



Arboriculture Tree Insurance Policy



INSURANCE
FACILITATORS

Issued by Insurance Facilitators Pty Ltd, ABN 90 099 104 480 AFS Licence No.
289450 on behalf of and as underwriting agent for the insurer HDI Global Specialty
SE - Australia, ABN 58 129395 544 AFS Licence No. 458776

NOTICE TO INTENDING INSURED

Who is the Insurer?

The **Insurer** of the **Policy** is HDI Global Specialty SE - Australia (ABN 58 129 395 544, AFS License number 458776) and its registered address is Tower One, Level 33, 100 Barangaroo Avenue, Sydney NSW 2000, Australia. The **Insurer** is regulated by the Australian Prudential Regulation Authority ("APRA").

HDI Global Specialty SE is registered in Germany, with its registered office at Roderbruchstrasse 26, 30655 Hannover, Germany with registration number HRB211924 and authorised by Bundesanstalt für Finanzdienstleistungsaufsicht ("BaFin"). It is authorised to carry on insurance business in Germany under the German Insurance Supervisory Act ("Versicherungsaufsichtsgesetz").

Who is the Underwriting Agent?

In effecting this contract of insurance, Insurance Facilitators Pty Ltd ABN 90 099 104 480, AFSL No. 289450, will be acting under an authority given to it by the **Insurer**. Insurance Facilitators Pty Ltd will be acting as the agent for the **Insurer** and not for **You** as the Insured.

Our Contract with You

Our contract with **You** is subject to the Insurance Contracts Act 1984 (the Act).

Under the Act **We** each have a duty to act towards each other with utmost good faith. This means that in all **Our** dealings with each other, we must each act with honesty, fairness and reasonableness.

The contract is based on the information **You** gave **Us** when **You** applied for the insurance, and any subsequent information which **You** have supplied.

We will provide cover for those sections of the **Policy** **You** have selected and that are shown on **Your Certificate of Insurance**.

You must pay the premium and any relevant government charges for the **Period of Insurance** and comply with all of the **Policy** terms and conditions.

The **Policy**, any other declarations **You** make and any endorsement, amendment or alteration to **Your** cover will form the legal contract between **You** and **Us**.

Your Duty to Take Reasonable Care Not to Misrepresent

You have a duty to take reasonable care not to make any misrepresentation when entering into, varying, extending or renewing the **Policy**.

This means that it is essential that **You** respond to specific questions that **We** ask honestly and to the best of **Your** knowledge, including where **We** ask **You** to confirm or update information that **You** have previously given to **Us** when entering into, varying, extending or renewing the **Policy**.

To assist **You** with providing **Us** with honest and accurate responses to any questions **We** ask of **You**, **We** have endeavoured to ensure that any question **We** ask is clear and easy to understand. Further, where possible, **We** have also included examples of the types of responses **We** are looking for when asking a particular question.

If **You** are unclear of any particular question or would like **Us** to explain it to **You**, please get in touch with **Us** and **We** will explain this to **You**.

In determining whether **You** have fulfilled this duty to take reasonable care not to make a misrepresentation to **Us**, **We** will consider all of the relevant circumstances of a particular case. If **You** do not respond honestly and accurately to specific questions that **We** ask, **We** may (acting reasonably) cancel **Your Policy** or reduce the amount **We** will pay **You** if **You** make a claim, or both. It is therefore vital that **You** be honest and specific in **Your** responses. If **Your** failure to tell **Us** is fraudulent, **We** may refuse to pay a claim and treat the **Policy** as if it never existed (this does not mean that **We** will refund any premiums that **You** have already paid).

Agreements Affecting Rights of Subrogation

We will not pay a claim if, without prior agreement from **Your** insurer, **You** make any agreement that will prevent the insurer from recovering the loss from a third party.

Interested Parties

We will not accept any financial interests over **Insured Trees** of any party other than **You**, unless **You** have notified **Us** of such interest and:

- Request the interest to be noted on the **Policy**
- Authorise **Us** to use that party's personal information about **You** in connection with that **Policy**.

We must have agreed and noted that interest on **Your Certificate of Insurance**.

