

**ASDA**money

YOUR PET  
INSURANCE  
**POLICY  
BOOKLET**



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# NOW YOU'VE GOT ASDA PET INSURANCE, WE'LL TAKE CARE OF YOU AND YOUR PET.

## Welcome to ASDA Pet Insurance.

A healthy **pet** is a happy **pet** and **we** hope **you** never need to use **your** insurance – but if **you** do, **we** are here to help and make the process as hassle free as possible.

This **policy booklet** provides **you** with details on **your** cover, any important exclusions and information on how to contact **us**, or make a claim.

**We** encourage **you** to read this document to ensure that **you** fully understand what **you** are – and are not covered for.

## Unlimited access to a pet symptom checker and online consultations, as a thank you...

As an **ASDA** pet Insurance customer, **you** have full, unlimited access to **our** friends at Jooii.

**We** know that sometimes getting **your pet** to the **vet** can be more hassle and stressful than the appointment itself.

The Jooii app provides **ASDA** pet Insurance customers access to unlimited video calls with a **vet** 24/7/365 at no additional cost to the insurance (consultations typically cost around £24 each for non-**ASDA** customers), as well as an industry leading symptom checker, all accessible from the comfort of **your** own home.

**You** can download the Jooii app by clicking on **your** device's operating system below.

# IMPORTANT CONTACT INFORMATION

## Claims

Remember, using Jooi's symptom checker or speaking with a Jooi **vet**, may result in **you** not needing to physically take **your pet** to a **veterinary** practice. This means **you** may be able to avoid all that stress and hassle and even avoid paying **your policy** excesses.

Should **you** need to claim, **we** have sent a claim form along with **your** insurance documents but if **you** would rather speak to **us** about an upcoming or existing claim, **you** can call **us** on **0333 999 0933\***.

**You** can also **CLICK HERE** to use **our** live chat\* facility to speak to a colleague.

## Making changes to Your Policy

If **you** need to make any amendments to **your policy**, **you** can speak to one of **our** colleagues on the phone, by email or by using live chat:

**Live chat\*: [CLICK HERE](#)**

**Telephone: 0333 999 0933\***

**Email: [customerqueries@insurancefactory.co.uk](mailto:customerqueries@insurancefactory.co.uk)**

\* **Our** office is open from 8am to 6pm Monday to Friday and 9am to 2pm Saturday. Calls may be monitored or recorded for training and quality purposes.

# TABLES OF COVER – TIME LIMITED POLICIES

	<b>Time Limited £2,000</b>	<b>Time Limited £5,000</b>
<b>Product Type</b>	12 Month Cover	12 Month Cover
<b>Veterinary Fee Cover</b>	£2,000/per condition	£5,000/per condition
<b>Dental Treatment</b> (as part of veterinary fee cover)	Illness – No Accident – Yes	Illness – No Accident – Yes
<b>Complementary Treatment</b> (as part of veterinary fee cover)	£500/condition	£750/condition
<b>Cruciate Ligament Treatment</b> (as part of veterinary fee cover)	£1,250	£1,500
<b>CT/MRI Scans</b> (as part of veterinary fee cover)	£1,250	£1,500
<b>Specialist Diet</b> (as part of veterinary fee cover)	£100	£150
<b>Behaviour Treatment</b> (covered as a result of an accident only and as part of veterinary fee cover)	£500	£750
<b>Fixed Excess</b> (Certain breeds have a specified minimum excess of £200)	£100-£250 As chosen by you, or advised	£100-£250 As chosen by you, or advised
<b>Co-insurance Excess</b> (payable in addition to the fixed excess)	10% for pets aged 5 years and over	10% for pets aged 5 years and over
<b>Death From Illness</b> (only available for pets less than 7 years of age)	£750	£1,000
<b>Death From Accident</b> (no age limit)	£750	£1,000
<b>Cremation/Burial</b> (only available for pets less than 7 years of age)	£100	£100
<b>Third Party Liability</b> (for dogs only – £250 excess per claim)	£1,000,000	£1,000,000
<b>Advertising and Reward</b>	£250	£500
<b>Loss Of Pet – Theft or Straying</b>	£750	£1,000
<b>Emergency Boarding Kennel/Cattery Fees</b>	£750	£1,000
<b>Emergency Holiday Cancellation</b>	£750	£1,000
<b>Overseas Travel Cover</b>	364 days	364 days
<b>Unexpected Quarantine Expenses</b>	N/A	N/A

