

Policy booklet

In plain English including policy summary



THE KENNEL CLUB
PET INSURANCE

Keep this booklet safe

This booklet contains full details of your policy, please keep it in a safe place so that you can refer to it if you need to make a claim.

In the event of a claim

To download a claim form

visit: www.kcinsurance.co.uk

To request a claim form by e-mail

e-mail us at: kcpiclaims@agriapet.co.uk

To discuss a claim

call: 0870 379 9010

Helplines

All policies automatically include access to the following helplines.

Healthcare away from home

call: 0870 609 1438

If you and your dog are away from home whilst in the United Kingdom and your dog needs urgent veterinary care, you have access to a helpline so you can identify the nearest vet to you.

Pet minders

call: 0870 609 1438

This enables you to locate a registered pet minder (on a national basis) for either a few minutes or indeed weeks, in order to look after your dog whilst you are away.

PETS travel scheme

call: 0845 933 5577

For information on how to obtain a PETS Travel Scheme Pet Passport.

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This policy summary does not contain full details and conditions of your insurance – these are located in your policy wording, which should be read in conjunction with your policy schedule.

NAME OF INSURANCE UNDERTAKING

The insurer of this policy for sections 1, 2, 3, 5, 6, 7 & 8a, b, c, d is Agria International Forsakring AB, and the insurer of this policy for sections 4 & 8e is Groupama Insurance Company Limited.

TYPE OF INSURANCE AND COVER

This is dog insurance and the standard policy provides cover for:-

1. The cost of veterinary fees.
2. Advertising and reward costs to help find your dog if it is lost, stolen or strays.
3. Travel and accommodation expenses if your usual vet refers your dog to another vet.
4. Third party liability cover, should you become liable for your dog causing death or injury to another person or damage to property.

In addition to the standard policy, you can opt to add any one or a combination of the following extensions to your policy. These will be noted in your schedule of insurance. The different extensions provide cover for:-

5. The purchase price of your dog if it dies, or is lost by theft or straying.
6. Cover for breeders, for fertility examination, gestation and whelping, and veterinary fees for puppies.
7. Boarding kennel or daily minding fees should you go into hospital; and holiday cancellation costs should your dog require emergency life saving treatment.
8. Overseas travel for quarantine costs, repeat worming treatment, loss of pet passport and emergency expenses cover abroad.

CONDITIONS

You must ensure that your dog has received the required vaccinations. Failure to comply with this may jeopardise your claim(s) and/or policy – please refer to the 'General Conditions' in the policy wording for a full description.

DURATION

This is an annually renewable policy. The period of insurance is shown in your schedule.

CANCELLATION PERIOD

You are free to cancel this policy at any time.

A full explanation of your cancellation rights can be found on page 16 of this booklet.

To exercise your right of cancellation you may telephone us on **0870 379 9090**, email us via our website at www.kcinsurance.co.uk, or write to us at:

Kennel Club Pet Insurance
2b Alton House Office Park
Gatehouse Way
Aylesbury
HP19 8XU

CLAIM NOTIFICATION

To advise us of a claim contact us by telephone on **0870 379 9010**, or download a claim form via our website at www.kcinsurance.co.uk.

MAKING YOURSELF HEARD AND COMPLAINTS

Any complaint you may have should, in the first instance, be addressed to the Kennel Club Pet Insurance. Please refer to the policy wording for details of the complaints procedure.

If you have complained to us and we have been unable to resolve your complaint, you can approach the Financial Ombudsman Service. Referral to the Financial Ombudsman will not affect your right to take legal action.

Full details of addresses and contact numbers can be found within the policy wording.

FINANCIAL SERVICES COMPENSATION SCHEME (FSCS)

Agria International Forsakring AB and Groupama Insurance Company Limited are covered by the FSCS, which is triggered when an authorised firm goes out of business. In this unlikely event you may be entitled to compensation from the scheme:

Compulsory insurance is covered in full.

Non-compulsory insurance is protected for 90% of the claim.

Full details are available at www.FSCS.org.uk

KEY FEATURES, BENEFITS AND SIGNIFICANT EXCLUSIONS (See pages 5 – 15 for full details)

Section 1 – Veterinary Fees

Features and Benefits

Pay all reasonable fees for veterinary treatment of your dog by a vet, up to the maximum veterinary benefit, as specified in your schedule, including: -

- Alternative and/or complementary treatment carried out up to £750,
- Costs of treatment for behavioural problems up to £250,
- 50% of the cost of a prescription diet up to £250,
- Costs for your dog to be cremated or buried up to £150.

Significant Exclusions

- The fixed excess, which is the amount you pay towards the first occurrence of each separate illness or injury claimed for during each period of insurance. In addition to the fixed excess, a percentage excess applies and will be deducted from all claims submitted. The percentage excess will be calculated on the amount left after the fixed excess has been deducted. The fixed and percentage excess applicable to your policy are specified in your schedule.
- Pre-existing medical illnesses and injuries and illnesses occurring within the first 10 days of the start of the policy.
- The cost of any treatment to teeth and gums if your dog has not had regular dental checks and received any treatment recommended as a result of the checks.
- Costs arising from preventative and elective treatment, routine examinations, vaccination, spaying, castration, caesarean section, pregnancy or giving birth.

Section 2 – Advertising & Reward

Features and Benefits

The cost of local advertising, up to a maximum of £1,000, if your dog is lost, stolen or strays, including the cost of a suitable reward up to £250.

Significant Exclusions

- Any amount if your dog is lost, stolen or strays within 10 days of the start of the policy.
- Any amount if you do not ask for our approval before you advertise or try other methods of finding your dog.
- Any amount if you do not notify us within 7 days of your dog becoming lost, stolen or straying.

Section 3 – Travel and Accommodation Expenses

Features and Benefits

The cost of travel and accommodation expenses up to a maximum of £300 per period of insurance, if your usual vet refers your dog to another vet.

Significant Exclusions

- Any amount unless the cost of treatment is covered under 'Section 1 Veterinary Fees'.

Section 4 – Third Party Liability

Features and Benefits

Legal liability up to £2,000,000 if someone is accidentally injured or killed or their property is accidentally lost or damaged as a result of an incident involving your dog.

Significant Exclusions

- The first £100 of each claim for loss or damage.
- Any claim if you have another insurance providing cover for the incident until the cover under the other insurance is fully used.
- Any claim for damages for injury or damage to property where the claimant is a person in your family, lives in your home, works for you or is looking after your dog with your permission.
- Third party liability if your dog injures someone or damages their property whilst outside the United Kingdom, Isle of Man and the Channel Islands.

Sections 5, 6, 7 and 8 are all optional policy extensions that you can choose to add to your policy.

Section 5a – Death due to Illness or Injury

Features and Benefits

The purchase price of your dog, up to a maximum of £2,500, if it dies or has to be put to sleep by a vet following an illness or injury.

Significant Exclusions

- Any amount if the death results from an illness or injury first occurring or showing clinical signs before the policy starts, or in the case of illness, first occurring within the first 10 days of the start of the policy.
- Any claim if your dog dies from an illness and is over the age specified in your schedule.

Section 5b – Loss by Theft or Straying

Features and Benefits

The purchase price of your dog, up to a maximum of £2,500, if it is lost, stolen or strays and is not recovered within 45 days.

Significant Exclusions

- Any amount if the appropriate authorities have not been notified within 48 hours.
- Any amount if your dog is lost, stolen or strays within 10 days of the start of the policy.
- Any amount if you do not notify us within 7 days of your dog becoming lost, stolen or straying.

Sections 6a & 6b – Fertility Examination, Gestation and Whelping

Features and Benefits

The cost of fertility examinations, gestation and whelping up to a combined maximum cost of £1,000.

Significant Exclusions

- The fixed excess, which is the amount you pay towards the first occurrence of each separate illness or injury claimed for during each period of insurance. In addition to the fixed excess, a percentage excess applies and will be deducted from all claims submitted. The percentage excess will be calculated on the amount left after the fixed excess has been deducted. The fixed and percentage excess applicable to your policy are specified in your schedule.
- Any amount for fertility examinations or gestation and whelping treatment arising within 12 weeks of the start of this policy section.
- Any claim once your dog has whelped six litters.

