

**Greater Manchester  
Fire and Rescue Service  
Sickness Benefit Scheme  
Member Application form**



The sickness benefit scheme has been arranged by George Burrows, on behalf of the Greater Manchester Fire service.

This scheme meets the demands and needs of fire service employees who wish to provide income at the levels shown if they are placed on reduced pay due to ill health or accident.

The decision of whether you should join the scheme and the assessment of whether it meets your demands and needs is entirely yours based on the information provided by George Burrows.

Benefit payments commence on the 28th day after your pay has been reduced and will be payable every 28 days. Claims are settled by George Burrows on behalf of the insurer.

**Benefit Level:**

<b>Sick Pay scheme</b>	<b>£100 per week</b>
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Benefits are payable for a maximum of 26 weeks or until you return to work, whichever occurs first.

Please note: If full pay is reinstated and backdated, benefits received during the applicable period must be repaid to the insurers.

**Please complete in BLOCK CAPITALS and return to: George Burrows, St Mark's Court, North Street, Horsham, West Sussex RH12 1RZ**

**Cover is applicable to employees only.**

Date of joining the Greater Manchester Fire and Rescue Service:		/	/
Surname:		Forename(s):	
Date of birth:		Employee number:	
Address:			
I wish to join the sick pay scheme	£	£4.85* per month inclusive of Insurance Premium Tax (IPT)	

\*The premium payable will be subject to periodic review and may go up or down

I hereby apply to join the scheme with effect from**:	/	/		
I hereby authorise the Fire Authority to deduct the monthly premium from my pay in respect of my membership of the above scheme.				
Signed:		Date:	/	/

\*\*By signing this application form, you confirm that you are a member of the Greater Manchester Fire Service and you are at actively at work in your normal occupation and number of contracted hours, have not been medically advised against working, and have not been absent from work due to ill health or injury in the 8 weeks preceding the application.

It is important that the information you have provided to us is to the best of your knowledge true, accurate and complete and reflects your current circumstances. If your circumstances change, please inform us. If we or the insurer discover that the details provided to us are untrue, inaccurate or incomplete, this may result in refusal of a claim and/or your policy being cancelled or treated as if it never existed.

**Please read the Data Privacy Notice on the reverse of this application form.**

### **Data Privacy Notice**

George Burrows is a trading name of Arthur J. Gallagher Insurance Brokers Limited. We are the controller of any personal data you provide to us. We collect and process personal data in order to offer and provide insurance services and policies and to process claims. Personal data is also used for business purposes such as fraud prevention and detection, financial management, to generate risk modelling, conduct analytics including to advise, improve and develop our products and services and to comply with our legal and regulatory obligations. This may involve sharing information with, and obtaining information from, our group companies and third parties such as (re)insurers, other brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies.

We may record telephone calls to help us to monitor and improve the service we provide as well as for regulatory purposes.

Please see our Privacy Notice for further information on how your personal data is used, shared, disclosed and retained, your rights in relation to your personal data and how to contact our Data Protection Officer. Our Privacy Notice can be found at <https://www.ajg.com/uk/privacy-policy/>. From time to time we may make important updates to our Privacy Notice and these may in turn affect the way we use and handle your data. Please ensure you review our Privacy Notice periodically to ensure you are aware of any changes.

If you are providing us with personal data of another individual that would be covered under the insurance policy we may be placing or services we may provide to you, you shall ensure that you have obtained all appropriate consents, where required, tell them you are providing their information to us and show them a copy of this notice. You must not share personal data with us that is not necessary for us to offer, provide or administer services to you.