# TIME LIMITED POLICY EXPLANATION

## Time Limited policy explanation

If **you** have chosen one of **our** Time Limited policies, these enable **you** to claim back the costs of **veterinary treatment** (depending on the level of cover **you** choose) up to either £2,000 or £5,000 per **condition your pet** suffers from, up to 12 months from when it is first treated by **you** or **your vet**.

**Your policy** limit for a **condition** will decrease with each claim **you** make.

Neither the 12-month cover period, nor the **veterinary** fee allowance for a **condition** resets when **you** renew **your policy**.

Under these **policies**, cover for a **condition** will stop after either:

- **12 months have passed from the first treatment date**

OR

- **When the veterinary fee limit is reached for a condition**

Whichever of the above points happens first, **you** will no longer be able to claim for any **treatment** arising from that particular **illness/accident**.

## Example Veterinary fees claim

- Customer purchases the Time Limited £2,000 **policy** to start on 1st January 2021
- **Condition** first treated 1st June 2021, claim settled for £1,250 on 6th June 2021
- **Veterinary** fee cover for the **condition** remaining at the end of the insured year (in the event of a recurrence or further **treatment** needed): £750
- **Date that the 12-month cover for the condition ends: 31st May 2022**

Like humans, our **pets** are more likely to be affected by **illness** as they get older. This means that every year, **your** insurance premium will increase even if **you** have not made a claim. This increase may be more significant if **you** have claimed.

# TABLES OF COVER – LIFETIME POLICIES

	Lifetime £2,000	Lifetime £4,000	Lifetime £6,000	Lifetime £8,000	Lifetime £10,000
<b>Product Type</b>	Lifetime Cover	Lifetime Cover	Lifetime Cover	Lifetime Cover	Lifetime Cover
<b>Veterinary Fee Cover</b>	£2,000/year	£4,000/year	£6,000/year	£8,000/year	£10,000/year
<b>Dental Treatment</b> (as part of Veterinary Fee Cover)	Illness – No Accident – Yes	Illness – No Accident – Yes	Illness – Yes Accident – Yes	Illness – Yes Accident – Yes	Illness – Yes Accident – Yes
<b>Complementary Treatment</b> (as part of Veterinary Fee Cover)	£1,000/year	£1,500/year	£1,500/year	£1,500/year	£1,500/year
<b>Cruciate Ligament Treatment</b> (as part of Veterinary Fee Cover)	£1,250/year	£1,250/year	£1,500/year	£1,500/year	£1,500/year
<b>CT/MRI Scans</b> (as part of Veterinary Fee Cover)	£1,250	£1,500	£1,500	£1,500	£1,500
<b>Specialist Diet</b> (as part of Veterinary Fee Cover)	£200	£250	£250	£250	£250
<b>Behaviour Treatment</b> (covered as a result of an Accident only and as part of Veterinary Fee Cover)	£1,000	£1,000	£1,000	£1,500	£1,500
<b>Fixed excess</b> (Certain breeds have a specified minimum excess of £200)	£100-£250 As chosen by you, or advised	£100-£250 As chosen by you, or advised	£100-£250 As chosen by you, or advised	£100-£250 As chosen by you, or advised	£100-£250 As chosen by you, or advised
<b>Co-insurance Excess</b> (payable in addition to the Fixed excess)	10% for pets aged 5 years and over	10% for pets aged 5 years and over	10% for pets aged 5 years and over	10% for pets aged 5 years and over	10% for pets aged 5 years and over
<b>Death From Illness</b> (only available for pets less than 7 years of age)	£1,500	£2,000	£2,000	£2,000	£2,000
<b>Death From Accident</b> (no age limit)	£1,500	£2,000	£2,000	£2,000	£2,000
<b>Cremation/Burial</b> (only available for pets less than 7 years of age)	£100	£100	£100	£100	£100
<b>Third Party Liability</b> (for dogs only – £250 excess per claim)	£1,000,000	£1,000,000	£1,000,000	£1,000,000	£1,000,000
<b>Advertising and Reward</b>	£750	£1,000	£1,000	£1,000	£1,000
<b>Loss Of Pet – Theft or Straying</b>	£1,500	£2,000	£2,000	£2,000	£2,000
<b>Emergency Boarding Kennel/Cattery Fees</b>	£1,500	£2,000	£2,000	£2,000	£2,000
<b>Emergency Holiday Cancellation</b>	£1,500	£2,000	£2,000	£2,000	£2,000
<b>Overseas Travel Cover</b>	364 days	364 days	364 days	364 days	364 days
<b>Unexpected Quarantine Expenses</b>	£1,000	£1,500	£1,500	£1,500	£1,500