That party is not covered nor do they become an Insured under the **Policy**. If the interests of another party have been noted on the **Policy**, then in the event of a claim **We** are obliged to enquire from that interested party whether the claim is subject to that interest. If so, **We** are obliged to first make payment of the claim to the interested party and thereafter make payment to **You** of the balance. A payment by **Us** to an interested party constitutes a discharge of **Our** liability to **You** under the **Policy** to the extent of that payment.

This is Not a Renewable Contract

Cover provided under this **Policy** will cease at expiry of the **Period of Insurance** shown on **Your Certificate of Insurance**. If **You** wish to arrange similar insurance with **Us** for the following season, **You** will need to complete the proposal sent to **You** and **We** will provide terms of cover for **Your** consideration.

Underinsurance

You will not be covered in respect of any area which is not shown on **Your Certificate of Insurance**.

If **Your** area planted is greater than the **Insured Trees** nominated by **You**, **Your** claim in respect of **Insured Trees** will be reduced by the underinsurance percentage of the total area planted.

Example - Underinsurance	
Area planted	15ha
Insured Crop Area	10ha
Area Damaged	5ha
Underinsurance %	66.7% ((10 ÷ 15)x100))
Underinsurance Calculation	5ha x 66.7%
Net Claim Area	3.335ha

Complaints Handling & Dispute Resolution

IF are committed to raising standards of service to **Our** customers.

The following standards apply to all complaints handling.

1. **We** will conduct complaints handling in a fair, transparent and timely manner.
2. **We** will make available information about **Our** complaints handling procedures.

We will only ask for and take into account relevant information when deciding on **Your** complaint.

1. **You** will have access to information about **You** that **We** have relied on in assessing **Your** complaint and an opportunity to correct any mistakes or inaccuracies. In special circumstances or where a claim is being or has been investigated, **We** may decline to release information but **We** will not do so unreasonably. In these circumstances, **We** will give **You** reasons. **We** will provide our reasons in writing upon request
2. Where an error or mistake in handling **Your** complaint is identified, **We** will immediately initiate action to correct it.

The satisfaction of our clients is extremely important. As such, We would like You to tell us if any of our products or services has not met Your expectations in any way.

If **You** have a complaint which **You** wish **Us** to review, **You** can get in touch with **Us** by mail, fax, phone, in person or email. Remember to include **Your** name, policy number and some details relating to **Your** complaint.

Within 1 business day of receiving **Your** compliant, Insurance Facilitators will acknowledge **Your** compliant in written form (Email, post and/or fax). **You** will be provided with the contact details of the person reviewing the complaint, the timeframes in which action will be taken and the steps within the complaints process, including the details of ACFA.

When **You** first speak to Insurance Facilitators about **Your** complaint or concern, the person trying to resolve **Your** complaint will listen to **You**, consider the facts and attempt to resolve **Your** complaint immediately. Further information to support **Your** complaint may be requested. Insurance Facilitators will make a decision on **Your** compliant within 7 days.

If **We** do not resolve the compliant to **Your** satisfaction, then **We** will hand over the Compliant File to HDI immediately.

Your dispute will be acknowledged in writing within 1 business days of receipt. The length of time required to resolve a particular dispute will depend on the individual issues raised, however in most cases **You** will receive a full written response to **Your** dispute within 13 business days of receipt, provided **We** have received all necessary information and have completed any investigation required. HDI may require additional information from **You** when **We** hand over **Your** complaint file.

If **Your** complaint is not resolved by HDI at day 22 and it looks unlikely that a decision can be made by Day 30 due to varying complexities or severe circumstances, **You** will be updated immediately and afforded the opportunity to take **Your** compliant to the Australian Financial Complaints Authority (AFCA). If **You** decide to keep the compliant with HDI, then with approval from ACFA, HDI will be given a 14-day extension to make a decision on **Your** complaint.

When HDI makes a decision on **Your** compliant it will be in writing. **Your** written decision will include the final outcome of the compliant, reasons behind the decision, **Your** rights if **You** are not happy with the decision and the contact details of AFCA.

HDI will provide **You** with enough detail to understand the basis of the decision and be fully informed when deciding whether to escalate the matter to AFCA or another forum.

