the current assessed value up to the sum insured. The insurer retains any salvage, including the vehicle wreck and accessories, and the policy will be automatically canceled without a

pro-rata refund of the premium. Any outstanding annual premium may be deducted from the claim payment.

Legal liability coverage applies if 'Comprehensive', 'TPFT', or 'TPO' is indicated, covering legal liabilities for accidental loss to others' property and bodily injury within New Zealand. Reasonable legal expenses for defense are covered, except under 'Fire and Theft' coverage. Exclusions include liabilities related to contracts, damage to owned property, gross negligence, bodily injury to family or business associates, and incidents at airports. Fines and penalties are also excluded. Automatic additional benefits include coverage for reasonable legal defense costs for charges of manslaughter or dangerous driving, with a maximum payout of \$10,000 for legal defense costs. Coverage extends to driving another person's vehicle under specific conditions and includes vicarious liability for employers when employees use the insured vehicle for business. The policy also covers reasonable costs for road debris removal and salvage charges related to ship carriage.

The maximum liability for property damage is \$10,000,000 per event, and for bodily injury, it is \$1,000,000 per event, with a total cap of \$10,000,000 for all liabilities per event. General exclusions apply to all sections, including costs recoverable under the Accident Compensation Act, losses related to civil commotion, confiscation by authorities, electronic data loss, modifications not pre-approved, nuclear risks, terrorism, and war-related losses.

General conditions require policyholders to notify the insurer of potential claims, minimize losses, and cooperate with investigations. Changes to the policy must be agreed upon in writing, and any breach of conditions may result in claim denial or policy voidance. The policy is governed by New Zealand law, and joint insurance means all insured parties are collectively responsible for breaches. After a claim, the insurer has the right to negotiate and settle claims, retain possession of damaged property, and recover any payments made if the insured receives compensation from other parties.

In the event of a catastrophe or disaster, the insurer commits to handling claims efficiently and compassionately, adhering to the Fair Insurance Code, and providing updates every 20 business days until claims are resolved, prioritizing vulnerable members. Claims found to be dishonest or fraudulent may be declined, and the policy could be declared void from the date of the fraudulent act. Policyholders must immediately inform the insurer of any other insurance covering the same risks, as the insurer will only pay amounts exceeding those covered by other policies. Before any claim payment, policyholders must comply with all policy terms and pay any outstanding premiums. All statements made during application, renewal, or claims must be truthful.

The insurance term is specified in the schedule, and renewal is at the insurer's discretion, which may be withheld for reasons such as non-compliance with disclosure obligations, changes in circumstances affecting underwriting criteria, or fraudulent behavior. If a renewal offer is made, it may include different terms, and the policyholder is responsible for ensuring the sum insured meets their needs. Premiums for the new term must be paid before the current term expires to avoid policy lapsing. Key definitions include "Accessories," referring to non-essential vehicle parts; "Accidental," meaning unintended events; and "Bodily Injury," encompassing personal injuries or death. "Change in circumstances" refers to any alteration that may increase claim likelihood, while "Current Value" is the estimated cost to replace a vehicle before an event. The term "Excess" indicates the initial payment required from the policyholder for each claim. The policy is defined as the contract including the application, policy wording, schedule, and any endorsements, with the insurer identified as Medical Insurance Society Limited and the insured as the individual or entity named in the schedule.