# LIFETIME POLICY EXPLANATION

## Lifetime policy explanation

If **you** have chosen one **our** Lifetime policies, these provide a fixed amount of money each **policy** year to cover all **veterinary treatment your pet** needs.

“Lifetime” means **your** veterinary fee allowance refreshing back to the maximum allowance each year **you** renew **your** insurance.

This means as long as **your** insurance **policy** remains in force with no breaks in cover, premiums are kept up to date and the insurer offers renewal, that there is no limit on how long **you** can claim for each illness or **injury your pet** suffers from.

Should **your pet's** total **veterinary treatment** within a **policy** year go above the limit **you** have chosen for **your pet**, there will be no further cover until the renewal of **your policy**.

Like humans, our **pets** are more likely to be affected by **illness** as they get older. This means that every year, **your** insurance premium will increase even if **you** have not made a claim. This increase may be more significant if **you** have claimed



# HOW TO MAKE A CLAIM

**We** have included a claim form along with **your** insurance documents, which explains what **you** need to do but if **you** would rather speak to **us** about an upcoming or existing claim, **you** can call **us** on **0333 999 0933**.

**You** can also visit <https://petinsurance.asda.com/Content/Documents/ClaimForm.pdf> and download a claim form.

Please make sure **you** send **us your** claim within 180 days from when **your pet** receives **treatment**, otherwise **we** may be unable to offer settlement.

## Claim form completion

**We** will never guarantee payment of a claim over the telephone. If **you** want to make a claim, **you** must complete a claim form in order for **us** to review, before **we** can tell **you** if **you** are covered for something.

If **you** are claiming for **veterinary treatment**, both **you** and **your vet** will need to fill in parts of the claim form and sent **us** a full medical history for the **pet you** are looking to claim for.

If **you** are claiming for the death benefit of **your pet**, in addition to a claim form, **we** also require the original purchase receipt of **your pet** (or other evidence to show the purchase price **you** paid).

If any information **we** ask for on the claim form is missing, it will delay the processing of **your** claim.

**We** only accept invoices that are on **veterinary** practice headed paper and contain VAT amounts and a VAT number if **your vet** is VAT registered.

**You** will be responsible for any costs charged by **your veterinary** practice for the completion of the form, should they charge for this service.

## Submitting your claim

Should **your veterinary practice** use “VETENVOY” (an electronic claim system) **you** may not need to submit the claim yourself – **your vet** will do it for **you**.

**You** can email **your** claim form and supporting documents to **us**: [petclaims@insurancefactory.co.uk](mailto:petclaims@insurancefactory.co.uk)

**You** can post **your** claim form and supporting documents to:

ASDA Pet Insurance  
2nd Floor, 5000 Lakeside  
North Harbour  
Western Road  
Portsmouth  
PO6 3EN

# HOW TO MAKE A CLAIM (CONT)

## What we do with your claim

**We** will pay **your** claim:

1. If the claim form is correctly completed
2. If/when **we** have all the information **we** need to support **your** claim
3. When **we** are sure that the claim is valid, when compared to **your policy** and the terms and **conditions**
4. (If applicable) When any legal action or other action about **your pet** has been settled.