AFCA is an ASIC approved external dispute resolution body. AFCA resolves certain insurance disputes between consumers and insurers and will provide an

independent review at no cost to **You**. **We** are bound by the determination of AFCA but the determination is not binding on **You**.

You can contact AFCA at:

Australian Financial Complaints Authority

Online: www.afca.org.au

Email: info@afca.org.au

Phone: 1800 931 678

Mail: Australian Financial Complaints Authority
GPO Box 3 Melbourne VIC 3001

Privacy Statement

Privacy legislation regulates the way private sector organisations can collect, use, keep secure and disclose personal information. **We** are bound by the Privacy Act 1988 (Cth), when collecting and handling **Your** personal information. **We** have developed a privacy **Policy** which explains what sort of personal information **We** hold about **You** and what **We** do with it.

We will only collect personal information from or about **You** for the purpose of assessing **Your** application for insurance and administering **Your Policy**, including any claims **You** make or claims made against **You**. **We** will only use and disclose **Your** personal information for a purpose **You** would reasonably expect.

We may need to disclose personal information to other entities within **Our** group, reinsurers (who may be located overseas), insurance intermediaries, insurance reference bureaux, credit reference agencies, **Our** advisers, **Our** agents, **Our** administrators and those involved in the claims handling process (including assessors, investigators and others), for the purpose of assisting **Us** and them in providing relevant services and products, or the purpose of recovery or litigation.

We may disclose personal information to people listed as co-insured on **Your Policy** and to family members or agents authorised by **You**. Disclosures may also be made to government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law. **We** will request **Your** consent to any other purpose.

By providing **Your** personal information to **Us**, **You** consent to **Us** making the disclosures set out above which require consent. This consent to the use and disclosure of **Your** personal information remains valid unless **You** alter or revoke it by giving **Us** written notice. Without **Your** personal information **We** may not be able to issue insurance cover to **You** or process **Your** claim.

You also have the opportunity to find out what personal information **We** hold about **You** and, when necessary, correct any errors in this information. Generally, **We** will do this without restriction or charge.

For further information about **Our** privacy **Policy** or to access or correct **Your** personal information, please contact **Us** at the following address:

HDI Global Specialty SE - Australia
Tower One, Level 33, 100 Barangaroo Avenue,
Sydney, NSW, 2000

If **You** believe that **We** have interfered with **Your** privacy in **Our** handling of **Your** personal information **You** may lodge a complaint by contacting **Us**.

We will attempt to resolve **Your** complaint in accordance with **Our** Privacy Complaints Handling Procedure.

If **You** are not satisfied with the resolution of **Your** complaint or with the way that **We** have handled **Your** complaint through the Privacy Complaints Procedure, **You** may be able to refer the matter to the Office of the Australian Information Commissioner.

If **You** would like more information about **Our** Privacy Complaints Procedure please contact **Us**.

The Goods and Services Tax (GST) and Your Insurance (GST Registered Policyholders Only)

Information **You** must give to **Us**

If **You** are registered, or required to be registered, for Goods and Services Tax ("GST") purposes **You** must provide **Us** in writing with **Your** Australian Business Number ("ABN") when requested. **You** must also advise **Us** in writing what **Your** Input Tax Credit ("ITC") entitlement is for the insurance premium either:

- (i) on or before entry into, renewal or variation of this **Policy**; or
- (ii) if permitted under the GST Law, at any other time at or before **You** first notify **Us** of a claim under this **Policy**.

If **You** have told **Us** **Your** ITC entitlement under (a) above and **Your** ITC entitlement later alters, **You** must tell **Us** in writing about that alteration.

If **You** are registered and cease to be registered for GST purposes **You** must tell **Us** immediately in writing.

General Code of Practice

From 1 January 2022, the Insurer is a signatory to the General Insurance Code of Practice (the Code). The Code was developed by the Insurance Council of Australia to further raise standards of practice and service across the insurance industry. The Code Governance Committee (CGC) is an independent body that monitors and enforces insurers' compliance with the Code. For more information on the Code of Practice and Code Governance Committee (CGC) visit insurancecode.org.au.

DEFINITIONS

Where used in this **Policy** the following definitions apply:

Agreed Value

Means in respect of **Insured Trees**, the amount per tree nominated by **You** and accepted by **Us** and listed in **Your Certificate of Insurance**.