Section 6c – Death due to Gestation or Whelping

Features and Benefits

The purchase price of your dog, up to a maximum of £2,500, if it dies due to an illness or injury connected with gestation or whilst whelping.

Significant Exclusions

- Any amount if your dog is under the age of 1 year or over the age of 7 years, or is over the maximum age for the death benefit, as specified in your schedule.
- Any costs if your dog dies within 12 weeks of the start of this policy section.

KEY FEATURES, BENEFITS AND SIGNIFICANT EXCLUSIONS (See pages 5 – 15 for full details)

Section 6d – Veterinary Fees for Puppies

Features and Benefits

Up to a maximum of £500 for each of your dog's puppies to cover the cost of reasonable and customary fees for veterinary treatment of an illness or injury. This applies from birth to the age of 12 weeks, or from birth to the date of sale if this is before the age of 12 weeks.

Significant Exclusions

- The fixed excess, which is the amount you pay towards the first occurrence of each separate illness or injury claimed for during each period of insurance. The fixed excess is applied per litter. In addition to the fixed excess, a percentage excess applies and will be deducted from all claims submitted. The percentage excess is applied per puppy and will be calculated on the amount left after the fixed excess has been deducted. The fixed and percentage excess applicable to your policy are specified in your schedule.
- Any amount in respect of exclusions listed under 'We Will Not Pay' in 'Section 1 Veterinary Fees'.
- Any claim if your dog is under the age of 1 year or over the age of 7 years at the time of whelping.

Section 7a – Boarding Kennel Fees and Daily Minding if you have to go into Hospital

Features and Benefits

Up to a maximum of £1,000 in total per period of insurance for boarding your dog at a licensed premises, or up to £5 a day, up to the maximum of £1,000, for the cost of paying someone to look after your dog, if you need to go into hospital as an in-patient.

Significant Exclusions

- Any hospitalisation that is either known or foreseeable before the policy starts.
- Any fees incurred where there is a member of your immediate family available to look after your dog.
- Any fees if you have to go into a nursing home or if you are convalescing outside of a hospital.

Section 7b – Holiday Cancellation or Early Return

Features and Benefits

Any travel and accommodation expenses, up to a maximum of £3,000 per period of insurance, if you have to cancel your holiday less than 7 days before you were due to leave because your dog needs emergency life saving treatment or surgery, or cut short your holiday because your dog needs emergency life saving treatment or surgery.

Significant Exclusions

- If you cancel your holiday or come home early because your dog needs treatment or surgery that is not life saving.
- If you cancel your holiday or come home early as a result of a known or foreseeable illness or injury pre-existing to the policy starting, or in the case of illness, occurring within 10 days of the start of the policy.

Sections 8a, 8b, 8c and 8d – Overseas Travel Cover

Features and Benefits

Provided you comply with the PETS Travel Scheme, this insurance extends to cover your dog whilst you are temporarily located in a member country of the PETS Travel Scheme for overseas travel, for up to a maximum total of 120 days, per period of insurance.

Cover provided is for: -

- The cost of kennelling should your dog have to go into quarantine due to illness, up to £2,000 per period of insurance.
- Repeat worming treatment.
- A replacement Pet Passport up to £250.
- Emergency expenses up to £500.
- Third party liability.

Significant Exclusions

- Any claim where you have been overseas for more than 120 days per period of insurance.

GENERAL SIGNIFICANT EXCLUSIONS

- Any dog being under the age of 6 weeks or over the maximum age, as specified in your schedule, at the start of this policy.
- Any event occurring outside the United Kingdom, Channel Islands or the Isle of Man, and the member countries of the PETS Travel Scheme.
- War risks, hostilities, terrorism, revolution, military or usurped power or radioactive contamination.
- Intentional slaughter, by order of any Government, Local Authority or any person having jurisdiction in the matter.
- Any dog which should be registered under the Dangerous Dogs Act 1991 or the Dangerous Dogs Act (Northern Ireland) Order 1991 or any subsequent amendments.
- The use of your dog for commercial security or racing purposes.
- No cover is provided for distemper, hepatitis, leptospirosis and parvovirus in the event that the required vaccinations have not been carried out.

CONTRACT OF INSURANCE

In return for having accepted **your** premium, **we** will, in the event of **illness, injury**, loss or damage happening within the **period of insurance**, provide insurance, as detailed in the following pages and referred to in **your schedule**.

This **policy** booklet and the accompanying **schedule** comprise **your** contract of insurance.

DEFINITIONS

Any word or expression to which a specific meaning has been attached will be emboldened and shall have the same meaning throughout this **policy**.

Alternative Medicine

Means herbal or homeopathic medicine prescribed by a **vet**.

Behavioural disorder

Any change(s) to **your dog's** normal behaviour that is caused by a mental or emotional disorder which could not have been prevented by normal puppy training and socialisation.

Behaviourist

A certified clinical animal **behaviourist** or a member of one of the following organisations:

- Association of Pet Behaviour Counsellors.
- Canine and Feline Behaviour Association.

Breeder

The **breeder** named in the Kennel Club Registration Certificate.

Clinical Sign(s)

Changes in **your dog's** normal health state, its bodily functions or behaviour.

Complementary Treatment

Means physiotherapy, osteopathy, chiropractic treatment provided by a qualified animal physiotherapist, osteopath or chiropractor; hydrotherapy provided by a veterinary practice, a member of the Canine Hydrotherapy Association or a member of The National Association of Registered Canine Hydrotherapists or acupuncture carried out by a **vet**.

Date of Sale

The date the new owner takes possession of the **dog**.

Dog

The **dog** specified in **your schedule**.

Endorsement(s)

These are changes from **our** standard **policy** that specifically apply to **your policy**. Any such changes will be specified in **your schedule**.

Fixed Excess

The amount specified in **your schedule**. This is the fixed amount **you** pay towards the first occurrence of each separate **illness** or **injury** claimed for during each **period of insurance**. When the treatment for an **illness** or **injury** falls into two or more **periods of insurance**, **you** must pay the **fixed excess** for each **period of insurance** and for each separate **illness** or **injury**.

Gestation

Pregnancy – development in the uterus from conception to birth.

Illness

Any change(s) to a normal healthy state; sickness, disease, defects and abnormalities, including defects and abnormalities **your dog** was born with or which were passed on by its parents.

Illness in the first 10 days

- a) An **illness** that first showed **clinical signs** in the first 10 days after **your dog's policy** started, or
- b) An **illness** that is the same as, or has the same diagnosis or **clinical signs** as an **illness** or **clinical sign** **your dog** had in the first 10 days after **your policy** started, or
- c) An **illness** that is caused by, relates to, or results from, an **illness** or **clinical sign** **your dog** had in the first 10 days after **your policy** started, no matter where the **illness** or **clinical sign(s)** are noticed or happen in, or on, **your dog's** body. This is in addition to any **endorsement(s)** stated in **your schedule**.

Immediate Family

Your husband, wife, civil partner, life partner, children or parents residing in **your** home.

Injury

Physical damage or trauma caused by an accident.

Insurers

Sections 1, 2, 3, 5, 6, 7 & 8a, b, c, d.

Agria International Forsakring AB. Registered in Sweden. Company registration number 516406-0542. Registered office: Tegeluddsvagen 11-13, Box 703 06, 107 23 Stockholm, Sweden. Authorised and regulated by the Finansinspektionen, (the Swedish Financial Supervisory Authority)

and subject to limited regulation by the Financial Services Authority. Details about the extent of **our** authorisation and regulation by the Financial Services Authority are available from **us** by request.

Sections 4 & 8e (Third Party Liability).

Groupama Insurance Company Limited, 6th Floor, One America Square, 17 Crosswall, London, EC3N 2LB. Authorised and regulated by the Financial Services Authority.

This can be checked on the FSA's register by visiting the FSA's website at www.fsa.gov.uk/pages/register or by contacting them on 0845 606 1234.

Market Value

The price generally paid for a **dog** of the same age, breed, pedigree and sex at the time **your dog** was born.

Maximum Veterinary Benefit

The most **we** will pay during the **period of insurance**. This amount is specified in **your schedule**.