If **your veterinary** practice accepts direct payment from insurers, **we** can pay them directly for **you** - minus any Policy excesses and any items on the invoice, which are not covered under **your** insurance. **You** can tell **us** who to make payment to on **your** claim form.

**You** must pay **your vet** any amount not covered under this **policy**. If **we** have made any overpayment regarding claim settlements, this will be requested back in full and/or deducted from any future claims.

If all or a part of **your** claim cannot be paid, **we** will tell **you** why in writing.

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**.

# DEFINITIONS

Certain words or phrases in this document have a certain meaning whenever they appear in bold. These words and their meanings are explained below:

## Accident

A single, unexpected external event which happens during the **period of insurance** resulting in physical bodily **injury** or death to **your pet**.

## Alternative medicine

Herbal or homoeopathic medicine recommended by **your vet** and prescribed by a suitably qualified **vet**.

## ASDA

Asda Pet Insurance is arranged and administered by **Insurance Factory Limited**. **Insurance Factory Limited** is authorised and regulated by the Financial Conduct Authority. (No. 306164). Registered in England and Wales Number 02982445. Registered Office: Markerstudy House, 45 Westerham Road, Bessels Green, Sevenoaks, Kent, TN13 2QB. You can check this by visiting the Financial Services Register at [www.fca.org.uk/register](http://www.fca.org.uk/register).

## Behavioural treatment

A programme or training regime conducted by or under the supervision of a **veterinary surgeon** or a pre-approved program of **behavioural modification** carried out by a behaviourist who is a member of The Institute of Modern Dog trainers (IMDT), a Certified Clinical Animal Behaviourist (CCAB) or member of the Association of Pet Behaviour Counsellors (APBC) or Canine and Feline Behaviour Association (CFBA).

## Co-insurance

The percentage amount **you** are required to pay towards the costs of **veterinary** fees in addition to the **fixed excess**. This applies as soon as **your pet** turns the age of 5 years (even if this is part way through the **period of insurance**) and will be deducted from any **veterinary** fee claim settlement.

## Complementary medicine/therapy/treatment

Acupuncture, hydrotherapy, osteopathy, physiotherapy and chiropractic therapy recommended by **your vet** and carried out by a suitably qualified person that has been specifically recommended by **your vet**.

## Commercial breeding

Any **pet** that has had more than 2 litters in its lifetime.

## Condition/conditions

Any **injury** sustained during, or resulting from, a single **accident** or any manifestation of an **illness** having the same diagnostic classification or resulting from the same disease process regardless of the number of incidents or areas of **your pet's** body affected.

## Dental

Any **treatment** of the teeth gums or mouth.

## Fixed excess

The amount **you** are required to pay as part of certain claims made under the **policy** as shown in your **policy schedule** and will be payable each year for each **illness** or **injury**.

## DEFINITIONS (CONT)

### Guarding

This **policy** excludes all **pets** used for commercial security work or those which have been trained to attack. All cover is excluded for any policyholders who also hold a Security Industry Authority (SIA) licence of any description whilst undertaking the designated activity that the SIA licence allows.

### Holiday

Means a pleasure trip outside of the **UK**, which starts from and ends at **your** address as shown in **your policy schedule**.

### Illness/illnesses

Changes in **your pet's** state of health that are not caused by an **accident**, or any which may be resulting from gradual or biological cause.

For the avoidance of doubt an **illness** is taken to start from the date that symptoms are first noticed, by either **you** or **your vet** (whichever is the sooner) not the date that an **illness** is first treated by **your vet**.

### Incident/incidents

Any clinical sign of **injury** or **illness** in **your pet**.

### Injury/injuries

Clinical signs or symptoms of changes in normal healthy state resulting from one individual **accident**, including directly or indirectly related problems, no matter where these are noticed or occur in or on **your pet**.