Certificate of Insurance

Means the document and field schedule which forms part of **Your Policy** and describes important details of **Your** cover.

Deductible

Means the amount which **You** must bear in relation to each and every claim as listed in **Your Certificate of Insurance**.

Insured Trees

Means the total number of trees specified by block, age, and variety, at **Your Orchard** or **Grove** as listed in **Your Certificate of Insurance**.

Orchard or Grove

Means the collection of all blocks in which **Insured Trees** belonging to **You** are being grown at the location, as listed in **Your Certificate of Insurance**.

Period of Insurance

The **Period of Insurance** is listed in **Your Certificate of Insurance**.

Means the period beginning 48hours, after 9.00am EST on the day **We** agree to accept **Your** request for cover.

Cover ceases for **Insured Trees** at the completion date of the **Period of Insurance** as listed in **Your Certificate of Insurance**.

Policy

Means the document, the **Certificate of Insurance** and any endorsement to the **Policy**, all of which are to be read together.

Sum Insured

Means in the case of **Insured Trees**, the number of trees **You** have declared to **Us** multiplied by the **Agreed Value** per tree as set out in **Your Certificate of Insurance**, to a maximum amount of \$10,000,000 per **Orchard** or **Grove**.

We, Us, Our, Insurer

Means HDI Global Specialty SE - Australia

You, Your

Means the person or entity named in the **Certificate of Insurance**.

WHAT YOU ARE COVERED FOR

Provided **You** have paid the premium, **We** will insure **You** against loss of, damage to or destruction of **Your Insured Trees** as listed in **Your Certificate of Insurance** caused by any of the **Insured Perils** at **Your Orchard** or **Grove** during the **Period of Insurance**, subject otherwise to the terms, conditions and exclusions of this **Policy**.

Insured Perils

To constitute a claim under this **Policy**, loss of, damage to or destruction of the **Insured Trees** must be caused solely and directly by one or more of the following perils ("**Insured Peril(s)**").

1. Fire

Means loss of, damage to or destruction of **Insured Trees** leading to tree death within 3 months as a direct result of the actual ignition of the tree.

2. Hail Strike

Means loss of, damage to or destruction of **Insured Trees**, causing loss of the lead tip of **Insured Trees** less than 12 months of age and/or tree death within three (3) months, as a direct result of the impact of pellets or stones of frozen rain falling during showers or storms.

3. Explosion

Means loss of, damage to or destruction of **Insured Trees** caused by a sudden and violent release from a container under pressure, excluding damage to or explosion of pressure vessels (which includes but is not limited to boilers, compressors and air receivers and any of their contents) which require certification under law.

4. Lightning

Means loss of, damage to or destruction of **Insured Trees** as a direct result of a sudden discharge of electrically charged particles associated with a storm, leaving visible and physical evidence of the same.

5. Earthquake or Volcanic Eruption

Means loss of, damage to or destruction of **Insured Trees** due to the sudden earth movement associated with seismic activity and includes subterranean fire, or volcanic eruption arising from earthquake.

6. Aircraft

Means loss of, damage to or destruction of **Insured Trees** caused by impact by aircraft, spacecraft or other aerial devices designed to fly, including impact from items dropped from same except chemicals.

7. Impact

Means sudden and violent impact by a vehicle (whether registered or unregistered but not a vehicle being driven by **You** or any of **Your** family or employees) and/or its load and/or an animal (excluding eating, grazing, chewing, clawing or pecking of animals or birds or impact by pets or birds).

Additional Cover Options

1. Wind Storm

Means loss of, damage to or destruction of **Insured Trees**, leading to the uprooting of the tree exposing the root system, the snapping of the stem in two parts, the over bending beyond the trees natural elastic capability severing the flow of nutrients as a direct result of an unusually strong wind event.

In the case of macadamia trees **Wind Storm** is extended to include the breaking of main branches.

2. Removal of Debris & Replanting Costs

We will provide cover for the reasonable incurred costs of debris removal, righting and/or preparing and re planting **Insured Trees** destroyed as a result of a Defined Event or Additional Cover Option, up to a maximum of \$2,000 per hectare during any one **Period of Insurance**.