Percentage Excess

The percentage specified in **your schedule**. This is the percentage of each claim cost that **you** must pay towards all treatment costs. This is the amount that will be deducted from all claims submitted and will be calculated on the amount left after the **fixed excess** has been deducted.

Period of Insurance

The time **your policy** lasts, as specified in **your schedule**.

Pet Passport

The official **PETS Travel Scheme Pet Passport** issued by a **vet** who has been authorised by the Government to do so.

PETS Travel Scheme

The Government scheme allowing **you** to take **your dog** abroad to certain specific countries and re-enter the **United Kingdom** without the need for **your dog** to go into quarantine.

Policy

Your policy booklet and **schedule**, which includes any **endorsement(s)** that apply.

Pre-existing illness or injury

- a) An **injury** that happened, or an **illness** that first showed **clinical signs** before **your dog's policy** started; or,
- b) An **injury** or **illness** that is the same as, or has the same diagnosis or **clinical signs** as an **injury**, **illness** or **clinical sign your dog** had before **your policy** started; or,
- c) An **injury** or **illness** that is caused by, relates to, or results from, an **injury**, **illness** or **clinical sign your dog** had before **your policy** started,

no matter where the **injury**, **illness** or **clinical sign(s)** are noticed or happen in, or on, **your dog's** body. This is in addition to any **endorsement(s)** stated in **your schedule**.

Schedule

The document showing details specific to **you** and **your dog** and the cover **you** have selected. **Your schedule** is part of this **policy**, and must be read in conjunction with the **policy**.

United Kingdom

Shall mean England, Northern Ireland, Scotland, Wales, the Channel Islands and the Isle of Man.

Veterinary Treatment

Any examinations, consultations, advice, tests, x-rays, legally prescribed medication, surgery, hospitalisation, nursing and care provided by or under the supervision of a **vet**.

Vet

A person registered with the Royal College of Veterinary Surgeons.

We/Us/Our

Agria Pet Insurance Limited trading as the Kennel Club Pet Insurance and acting as agents to the **insurers**.

Whelping

Giving birth.

You/Your(s)

The policyholder(s), who are each at least 18 years of age, resident in the **United Kingdom** and who are owner(s) of the **dog**, as specified in **your schedule**.

LAW APPLICABLE TO THIS POLICY

Your policy is governed by English Law unless **you** and **we** have agreed otherwise.

RIGHTS OF THIRD PARTIES

You and **we** are the only parties to this insurance. No other person has any rights under the Contracts (Rights of Third Parties) Act 1999 to enforce any term of this insurance, but this does not affect any right or remedy of a third party which exists or is available apart from this Act.

SECTION 1. VETERINARY FEES

We will pay

The cost of veterinary fees, up to the **maximum veterinary benefit**, for the **veterinary treatment your dog** has received during the **period of insurance**, to treat an **illness** or **injury**.

We will not pay

1. The **fixed excess**, as specified in **your schedule**. In addition to the **fixed excess**, a **percentage excess** may be applicable, as specified in **your schedule**.
2. Fees resulting from a **pre-existing illness or injury** including any **endorsement(s)** specified in **your schedule**.
3. Fees resulting from an **illness in the first 10 days** of **your policy** starting, or as specified in **your schedule**.
4. Fees for the cost of **veterinary treatment** received after the **period of insurance**, unless the **policy** has been renewed.
5. Fees that exceed the **maximum veterinary benefit**.
6. Preventative or elective treatments, routine examinations, vaccinations and any claims for, or arising as a result of: -
 - Any post mortem costs (unless **we** have requested a post mortem to be undertaken),
 - Grooming, de-matting and nail clipping,
 - The removal of dew claws,
 - Routine castration or spaying,
 - The removal of retained testes unless **your dog** has been continuously insured with **us** from before 16 weeks of age,
 - Routine anal gland expression,
 - Routine blood tests,
 - Routine dental treatment, including de-scaling, cleaning and cosmetic dentistry,
 - Routine treatment for worms,
 - Spaying to prevent the recurrence of false pregnancy.
7. The cost of any **veterinary treatment** in connection with false pregnancy if **your dog** has received **veterinary treatment** for two or more episodes of false pregnancy.
8. Fees for **whelping**, caesarean section or any **veterinary treatment** in connection with pregnancy, giving birth or nursing.
9. Fees for killing or controlling fleas and skin mites unless there is evidence of a flea or mite infestation on **your dog**.
10. More than 50% of the cost of a prescription diet for **your dog**, or any cost for prescription diet exceeding £250, in respect of each separate **illness or injury**. This limit of £250 is included within the overall **maximum veterinary benefit**. This benefit only applies once for each separate **illness or injury** during the whole period that **your dog** is insured under the Kennel Club Pet Insurance.
11. Any cost of a prescription diet food not recommended by a **vet**, not manufactured by a pet food manufacturer or a prescription diet that is only prescribed to help **your dog** to lose weight.
12. The cost of drugs purchased over the internet or from a chemist, unless the claim is supported by a copy of the prescription supplied by **your vet** and the receipt for the drug.
13. The cost for **alternative medicine** or **complementary treatment**, which has not been recommended by a **vet**.
14. More than £750 for **alternative medicine** or **complementary treatment** (including hydrotherapy) in respect of each separate **illness or injury**. This limit of £750 is included within the overall **maximum veterinary benefit**. This benefit only applies once for each separate **illness or injury** during the whole period that **your dog** is insured under the Kennel Club Pet Insurance.
15. More than 20 sessions of hydrotherapy for each separate **illness or injury**, nor the cost of hydrotherapy if it is not provided by pool operators who are members of the Canine Hydrotherapy Association (CHA) or a member of The National Association of Registered Canine Hydrotherapists (NARCH) or at a veterinary practice.
16. Fees for the following treatments: -
 - a. Matrix energy field therapy,
 - b. Pulsed magnetic field therapy,
 - c. Shock wave therapy,
 - d. The Bowen technique,
 - e. Reiki massage, or
 - f. Faith healing.
17. The cost of treatment for **behavioural disorders** where the treatment has not been carried out by a **behaviourist** acting under the direction of a **vet**.
18. Any cost for behavioural treatment carried out by a **behaviourist** acting under the direction of a **vet**, which exceeds £250. This limit of £250 is included within the overall **maximum veterinary benefit**. This benefit only applies once for each separate **illness or injury** during the whole period that **your dog** is insured under the Kennel Club Pet Insurance.
19. **Behavioural disorders** that could have been prevented by normal puppy training and socialisation. The cost of training classes is not covered.

20. The cost of pheromone products, including DAP diffusers, unless used as part of a structured behaviour modification programme, and then limited to a maximum period of 6 months. If the **behavioural disorder** recurs after these 6 months, **we** will not cover the cost of any further pheromone treatment products for that **behavioural disorder**.
21. The cost of **veterinary treatment of your dog's** teeth and gums if it has not had its teeth and gums checked by a **vet**, in the 12 months before the first date of **veterinary treatment** of a claim for the cost of **veterinary treatment of your dog's** teeth and gums. It must also have any **veterinary treatment** recommended as a result of the check carried out in the same 12 month period.
22. Treatment for under/overshot jaws, crowns and root canal procedures.
23. Organ transplantation, including pre and post-operative care.
24. The cost of any prosthesis, including any **veterinary treatment** needed to fit the prosthesis, other than eye lens implants or the cost of hip and/or elbow replacement.
25. The cost of house calls unless **your vet** confirms that to move **your dog** would seriously endanger its health and the cost for **your dog** to stay at a veterinary practice unless its **veterinary treatment** can only be given at a veterinary practice. The cost to transport **your dog** to a veterinary practice and any costs to move **your dog** within a veterinary practice.
26. Euthanasia that is not recommended by **your vet**.
27. Any costs for cremation or burial that exceed £150, or if the death of **your dog** is due to an **illness** or **injury** which is not covered by **your policy**. This limit is included within the overall **maximum veterinary benefit**.
28. Fees for putting **your dog** to sleep and/or the cost of cremation or burial if **your dog** is put to sleep due to aggression, unless this can be attributed to an **illness**.
29. Any travel expenses incurred by **your vet**.
30. Any administration fees to fill in a claim form, refer **your dog** to another veterinary practice, admit **your dog** to a veterinary practice or any costs for postage, packaging and couriers.
31. Any claim for any form of housing, including cages, or bedding needed for the treatment or wellbeing of **your dog**.
32. Any claim as a result of a "notifiable" disease e.g. Rabies.
33. Any costs for bathing **your dog** unless a **vet** confirms that **your dog** can only be bathed by a **vet** or a member of a veterinary practice.