### Monetary pet value

If **you** do not have proof of **your pet's** purchase price, **we** will use the average monetary value of **your pet's** breed at the date of death that **we** are able to determine based on age, breed, pedigree, and breeding status of **your pet**. **We** will use **our** own data to determine this average value.

### Period of insurance

The period for which the premium has been paid and for which **your pet** is covered as shown on **your policy schedule**. Each renewal is the start of a new **period of insurance**.

### Pet

The dog or cat specified in **your policy schedule**.

### Policy

**Your policy wording** and most recent **policy schedule**.

### Policy schedule

The **policy schedule** contains details about **you, your pet, policy** limits and excesses that apply to the specific cover that **you** have purchased.

### Policy wording

This document, which contains the terms and **conditions** of **your pet** insurance.

### Pre-existing condition/pre-existing conditions

Any **illness** or **injury** or complication directly resulting from another **injury** or **illness**, whether diagnosed or undiagnosed or that has been identified or investigated by a **vet** or is otherwise known to **you** prior to the start of the insurance.

## DEFINITIONS (CONT)

### Recurring illness/illnesses

**Recurring illnesses** shall be considered as one loss. Such **illnesses** being defined as:

- Clinical manifestations resulting in the same diagnosis (regardless of the number of **incidents** or areas of the body affected) to which **your pet** has an on-going predisposition or susceptibility related in any way to the original claim; or
- **Illnesses**, which are incurable and likely to continue for the remainder of **your pet's** life.

### Recurring injury/injuries

**Recurring injuries** shall be considered as one loss. Such **injuries** being defined as:

- Clinical manifestations resulting in the same diagnosis (regardless of the number of **injuries** or areas of the body affected) to which **your pet** has an on-going predisposition or susceptibility related in any way to the original claim, or:
- **Injuries** which are incurable and likely to continue for the remainder of **your pet's** life, or:
- Multiple **injuries** being caused by or resulting from one **accident** will be treated as one loss.

### Select breed/Select breeds

Bullmastiff, Dogue de Bordeaux, French Bulldog, Great Dane, Irish Wolfhound, Mastiff, Neapolitan Mastiff, Newfoundland, Pyrenean Mastiff, Rottweiler, St Bernard, Tibetan Mastiff, Chow Chow, Bulldog (including all variants such as Dorset, Victorian etc.), English Bulldog, Toy Bulldog, Shar Pei, German Shepherd, Boxer, Maine Coon, Norwegian Forest Cat.

### 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 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.

### Treatment

Any examination, consultation, advice, tests, x-rays, ultrasound, CT scan, MRI scan, drugs, or medication administered or prescribed surgery, nursing, or care; provided by, or under the direction of, a **vet**.

### Unattended

Any occasion where **your pet** is left alone or out of sight.

### United Kingdom/UK

England, Scotland, Wales, Northern Ireland, and the Isle of Man.

### Vet/Veterinary/Veterinary Surgeon

A member of the Royal College of **Veterinary Surgeons** actively working as a **veterinary surgeon** in the **UK** or a **veterinary surgeon** registered and actively working outside the **UK**.

## DEFINITIONS (CONT)

### **We/Us/Our/Insurance Factory Limited (IFL)**

**Insurance Factory Limited** acting as **ASDA** Pet Insurance administrators for: West Bay Insurance Plc, registered in Gibraltar No. 84085. Registered Office: 846-848, Europort, Gibraltar. Regulated by the Gibraltar Financial Services Commission and subject to limited regulation by the Financial Conduct Authority and the Prudential Regulation Authority in respect of underwriting insurance business in the **UK** (Financial Services Register Number 211787). These details can be checked on the Financial Services Register at: [www.fca.org.uk](http://www.fca.org.uk) or the Prudential Regulation Authority on **020 7601 4444**. West Bay Insurance Plc is a member of the Association of British Insurers.

### **You/Your**

The person named on the **policy schedule** who is the owner and carer for the **pet** that permanently resides with **you** at the address **you** have provided.