The agreed Replanting costs are payable for the replanted portion of the **Insured Trees** completed two (2) years from time of the loss or destruction of **Insured Trees** or a date otherwise agreed by Us, and we have been notified of **Your** intention to replant within 6 months from the date of the **Single Cause**.

If **You** replant a different species of tree, the maximum **We** will pay are the reasonable agreed costs, per hectare to replant the same species of **Insured Tree** destroyed.

BASIS OF SETTLEMENT

In the event of a loss, subject otherwise to the terms, condition and exclusions of this **Policy**, the amount **We** will pay **You** will be determined on the basis of the following provisions:

Tree Cover – Agreed Value

The loss adjuster determines the number of **Insured Trees** for each block lost, damaged or destroyed by an Insured Peril. The number will then be multiplied by the **Agreed Value** of the trees of the block in which the loss occurred, plus Additional Expenses if incurred. **You** will be paid accordingly, less the relevant **Deductible** and any savings determined by the loss adjuster. **We** will not pay any more than the **Sum Insured** stated in **Your Certificate of Insurance** for all claims arising during any one **Period of Insurance**.

If **Your** trees are damaged but not destroyed, **We** will pay **You** the actual cost of repairing or restoring the trees, excluding any growing costs which would have been incurred in any event had the damage not occurred, up to an amount not exceeding the **Agreed Value** for each tree as stated in **Your Certificate of Insurance**. **We** will not pay any more than the Sum Insured stated in the **Certificate of Insurance** for all claims arising for all claims during any one **Period of Insurance**.

Additional Cover Option Cover – Wind Storm

If **You** have selected this additional option, the loss adjuster determines the number of **Insured Trees** for each block lost, damaged or destroyed by the insured **Wind Storm** event. The number will then be multiplied by the **Agreed Value** of the trees of the block in which the loss occurred, plus Additional Expenses if incurred. Where damage constitutes the snapping of lateral branches, **We** will pay the portion of the **Agreed Value** equal to the portion of the canopy lost, if it is possible to save **Your** trees from further damage which may result in a claim against **Us**, **We** will pay **You** the actual cost of reinstating, righting and staking the trees, excluding any growing costs which would have been incurred in any event had the damage not occurred, up to an amount not exceeding the **Agreed Value** for each tree as stated in **Your Certificate of Insurance** **We** will not pay any more than the **Sum Insured** stated in the **Certificate of Insurance** for all claims arising during any one **Period of Insurance**.

Additional Cover Option – Removal & Re-establishment

If **You** have selected this additional option, the loss adjuster determines the actual cost of clearing and replanting. The insured will be paid accordingly, less the relevant **Deductible** and any savings determined by the loss adjuster up to the amount stated in **Your Certificate of Insurance**. **We** will not pay any more than the amount stated in the **Certificate of Insurance** for all claims arising during any one **Period of Insurance**.

EXCLUSIONS

We are not liable for loss of, damage to or destruction of **Your Insured Trees** caused directly or indirectly by or arising from, or for:-

- (a) any loss to the reproduction or flowering plant of the tree including any fruit set
- (b) consequential loss of any kind, including but not limited to, loss of quality, loss of market, downgrading or rejection by **Your** contracted buyer or future crops, smoke tainting whether caused by an **Insured Peril** or not;

- (c) vermin, birds, insects, larvae, disease, virus(es), bacteria or fungus howsoever caused regardless whether associated with, prior to, or following the action of an **Insured Peril**;
- (d) rain, sun burn or chill injury or frost, whether associated with or following the action of an **Insured Peril** or not;
- (e) an excess or deficit of water or moisture;
- (f) loss occurring prior to the commencement of the **Period of Insurance** as defined and shown on **Your Certificate of Insurance**;
- (g) water from, or action of, the sea, tsunami, tidal wave, high water;
- (h) war, invasion, acts of foreign enemies, hostilities (whether war is declared or not), civil war, rebellion, revolution, insurrection, military or Usurped power or confiscation or resumption or nationalisation or requisition or destruction of or damage to **Insured Trees** by or under the order of any government or public or local authority;
- (i) **Your** insolvency or bankruptcy or liquidation;
- (j) wilful, dishonest, fraudulent or criminal act or omission of **You** or any member of **Your** family;
- (k) loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from, or in connection with any acts of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss;
This exclusion also includes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to any act of terrorism.
For the purpose of this exclusion an act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf or in connection with any organisation(s) or government(s) which from its nature or context is done for, or in connection with political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.
This exclusion applies notwithstanding any provision to the contrary within this insurance or any endorsement thereto.
- (l) any ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel or the radioactive, toxic, explosive or other

hazardous properties of any explosive nuclear assembly or nuclear component thereof;