How to Claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Ask **your vet** to fill in the claim form and provide any extra documents and supporting information that **we** ask for.
3. If it is more convenient, and **your vet** agrees, **we** can pay claims directly to **your vet**, after deductions. **You** can tell **us** to do this when **you** make a claim.
4. Unless **we** have **your** agreement to do so, **we** will not pay anyone other than **you**.
5. In the event that **your dog** requires **veterinary treatment** whilst temporarily in Eire or a member country of the **PETS Travel Scheme**, and **you** have opted for cover under "Section 8, Overseas Travel", as specified in **your schedule**:
 - a. Payment of any treatment will be made by **you** to the **vet** whilst **you** are there.
 - b. Upon return home **you** should telephone **us** immediately and report the claim – telephone 0870 379 9010. **We** will forward **you** a claim form for **you** to complete and return.
 - c. This claim form must be returned complete with all paid veterinary receipts. Settlement of eligible claims will be made to **you**, after any applicable deductions have been made, in sterling at the current rate of exchange. Such payments discharging **us** from all further liability connected with such claims.

SECTION 2. ADVERTISING AND REWARD

We will pay

If **you** try to find **your dog** after it is lost, stolen or strays, during the **period of insurance**, **we** will pay **you** up to a maximum of £1,000 for advertising and reward costs. **You** must contact **us** before **you** pay any advertising costs or reward for trying to find **your dog**. This includes up to £250 for the reward costs to recover **your dog** if it is lost, stolen or strays.

We will not pay

1. Any amount exceeding £1,000 during the **period of insurance**.
2. Any amount if **your dog** is lost, stolen or strays within 10 days of the **policy** start date.
3. Any amount if **you** do not notify **us** within 7 days of **your dog** becoming lost, stolen or straying.
4. Any money **you** spend trying to find **your dog** if **we** have not agreed to the way in which **you** are doing this.
5. Any amount if **you** employ a company or organisation to search for **your dog**, report **your dog** missing, provide a contact point or produce their branded advertising material for **you**.
6. Any reward to a person living with **you**, any member of **your** family, person employed by **you** or person caring for **your dog** at the time it was lost or stolen.

7. If **you** do not notify the appropriate local authority within 48 hours and provide evidence of this notification.
8. If **you** do not notify **your vet**, other local **vets** and animal rescue centres in **your** vicinity.

How to Claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. **You** must contact **us** within 7 days of **your dog** becoming lost, stolen or straying so that **we** can validate and authorise **your** claim.
3. **You** must notify, within 48 hours, the appropriate local authority and provide evidence of this notification. **You** must also notify **your vet**, other local **vets** and rescue centres in **your** vicinity.
4. Ask for **our** approval before **you** advertise or try other methods of finding **your dog**.
5. Send **us** the receipts for advertising costs and copies of any adverts placed.
6. If **you** are claiming for a reward **you** have paid, **we** will also need:
 - a. An explanation of where and how **your dog** was found,
 - b. A receipt with the full name and address of the person who found **your dog**,
 - c. The reward amount **you** have paid them.

SECTION 3. TRAVEL AND ACCOMMODATION EXPENSES

We will pay

Up to a maximum of £300 per **period of insurance** for reasonable travel and accommodation expenses that **you** or any member of **your** family permanently residing with **you** incur if **your dog** has an **illness** or **injury** during the **period of insurance** and **your** usual **vet** refers **you** to another **vet** for **veterinary treatment of your dog**. Travel expenses are covered based on an allowance of 25 pence per mile.

We will not pay

1. Any amount exceeding £300 per **period of insurance**.
2. Any amount unless the cost of **veterinary treatment** of the **illness** or **injury** is covered under 'Section 1 Veterinary Fees'.
3. Any amount to travel to or from **your dog's** usual veterinary practice or to, from or in between any practice or branch practice of a group of veterinary practices **your** usual veterinary practice belongs to.
4. Any amount to travel to a hydrotherapy centre that **your vet** refers **your dog** to.

How to Claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. **We** will require appropriate receipts for any accommodation and travel expenses.

SECTION 4. THIRD PARTY LIABILITY

We will pay

Up to £2,000,000, which **you** become legally liable to pay as compensation or damages (including costs), for any claim/series of claims arising from any one event that happens during the **period of insurance**, if someone is accidentally injured or accidentally killed or their property is accidentally damaged as a result of an incident involving **your dog**.

For the purposes of this section the definition of '**you**' and '**your(s)**' is extended to include any person looking after **your dog** with **your** permission, providing **you** did not agree to pay them to look after **your dog**. **We** will still pay as long as the **injury** or damage was not to them or their property.

We will not pay

Any liability caused by or arising from:

1. Any business or profession.
2. The hiring out of any animal.
3. Any agreement which imposes a liability on **you** which **you** would not be under in the absence of such an agreement.
4. Loss of or damage to property in the ownership, custody or control of **you** or **your** family or household, or any person employed by members of **your** household or any person looking after **your dog** with **your** permission.
5. Accidental bodily **injury** to or disease contracted by **you** or any member of **your** family or persons permanently residing with **you** or any person looking after **your dog** with **your** permission.
6. Accidental bodily **injury** to or disease contracted by any person who is under a contract of service or apprenticeship with **you** when such **injury** or disease arises out of and in the course of employment by **you**.
7. Passing on any disease or virus.
8. Ownership or use of any motorised vehicle.
9. Fines, penalties or **your** breach of quarantine restrictions or import or export regulations.
10. Any damages, costs or expenses if **you** are insured under any other liability **policy**, unless that cover has been exhausted.
11. Any claim arising outside the **United Kingdom**.
12. The first £100 of each claim for loss or damage.

How to Claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. If **your dog** injures someone or damages their property, contact **us** immediately and advise **us** of any possible claim. **We** will then give **you** instructions on what to do with any letter, claim, writ or summons.
3. Do not admit or accept liability, negotiate or make any payment or promise of payment without **our** written consent to do so.
4. Do not answer letters from people who may claim against **you** or who are acting for people who may claim against **you** without **our** written consent.
5. **We** will have the sole conduct and control of any claim and legal proceeding relating thereto including the right to take proceedings in **your** name but for **our** benefit for any claim, damages or liability.

SECTION 5. DEATH OR LOSS BY THEFT OR STRAYING

This section is only applicable if **you** have opted for cover under this section as specified in **your schedule**.

SECTION 5A. DEATH DUE TO ILLNESS OR INJURY

We will pay

1. The purchase price **you** paid for **your dog**, up to a maximum of £2,500, if **your dog** dies due to an **illness** or **injury** that happens or shows **clinical signs** during the **period of insurance**.
We will pay **you** this money even if **we** have already paid for veterinary fees to treat the **illness** or **injury**.
2. In the absence of a purchase receipt, **we** will pay the **market value**.

We will not pay

1. Any amount exceeding £2,500.
2. If **your dog** dies from an **illness** when **your dog** is over the maximum age, as specified in **your schedule**.
3. If **your dog** dies from a **pre-existing illness or injury** or an **illness in the first 10 days** of **you** taking out **your policy**.
4. If **your dog** dies due to an **illness** or **injury** connected with **gestation** or whilst **whelping**, during the **period of insurance**.
5. If the death of **your dog** is due to euthanasia:
 - a. Unless as a result of an incurable **illness** or untreatable **injury** and the **vet** confirms it was not humane to keep **your dog** alive because it was suffering,
 - b. As a result of aggression unless this can be attributed to an **illness**.
6. Any amount unless **your vet** confirms that **your dog** has died.