# CONSUMER INSURANCE (DISCLOSURE AND REPRESENTATIONS) ACT 2012

In entering into this contract, **you** are under a duty to take all care in answering all questions in relation to this insurance honestly and to the best of **your** knowledge. This includes anything that appears within **your policy schedule** as well as any information relating to **your pet's** medical history. **Your** failure to take reasonable care to avoid misrepresentation in relation to the information provided could result in **your policy** being cancelled or **your** claim being rejected or not fully paid. If **you** are in any doubt about **your** duty to take reasonable care not to make a misrepresentation, please contact **our** customer services department on **0333 999 0933**.

# INTRODUCTION

This is a **pet insurance policy** that lasts for a year and **you** must pay the full year's premium in one payment or by monthly instalments. **Your** insurance contract is made up of this **policy wording, your policy schedule** and the information **you** gave when arranging this insurance or at any time after.

## Who provides Your insurance?

**Asda** Pet Insurance is arranged and administered by **Insurance Factory Limited**, authorised and regulated by the Financial Conduct Authority under Financial Services Register number 306164, a company registered in England and Wales (company number 02982445); registered office: 45 Westerham Road, Bessels Green, Sevenoaks, TN13 2QB. Insurance Factory Limited is part of the Markerstudy Group of companies. The insurance is underwritten by West Bay Insurance Plc, registered in Gibraltar No. 84085. Registered Office: 846-848, Europort, Gibraltar. Regulated by the Gibraltar Financial Services Commission and subject to limited regulation by the Financial Conduct Authority and the Prudential Regulation Authority in respect of underwriting insurance business in the UK (Financial Services Register Number 211787). These details can be checked on the Financial Services Register at [www.fca.org.uk](http://www.fca.org.uk) or the Prudential Regulation Authority on 020 7601 4444. Bay Insurance Plc. is a member of the Association of British Insurers.

## The law applicable to this Policy

**You** and **we** are free to choose the law applicable to the **policy** but in the absence of agreement to the contrary, the law of the country in which **you** are resident at the time of the contract will apply. If **you** are not resident in the **United Kingdom**, the law which will apply will be the law of England and Wales and by purchasing this **policy**, **you** have agreed to this.

## Data consent

As part of **your policy**, **you** agree to and accept the following terms in the event that **you** submit a claim:

1. **We** will request relevant information or records from **your** current or previous **veterinary** practice, specialist, breeder or rescue centre at any time in order for **us** to be able to fully assess **your** claim.
2. **Your veterinary** practice or any **veterinary** practice treating **your pet** can openly discuss and receive information about **your** claims with **your policy** administrator (**Insurance Factory Limited**) where appropriate. This also includes the transfer of **your** claim via an electronic service using a third party application.
3. **We** will only ever ask for information which is relevant to the details and circumstances of the claim and previous medical history, which is necessary for claims processing purposes.



## INTRODUCTION (CONT)

### Territorial limits

This **policy** is valid in the **UK** and includes cover while **you** travel on **holiday** with **your pet** in the **UK** and Republic of Ireland for up to 30 days in each **period of insurance**. It also provides cover while **you** travel on **holiday** with **your pet** for 364 days within each **period of insurance**, meaning **you** must return to the **UK** at least once per **period of insurance** for **your policy** to remain valid. Please visit the gov.uk website to follow the latest guidance on travel within the EU post-Brexit.

### Renewal terms

If **we** offer further periods of insurance, **we** may change the premium, **fixed excess** and terms and **conditions** as **your pet** gets older and to allow for future increases in **treatment** costs. **We** will write to **you** by email or post at least 14 days before **your** renewal date. **We** will inform **you** about any changes to the premium and/or **policy** terms and **conditions** for the next **period of insurance**.

If **you** pay **your** premium by direct debit there is no need for **you** to take further action, **your policy** will automatically renew and reflect the renewal premiums stated within **your** renewal documentation. If **you** do not want **us** to do this, please call **us** or email **us**.

If **you** pay for **your policy** in full by debit or credit card, **you** need to contact **us** to make payment before the renewal date. **Your policy** will not automatically renew.