- (m) seepage, pollution or contamination;
- (n) fines and/or penalties imposed by contract or law and/or for any trading debts.

We do not provide cover, and We are not liable to pay any claim or provide any benefit under the Policy to the extent that such claim payment or the provision of such cover or benefit would expose Us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, New Zealand, the United Kingdom, the European Union, one (1) of its member states, or the United States of America.

CONDITIONS

To establish a claim under this **Policy You** must comply with the following conditions. Failure to do so may result in the non-payment or reduction of **Your** claim.

1. Claims

In the event of a circumstance which does or could give rise to a claim under this **Policy You** must -

- (a) advise Insurance Facilitators Pty Ltd or **Your** broker within 48 hours by telephone, in person, by email or facsimile of **You** becoming aware of any claim;
- (b) complete and return **Our** claims notification form and supporting maps showing the damaged area;
- (c) take all reasonable steps to reduce the loss and prevent further loss;
- (d) report to the Police if **You** suspect arson or malicious damage;
- (e) give Insurance Facilitators Pty Ltd and their representatives assistance in their inquiries, access to conduct any inspection and remove any samples from the **Orchard** or **Grove** and provide all documents and information **We** deem necessary to quantify the claim;
- (f) be available or have an Authorised representative available when **Our** loss assessor is at the **Orchard** or **Grove**.

2. Deductible

The **Deductible** is stated in **Your Certificate of Insurance** and payable by **You** for each claim under this **Policy**.

3. Premium

The premium charged at the commencement of the **Period of Insurance** is to be considered the first and final payment.

The premium is a calculation of the **Sum Insured** and the risk the **Orchard** or **Grove** represents.

4. Husbandry

You must ensure that the **Insured Trees** will be grown and tended in a manner consistent with generally accepted good husbandry practice and that all reasonable steps and loss prevention measures be taken for the protection and preservation of the **Insured Trees**.

5. Loss Mitigation

You must use due care and agree to do all that is reasonably practical to avoid or diminish any loss or damage covered under this **Policy**.

6. Material Change

You must advise **Us** of any material change to the **Insured Trees** or the risk insured. In the event of any such material change, **We** reserve the right to amend the **Policy** terms and/or conditions, or cancel the **Policy** if **We** deem it appropriate.

7. Other Insurance

You must advise **Us** of all other insurances **You** have relating to the **Insured Trees**.

8. Other Interests

The cover provided by this **Policy** does not extend to an interest that is not **Your** interest (unless it is a third party interest notified to **Us** in writing, and accepted by **Us** in writing and as noted in **Your Certificate of Insurance**). **We** will not be liable under this **Policy** to anybody except **You**.

9. Assignment

No interest in this **Policy** may be transferred to any other party without **Our** prior written consent.

10. Cancellation

You may cancel the **Policy** at any time by advising **Us** in writing. **You** will not be entitled to any refund of premium

We may cancel the **Policy** in accordance with the Insurance Contracts Act 1984. If **We** do, **We** will provide a partial refund of premium in such amount as **We** may determine.

11. Subrogation

If **We** pay a claim, **We** are subrogated to **Your** rights against any other party in relation to the claim.

You must not exclude or limit **Your** rights against any such party. If **You** do, **We** will not pay a claim to the extent **We** can no longer recover from that other party because those rights are affected.

12. Payment of Claims

Subject to all **Our** requirements being met, claims will be settled as soon as practicable.

13. Underinsurance

You will not be covered in respect of any trees which are not listed in **Your Certificate of Insurance**.

If the actual number of trees is greater than the **Insured Tree** area or number of **Insured Trees**, **Your** claim in will be reduced by the underinsurance percentage tree number planted.