How to Claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Send a claim form to **us**, signed by **your vet**, as confirmation of **your dog's** death, along with the purchase receipt and a copy of the pedigree certificate.

SECTION 5B. LOSS BY THEFT OR STRAYING

We will pay

1. The purchase price **you** paid for **your dog**, up to a maximum of £2,500, if during the **period of insurance**, **your dog** is lost, stolen or strays and **you** don't get **your dog** back within 45 days.
2. In the absence of a purchase receipt, **we** will pay the **market value**.
3. If **you** get **your dog** back after **we** have paid **you**, **you** must pay back all of the money **we** paid.

We will not pay

1. Any amount exceeding £2,500.
2. If **you** do not notify the appropriate local authority within 48 hours and provide evidence of this notification.
3. If **you** do not notify **your vet** and other local **vets** and animal rescue centres in **your** vicinity.
4. Any amount if **your dog** is lost, stolen or strays within 10 days of the **policy** start date.
5. Any amount if **you** do not notify **us** within 7 days of **your dog** becoming lost, stolen or straying.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. You must notify **us** within 7 days of **your dog** becoming lost, stolen or straying so that **we** can validate and authorise **your** claim.
3. You must notify, within 48 hours, the appropriate local authority and provide evidence of this notification. **You** must also notify **your vet**, other local **vets** and rescue centres in **your** vicinity.
4. Send the completed claim form to **us**, after 45 days along with:
 - a. The purchase receipt.
 - b. A copy of the pedigree certificate.

SECTION 6. BREEDING COVER

This section is only applicable if **you** have opted for cover under this section as specified in **your schedule**.

SECTION 6A. FERTILITY EXAMINATION

We will pay

1. Fees for fertility examinations and tests for **your dog** during the **period of insurance** if she is suspected to be infertile, providing she has failed to conceive after two matings with two different and proven fertile male dogs.
2. Fees for fertility examinations and tests for **your dog** if he is suspected to be infertile, providing he has failed to produce a litter after two matings with two different and proven fertile female dogs.
3. The cost of fertility **veterinary treatment**.

Note - the following fertility examinations and tests will be paid for:

Female Dog

- A clinical examination of **your dog** to exclude any temporary problems including the reproductive organs (palpation and vaginoscopy).
- An ultrasound of the uterus and ovaries.
- Vaginal cytology, blood tests - haematology (complete blood count, including haemoglobin, haematocrit, leukogram, blood platelets) and ALAT, creatinine, glucose and total T4 and TSH.

Male Dog

- A clinical examination of **your dog** to exclude any temporary problems including the reproductive organs (palpation and inspection).
- Blood tests - haematology (complete blood count, including haemoglobin, haematocrit, leukogram, blood platelets) and ALAT, creatinine, glucose and total T4 and TSH.
- Test of sperm quality with a six month interval.

We will not pay

1. The **fixed excess**, as specified in **your schedule**, shall be applied from the date of the earliest **veterinary treatment** for which **you** make a claim. In addition to the **fixed excess**, a **percentage excess** will be deducted from the cost of **veterinary treatment** that exceeds the **fixed excess**.
2. Any amount exceeding £1,000 per **period of insurance** for sections 6A and 6B combined.
3. Fees for fertility examinations or tests for **your dog**, if he has already sired three litters of puppies, or is over the age of six years with no previous sired litter.
4. Any costs for surgery to correct the infertility disorder.
5. Any costs arising from a fertility disorder, which arises before or within 12 weeks of the start of this section of cover (section 6).
6. Any fees if **your female dog** is under the age of 1 year or over the age of 7 years.
7. Any claim once **your dog** has whelped 6 litters.
8. The cost of tests to predict ovulation and to find out the best time for fertilisation.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Send the claim form to **us**, after **your dog** has undergone the fertility examination and/or treatment, together with the relevant invoices.
3. Together with the claim form, forward documentation of previously failed matings, and also litters previously sired by mated dog or produced by mated bitch.

SECTION 6B. GESTATION AND WHELPING

We will pay

The cost of **veterinary treatment** received during the **period of insurance** as a result of one of the following happening in the **period of insurance**:

1. Complications from **gestation**.
2. Dystocia (difficulty in giving birth).
3. Weak or fading puppies, whether in connection with dystocia or not, providing the puppies are not older than 7 days when the first signs or symptoms are noted.

We will not pay

1. The **fixed excess**, as specified in **your schedule**, shall be applied from the date of the earliest **veterinary treatment** costs arising for which **you** make a claim. In addition to the **fixed excess**, a **percentage excess** may be deducted from the cost of **veterinary treatment** that exceeds the **fixed excess**.
2. Any amount exceeding £1,000 per **period of insurance** for sections 6A and 6B combined.
3. Any amount if **your dog** has had two or more caesarean sections.

4. Fees for caesarean sections in the following breeds:
 - English Bulldog
 - French Bulldog
 - Boston Terrier
 - Pekingese
5. Elective caesarean sections.
6. Fees for examination to confirm pregnancy.
7. Any costs for **veterinary treatment** due to **gestation**, dystocia or weak or fading puppies, which arise within 12 weeks of the start of this section of cover (section 6).
8. Any claim once **your dog** has whelped 6 litters.
9. Any fees if **your dog** is under the age of 1 year or over the age of 7 years.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Send the claim form to **us**, along with any relevant receipts, when the treatment is over.

SECTION 6C. DEATH DUE TO GESTATION OR WHELPING

We will pay

1. The purchase price **you** paid for **your dog**, up to a maximum of £2,500, if **your dog** dies due to an **illness** or **injury** connected with **gestation** or whilst **whelping** during the **period of insurance**.
2. The purchase price, even if **we** have already paid for veterinary fees to treat **your dog**.
3. In the absence of a purchase receipt, **we** will pay the **market value**.

We will not pay

1. Any amount exceeding £2,500.
2. If **your dog** dies when **your dog** is under the age of 1 year or over the age of 7 years or is over the maximum age for the death benefit, as specified in **your schedule**.
3. If **your dog** dies within 12 weeks of the start of this section of cover (section 6).
4. Any amount unless the **vet** confirms it was not humane to keep **your dog** alive because it was suffering.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Send a claim form to **us**, signed by **your vet**, as confirmation of **your dog's** death, along with the purchase receipt and a copy of the pedigree certificate.

SECTION 6D. VETERINARY FEES FOR PUPPIES

We will pay

Up to a maximum of £500 for each puppy of **your dog** for the cost of reasonable and customary fees made for **veterinary treatment**, of an **illness** or **injury**, **your** puppy has received during the **period of insurance**. This applies from birth to the age of 12 weeks, or from birth to the **date of sale** if this is before the age of 12 weeks.

We will not pay

1. In respect of the exclusions listed under 'We will not pay' in 'Section 1, Veterinary Fees'.
2. The **fixed excess**, as specified in **your schedule**, which shall be applied per litter. In addition to the **fixed excess**, a **percentage excess** will be deducted, for each puppy, from the cost of **veterinary treatment** that exceeds the **fixed excess**.
3. Any costs for **veterinary treatment**, which arises before or within 12 weeks of the start of this section of cover (section 6).
4. Any costs for **veterinary treatment** occurring after the age of twelve weeks or **date of sale**, whichever comes first.
5. Any fees if **your dog** is under the age of 1 year or over the age of 7 years at the time of **whelping**.
6. The cost of treatment for a Sire's puppies.
7. Any claim for puppies if **your dog** has whelped more than 6 litters.
8. Any amount for the **market value** of the puppies.
9. Any costs for formula milk or equipment necessary for hand rearing.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Ask **your vet** to fill in the claim form and send this to **us** along with any relevant receipts when the treatment is over.

SECTION 7. BOARDING FEES DUE TO HOSPITALISATION AND HOLIDAY CANCELLATION

This section is only applicable if **you** have opted for cover under this section as specified in **your schedule**.

SECTION 7A. BOARDING FEES OR DAILY MINDING

We will pay

Up to a maximum of £1,000 per **period of insurance** if **you**, or a member of **your immediate family**, have to go into hospital during the **period of insurance** for more than 4 days and **you** have to leave **your dog** in the care of a licensed boarding kennel, or up to £5 a day up to the maximum benefit of £1,000 if **you** choose to pay someone to look after **your dog** ('daily minding').

We will not pay

1. Boarding kennel/daily minding fees incurred as a result of the hospitalisation of anyone other than **you** or a member of **your immediate family**.
2. Boarding kennel/daily minding fees incurred as a result of hospitalisation required due to **your** pregnancy, drug abuse, alcoholism, attempted suicide, self-inflicted injuries or elected cosmetic surgery.
3. Boarding kennel/daily minding fees where a member of **your immediate family** is available to look after **your dog**.
4. Boarding kennel/daily minding fees incurred due to any known pre-existing medical condition likely to give rise to **your** hospitalisation.
5. If **you** have to go into a nursing home or if **you** are convalescing outside of a hospital.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. When **you** leave hospital, obtain a medical certificate and send **us** the medical certificate, the receipt from the boarding kennels and a letter of explanation.
3. There must be no member of **your immediate family** able to look after **your dog**. **We** must agree to the amount to be paid to the person looking after **your dog** before they accept any responsibility, unless emergency hospital treatment is required.
4. The claim must be supported by written confirmation from the person looking after **your dog** that the agreed sum has been received.

SECTION 7B. HOLIDAY CANCELLATION OR EARLY RETURN

We will pay

Up to a maximum of £3,000, per **period of insurance**, for any non-recoverable cancellation or curtailment costs in respect of unused travel and accommodation costs, in the event that:

1. **You** and/or **your immediate family** member(s) come home early because **your vet** believes **your dog** needs emergency life saving treatment or surgery.
2. **You** cancel **your** holiday less than 7 days before **you** were due to leave because **your vet** believes **your dog** needs emergency life saving treatment or surgery.

We will not pay

1. Costs for anyone else who is on the holiday with **you**, unless they are an **immediate family** member.
2. If **you** cancel **your** holiday or come home early because **your dog** needs treatment or surgery which is not considered to be life saving.
3. If **you** booked **your** holiday less than 28 days before **you** were due to leave.
4. If **you** cancel **your** holiday or come home early as a result of any **pre-existing illness or injury**.
5. If **you** cancel **your** holiday or come home early due to an **illness** occurring within 10 days of the start of **your policy** which requires emergency life saving treatment or surgery.
6. Where **you** can get these expenses back from anywhere else, for example, from travel insurance.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. Send **us** receipts for the expenses **you** are claiming and a letter explaining when and why **you** had to pay each expense.

SECTION 8. OVERSEAS TRAVEL

This section is only applicable if **you** have opted for cover under this section as specified in **your schedule**.

SECTION 8A. OVERSEAS QUARANTINE COSTS

We will pay

Up to a maximum of £2,000 per **period of insurance**, for up to a maximum of 120 days overseas towards:

1. Quarantine kennelling costs and costs incurred in getting a new **Pet Passport** for **your dog**, should a microchip of ISO Standard 11784 or Annex A to ISO Standard 11785 fail.
2. Quarantine kennelling costs should, despite compliance with all the required regulations of the **PETS Travel Scheme**, **your dog** have to go into quarantine due to an **illness**.

We will not pay

1. Any fees if the microchip was not checked and found to be functioning properly within 14 days of **your** departure on a trip.
2. Any fees arising from any **illness** of which **you** were aware before the start of the trip.
3. Any claims where **you** have been overseas for more than 120 days, during the **period of insurance**.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. **We** will ask **you** to support **your** claim with documentary evidence that **your dog** was microchipped prior to **your** trip with a microchip of ISO Standard 11784 or Annex A to ISO Standard 11785.

SECTION 8B. REPEAT WORMING TREATMENT

We will pay

We will reimburse **you** for reasonable fees incurred by **you** in getting repeat worming treatment for **your dog**, if they arise as a direct result of **your** departure, during the **period of insurance**, for the **United Kingdom** being delayed by **your** carrier.

We will not pay

1. Any costs incurred in obtaining the initial worming treatment.
2. Any costs incurred if the initial worming treatment was not performed in the time-scale required by the **PETS Travel Scheme**.
3. Any costs incurred if the repeat worming treatment was not necessary in order to comply with the **PETS Travel Scheme**.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. **We** will ask **you** to support **your** claim with documentary evidence of the dates that **you** left and returned to the **United Kingdom** and that the initial worming treatment was obtained and necessary to comply with the **PETS Travel Scheme** and that this was done in the time-scale required by the **PETS Travel Scheme**.

SECTION 8C. LOSS OF PET PASSPORT

We will pay

Up to a maximum of £250 towards the cost of a replacement **Pet Passport**, should the original **Pet Passport** become lost, during an overseas trip in the **period of insurance**. This includes any quarantine costs incurred as a direct result of the loss of the **Pet Passport**.

We will not pay

1. Any destruction, loss or theft of the **Pet Passport** that occurs prior to the start of **your** overseas trip.
2. Any claim where the loss of the **Pet Passport** is not reported to the issuing **vet** within 24 hours of discovery.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on page 17.
2. **We** will ask **you** to support **your** claim with documentary evidence that the loss of the **Pet Passport** was reported to the issuing **vet** within 24 hours of discovery.

SECTION 8D. EMERGENCY EXPENSES ABROAD

We will pay

Up to a maximum of £500, per **period of insurance**, up to a maximum of 120 days overseas towards the costs of one of the following events happening during the **period of insurance**:

1. Reasonable additional accommodation expenses and repatriation of **you** and **your dog** should **your dog** need emergency **veterinary treatment** and as a result of this **you** miss **your** return travel to the **United Kingdom**.
2. Reasonable additional accommodation and transportation costs incurred by **you**, due to **your dog** becoming lost during a journey, whilst **you** try to find **your dog** before the due date of **your** return to the **United Kingdom**.
3. Reasonable additional accommodation and transportation costs incurred by **you** for up to 4 days if **your dog** is lost or strays before the date **you** are due to return to the **United Kingdom** and **you** elect to remain in the country where **your dog** went missing in an attempt to find **your dog**.
4. Reasonable additional accommodation expenses and repatriation of **you** and **your dog**, should **your** scheduled departure to the **United Kingdom** be missed as a direct result of the loss of **your dog's** **Pet Passport**.
5. Reasonable additional accommodation expenses and repatriation costs for **you** and **your dog**, should **you** be unable to get the re-scheduled departure for the **United Kingdom** as a direct result of having to get the worming treatment repeated because **your** original departure for the **United Kingdom** was delayed by the carrier.

We will not pay

1. For any claims where **you** have been overseas for more than 120 days, during the **period of insurance**.

How to claim

1. Please ensure that **you** comply with the 'Claims Conditions' and 'How to Claim Conditions' specified on pages 17 & 18.
2. **We** will ask **you** to support **your** claim with documentary evidence that **your dog** required emergency **veterinary treatment**, or that **you** reported **your dog** as missing at the local police station and animal welfare organisations within 48 hours of loss.
3. **We** will ask **you** to support **your** claim with documentary evidence that the loss of the **Pet Passport** was reported to the issuing **vet** within 24 hours of discovery.

4. **We** will ask **you** to support **your** claim with documentary evidence that **your** original departure for the **United Kingdom** was delayed by **your** carrier, and that the worming treatment was repeated as a direct result.

SECTION 8E. OVERSEAS LIABILITY TRAVEL EXTENSION

The definition of TERRITORIAL LIMITS under SECTION 4 – THIRD PARTY LIABILITY is hereby restated as follows:

- the **United Kingdom** and any member country of the **PETS Travel Scheme** as listed by DEFRA for overseas travel up to a maximum 120 days per **period of insurance**.

The indemnity provided by SECTION 4 – THIRD PARTY LIABILITY shall extend to apply in respect of liability if someone is accidentally injured or killed or their property is accidentally lost or damaged as a result of an incident involving **your dog** within the TERRITORIAL LIMITS.

Exclusion 11 of SECTION 4 – THIRD PARTY LIABILITY is hereby deleted and restated as follows:

- Any claim arising outside the TERRITORIAL LIMITS.

TERRITORIAL LIMITS

Your **dog** is covered whilst in the **United Kingdom**; however Third Party Liability – Section 4 cover does not apply to Eire.

If **you** have opted for cover under "Section 8, Overseas Travel", as specified in **your schedule**, in accordance with the European Economic Community regulations and provided that **you** comply with the **PETS Travel Scheme**, this **policy** also extends to cover **your dog** under this scheme whilst temporarily located in any member country of the **PETS Travel Scheme** during the **period of insurance**. Please check the insurance cover requirements for **your dog** for the specific country of destination with **your** travel agent before travelling.

GENERAL EXCLUSIONS

We will not pay for claims arising directly or indirectly from:

1. Your **dog** being under the age of 6 weeks, or over the maximum age, as specified in **your schedule**, when **you** take out the **policy**.
2. Any event occurring outside the 'Territorial Limits', specified above.
3. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
4. Terrorism, this being 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 of or in connection with any organisation(s) or government(s), committed for 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.
5. Ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
6. The radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
7. Intentional slaughter, irrespective of any order by Government, Local Authority or any person having jurisdiction in the matter, except in the case of humane destruction to alleviate incurable and inhumane suffering.
8. Your **dog** if it should be registered under the Dangerous Dogs Act 1991 and the Dangerous Dogs Act (Northern Ireland) Order 1991 or any subsequent amendments.
9. Malicious or wilful **injury** or gross negligence to **your dog** caused by **you**, **your** agents, employees, members of **your** family or a **vet**.
10. Any medication not prescribed by a **vet** or **veterinary treatment** not provided by a **vet**.
11. A **pre-existing illness or injury** or an **illness in the first 10 days** of the start of **your policy**, or as specified in **your schedule**.
12. The use of **your dog** for commercial security or racing purposes.
13. Any liability where **you** are entitled to indemnity under any other insurance, unless the cover has been exhausted.
14. Infringement of **United Kingdom** animal health and importation legislation.
15. Any claims under any section of the **policy** where the premium has not been paid.
16. Any claims when **you** are no longer the owner of **your dog**.
17. No cover is provided for distemper, hepatitis, leptospirosis and parvovirus in the event that the required vaccinations have not been carried out.
18. Where **you** have cover under sections 5a and 6c no more than one purchase price benefit shall be payable up to a maximum of £2,500.

GENERAL CONDITIONS

You must comply with the following conditions to have the full protection of **your policy**. If **you** do not comply, **we** may, at **our** option, cancel the **policy**, refuse to deal with **your** claim or reduce the amount of any claim payment.

1. **You** must keep **your dog** vaccinated against distemper, hepatitis, leptospirosis and parvovirus, unless advised otherwise by **your vet**. All vaccinations must be administered under veterinary supervision. Homeopathic vaccines are not acceptable.
2. Any benefits payable are subject to **your policy** remaining in force and premiums being kept up to date and subject to the terms and conditions of **your policy**.
3. **You** must take all reasonable precautions to prevent **illness, injury**, loss and theft.

4. **You** will agree that **your** current or previous **vet** may release information and/or records regarding any **dog** insured to us. If the **vet** charges **you** for this information **you** will have to pay.
5. You are aged 18 or over, live in the **United Kingdom** and are the owner of **your dog** and it lives with **you**.
6. In relation to any third party liability claims, **we** may pay up to the limit of indemnity or lesser amounts for which any claim can be settled (after deduction of any sum or sums already paid as compensation) and shall be released from any further liability under this **policy**. (Except for costs and expenses of litigation recoverable or incurred with **our** consent prior to the date of such payment). **You** must take all reasonable precautions to prevent **injury** or damage.
7. The **policy** is an annual contract of insurance that **you** can choose to pay by monthly instalments or as a single premium payment. If the premium is paid under a monthly instalment option and a claim has been settled during the **period of insurance**, except any claims under Sections 1, 2, 3, 5 and 6c where **your dog** has died or is lost or stolen, **you** must continue with the instalment payments until the end of the **period of insurance**. Alternatively **we** will deduct outstanding instalments from any claim payment that may be due to **you**. If the annual payment option is chosen and a claim is paid, no premium will be refunded if cancelled during the **period of insurance**.
8. If **you** pay by monthly instalments it is **your** responsibility to make sure **your** bank pays **your** instalments on time. If **you** do not pay a monthly instalment on time **your** insurance will stop on the date the instalment should have been paid. To continue **your** insurance **you** must pay any outstanding instalments within 28 days of the date the missed instalment should have been paid and make arrangements to pay future instalments on time.
9. If **you** pay by monthly instalments and during the **period of insurance** **you** have not paid 2 monthly instalments on time and another instalment is not paid on time **your** insurance will stop on the date the instalment should have been paid. If **we** agree to continue **your** insurance **you** will have to pay any outstanding instalments and the instalments for the rest of the **period of insurance** in one payment. This payment must reach **us** within 28 days of the date the third missed instalment should have been paid.
10. You may cancel this **policy** at any time by telephoning **us** on 0870 379 9090, or by emailing **us** via **our** website at www.kcinsurance.co.uk, or in writing to **us** at:
 Kennel Club Pet Insurance
 2b Alton House Office Park
 Gatehouse Way
 Aylesbury
 HP19 8XU

We will calculate any refund due to **you** on the following basis:

- If **you** cancel this **policy** within the first 14 days after the later of the day of purchase of the contract or the day on which **you** receive **your policy** documentation, provided that there has been no claim(s) or incident(s) that may give rise to a claim(s), **we** will refund any premium that has been paid.
 - If **you** cancel 14 days after the day of purchase or 14 days after **you** receive **your policy** documentation, whichever is the later date, provided that there has been no claim(s) or incident(s) that may give rise to a claim(s), then **we** will calculate the refund on the following basis: -
 - If **you** pay **your** premium by monthly instalment, no refund will be payable.
 - If **you** paid a single premium, then a proportionate refund will be provided for the unexpired term of **your policy**.
 - If a claim has been submitted or there has been any incident likely to give rise to a claim during the current **period of insurance** no premium refund will be given.
11. **We** reserve the right to cancel this **policy** providing 30 days prior written notice by registered post to **your** last known address. Any premium refund will be calculated in accordance with 'General Conditions', point 10.
 12. If **your** premiums are not paid as per the agreed **schedule**, **we** may cancel this **policy** by giving 7 days notice to **you** at **your** last known address.
 13. The **maximum veterinary benefit** must be chosen at the start of **your policy** and cannot be increased at a later date. However the **maximum veterinary benefit** can be decreased at the renewal of **your policy**.
 14. If at the start of **your policy** **you** opted to include the cover provided under either/or both of Sections 5 'Death or Loss by Theft or Straying', and/or 7 'Boarding Fees due to Hospitalisation or Holiday Cancellation', either/or both of these sections can only be removed at the renewal of **your policy**.
 15. If at the start of **your policy** **you** opted to include, or add at a later date, the cover provided under either/or both of Sections 6 'Breeder Cover', and/or 8 'Overseas Travel', either/or both of these sections can only be removed at the renewal of **your policy**.
 16. In the event of any disagreement between **your vet** and **our vet**, an independent **vet**, mutually agreed upon by both sides, will be appointed to act as arbiter and whose decision will be binding on both sides.
 17. If **we** offer to renew **your policy** **we** may change **your** premium, increase **your** premium because of the risk of future claims, change the **policy** terms, conditions, **policy** excesses and the monetary amount of cover under any section.

CLAIMS CONDITIONS

1. In the event of any possible claim under this insurance **you** must notify **us** as soon as possible and before **your** renewal date. For claims under Sections 2 & 5b of this **policy you** must notify **us** not later than 7 days after any possible incident likely to result in a claim. If **you** do not contact **us** within a reasonable time (or 7 days for Sections 2 & 5b) of the incident, and the delay prejudices **our** ability to verify the claim then, other than in exceptional circumstances, **we** will be unable to deal with **your** claim.
2. If any liability under this insurance, except Third party liability, is covered by any other insurance contract **we** will not pay more than **our** rateable proportion. **You** must tell **us** the name and address of the other insurance company and **your policy** number with them.
3. Following a claim **we** shall be entitled to take over and exercise any rights in **your** name against any other party for **our** own benefit and at **our** own expense to recover any payment **we** have made under this **policy**.
4. **We** have the right to request further information either directly from the **vet** or from **you** to confirm the validity of the claim at **your** expense.
5. **We** reserve the right to instruct external claims investigators in order to help the assessment of **your** claim. If external claims investigators are instructed, then this may delay the assessment of **your** claim.
6. **We** will pay **your** claim:
 - a. If the claim form is correct and complete,
 - b. When **we** have all the information needed to support the claim,
 - c. When **we** are sure that the claim is valid,
 - d. When any legal action or other action has been settled.
7. **You** are required to provide **us** with all the information that may reasonably be required.

FRAUD

We will investigate any activity that **we** suspect may be fraudulent. Fraud increases the premiums of all policyholders. **You** must not act in a fraudulent manner. If **you** or anyone acting for **you**:

1. Make a claim under the **policy** knowing the claim to be false or fraudulently exaggerated in any respect or,
2. Make a statement or submit a document in support of a claim knowing it to be false or incorrect in any respect or,
3. Make a claim in respect of any loss or damage caused by **your** wilful act or with **your** connivance or,
4. Make any claim with **us** that involves **your** dishonesty,
5. Gives **us** reasonable grounds to suspect **you** have acted fraudulently or dishonestly.

Then:

1. **We** shall not pay the claim.
2. **We** shall not pay any other claim which has been or will be made under the **policy**.
3. **We** may, at **our** option, declare the **policy** void.
4. **We** shall be entitled to recover from **you** the amount of any claim(s) already paid under the **policy**.
5. **We** shall not return any premiums paid.
6. **We** may inform the police and any other appropriate authorities of **our** findings.
7. **We** may refuse to underwrite further policies for **you**.

HOW TO CLAIM

1. **You** must submit **your** claim with a claim form which can be obtained by downloading from **our** website at www.kcinsurance.co.uk, alternatively **you** can email **us** at kcpcclaims@agriapet.co.uk or call **us** on 0870 379 9010 to ask for a claim form.
2. **We** will require **your policy** number if **you** email or call **us** so **you** should have this ready. Please note that calls may be monitored or recorded to assist with training and for quality control purposes.
3. **You** do not need to contact **us** before any **veterinary treatment** begins and **we** are unable to guarantee a claim by email or over the telephone.
4. **You** must follow the 'How to Claim' procedure as shown in the section of cover that **you** are claiming for.
5. Send **your** completed claim form and supporting documents to:

Kennel Club Pet Insurance
2b Alton House Office Park
Gatehouse Way
Aylesbury
HP19 8XU
6. Claims must be submitted within the claim notification periods stated in "Claims conditions".

CUSTOMER SERVICE AND COMPLAINTS

If **you** have a question or would like more information about **your policy** or a claim please contact:

Kennel Club Pet Insurance Customer Service	Telephone	0870 379 9090
Kennel Club Pet Insurance Claims Team	Telephone	0870 379 9010

In most cases the Customer Service and Claims teams can resolve any issues within 24 hours of **your** call. **We/the insurers** are committed to providing **you** with an exceptional level of service and customer care. **We/the insurers** realise, however, that things can go wrong and there may be occasions when **you** feel that **we/the insurers** have not provided the service **you** expect. When this happens, **we/the insurers** want to hear about it so that **we/the insurers** can try to put things right.

Who to Contact

The most important factors in getting **your** complaint dealt with as quickly and efficiently as possible are:

- To be sure **you** are talking to the right person and that **you** are giving them the right information.
- When **you** contact **us** please give **your** name and a contact telephone number, quoting **your policy** number and the type of **policy** **you** hold.

How to complain

You can telephone **us**, or email **us** via **our** website at www.kcinsurance.co.uk, or write to:

Kennel Club Pet Insurance Complaints	
2b Alton House Office Park	
Gatehouse Way	
Aylesbury	
HP19 8XU	
Customer Service Complaints	Telephone 0870 379 9090
Claims Complaints	Telephone 0870 379 9010

We expect that the majority of complaints will be quickly and satisfactorily resolved at this stage but if **you** are not satisfied, and **your** complaint is about Sections 1, 2, 3, 5, 6, 7, 8a, 8b, 8c and 8d **you** can take **your** complaint to the Financial Ombudsman Service at the following address:

Insurance Division Financial Ombudsman Service
South Quay Plaza
183 Marsh Wall
London
E14 9SR
Telephone 0845 080 1800
Email complaint.info@financial-ombudsman.org.uk

If **your** complaint is about Sections 4 or 8e **you** can call 0870 850 8510 or write to:

The Chief Executive Officer
Groupama Insurance Company Limited
6th Floor, One America Square
17 Crosswall
London
EC3N 2LB

A review of the matter will be carried out at a senior level and a final decision given. If after receiving the final response **you** remain dissatisfied **you** may refer the matter to the Financial Ombudsman Service (FOS).

The Financial Ombudsman Service is an independent body that arbitrates on complaints about general insurance products. It will only consider complaints after the **insurers** have provided **you** with written confirmation that the **insurer's** internal complaints procedure has been exhausted. Referral to the Financial Ombudsman does not affect **your** right to take legal action against Agria International Forsaking AB for Sections 1, 2, 3, 5, 6, 7 & 8a, b, c, d and Groupama Insurance Company Limited for Sections 4 & 8e.

Please quote **your policy** number in any communication.

USE OF YOUR PERSONAL DATA

The information **you** have given **us** will be held and used to manage **your** insurance **policy** and this will include both underwriting and claim handling. For this purpose **we** may disclose it to other interested third parties - for example, other **insurers**, regulatory authorities and agents who provide services on **our** behalf.

By accepting this **policy you** consent to **our** processing of personal data, including sensitive data, about **you** and other persons who may be insured under the **policy**. **You** understand that all personal data **you** give to **us** must be accurate and that **you** have the specific consent of those other persons to disclose their personal data.

Insurers pass information to Insurance Databases to check policyholder information and to help prevent fraudulent claims. **We** may search such Databases in order to help **us** check information provided and to prevent fraudulent claims. When **you** tell **us** about an incident **we** may pass information relating to it to Insurance Databases.

Any personal data **you** provide will be held securely and in accordance with the Data Protection Act 1998.

Your calls may be monitored and recorded in order that the service may be improved and to help prevent and detect fraud.

Your data may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing compliance with any regulatory rules/codes. It may also be used for marketing, offering renewals, research and statistical purposes, and crime prevention.

HELPLINES

All policies automatically include access to the following helplines:

Healthcare Away From Home - Telephone 0870 609 1438

If **you** and **your dog** are away from home whilst in the **United Kingdom** and **your dog** needs urgent veterinary care, **you** have access to a helpline so **you** can identify the nearest **vet** to you.

Pet Minders - Telephone 0870 609 1438

This enables **you** to locate a registered pet minder (on a national basis) for either a few minutes or indeed weeks, in order to look after **your dog** whilst **you** are away.

USEFUL NUMBERS AND WEBSITES

PETS Travel Scheme - Telephone 0845 933 5577

For information on how to obtain a **PETS Travel Scheme Pet Passport**.

Association of Pet Behaviour Counsellors - www.apbc.org.uk

For information about the Association, if **your vet** has referred **your dog** to a member.

Canine and Feline Behaviour Association - www.cfba.co.uk

For information about the Association, if **your vet** has referred **your dog** to a member.

Canine Hydrotherapy Association (CHA) - www.canine-hydrotherapy.org

For information about the Association and how to locate hydrotherapy pools, which are CHA approved.

The National Association of Registered Canine Hydrotherapists (NARCH) - www.narch.org.uk

For information about the Association and how to locate Registered Canine Hydrotherapists or Hydrotherapy Centres.



Kennel Club Pet Insurance is administered by
Agria Pet Insurance Limited, 2b Alton House Office Park,
Gatehouse Way, Aylesbury HP19 8XU



The British Small Animal Veterinary Association
recommends the principle of Pet Health Insurance
to its members and their clients



Kennel Club Pet Insurance is underwritten by
Agria International Forsakring AB and Groupama
Insurance Company Limited