**We** will correspond with the last email address given to **us** by **you**. **We** are unable to prevent these from going into **your**

spam or junk folders so please check these folders as well as **your** current inbox. If **your** email address changes between the commencement date and renewal date, please inform **us** so that **we** can keep **your** records up to date.

### Mid-term policy changes

**You** must contact **us** as soon as **you** are aware of any changes that need to be made to the **policy**, such as **your** postal address, phone number or email address. In the event of a change in **your pet's** or **your** details, this may affect the premium for the rest of the **period of insurance**.

### Upgrades or downgrades in cover level

This can be done mid-term or at renewal. Regardless of when **you** do this, if **you** transfer **your pet** to a **policy** with additional or higher benefit limits, the additional or higher benefit limits will not apply if signs or symptoms of a **condition** are present before the transfer date.

If **you** transfer **your pet** to a **policy** with lower benefit limits, the higher benefit limit will no longer apply to any claims/**condition you** are currently making. In cases where the cover is increased any **illness** or **injury** in existence prior to the change in cover level will be covered under the terms applicable when the **condition** first started.

Should **you** choose to decrease **your** cover level all existing **conditions** will be subject to the new lower **policy** terms. Please call **us** for full details that will apply.

# INTRODUCTION (CONT)

## Dual insurance

**You** must inform **us** if **you** have another insurance policy in force for the same **pet** covering the same **injury, illness, bodily injury, death, damage, destruction, expense or liability**. If this is the case, **we** will not make any payment for any claim that results from an **incident** covered by any other insurance. If there is any other insurance under which **you** are entitled to make a claim **you** must report the **incident** to that insurance company and tell **us** their name and address and **your policy** and claim number with them.

## Financial Services Compensation Scheme (FSCS)

**We** are covered by the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from the scheme in the unlikely event **we** cannot meet **our** obligations to **you**. This depends on the type of insurance and circumstances of the claim. Further information about the compensation scheme arrangements is available from the FSCS ([www.fscs.org.uk](http://www.fscs.org.uk)).

# GENERAL CONDITIONS APPLICABLE TO ALL POLICY SECTIONS

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

1. **You** are aware upon purchase of this **policy** that any health problems **your pet** has shown symptoms of, or has received **treatment** (whether diagnosed or undiagnosed) will be treated as a **pre-existing condition** and not covered under this **policy**.
2. **Your pet** has never shown aggressive tendencies and has not been trained to attack.
3. It is a condition of this **policy** that **your** dog is muzzled where this is recommended when in public or on walks. Failure to comply may result in any claim being declined.
4. **You** must be the owner of the **pet** and must be living permanently at the address **you** provided **us**. Cover will cease immediately if **your pet** is sold or **your pet** is living somewhere else, whether temporarily or permanently (unless agreed by **us**).
5. **You** must take **your pet** for regular annual checkups and keep **your pet** vaccinated as advised by **your vet**. There is no cover provided for these diseases in the event that the required vaccinations have not been administered to **your pet**. Homeopathic vaccines are not acceptable.
6. **You** agree to observe the terms of the Animal Welfare Act 2006, and Control of Dogs Order 1992. Any dog in a public place must wear a collar with the name and address of the owner engraved on it or engraved on a tag. **Your** telephone number is also advisable.
7. **You** agree that **your** current and/or previous **vet** may release all information or records regarding **your pet** to **us** and that **we** may release information about **your policy** to any **vet** who has either treated **your pet** or is about to treat **your pet**. If the **vet** charges **you** for this information, **you** will be responsible for the costs.
8. If there is a disagreement between **your vet** and **us**, an independent chosen by **us** will be appointed and act as arbiter, whose decision both **you** and **we** must keep to.
9. If **your pet** is a **select breed** – the minimum **fixed excess** **you** will pay will be £200.
10. **You** must pay any premium when it becomes due.

# GENERAL EXCLUSIONS APPLICABLE TO ALL POLICY SECTIONS

This **policy** will not cover:

1. Any claims for a **pet** not named in the **policy schedule**.
2. Any claims made for any event, **accident, illness, incident,** or **injury** that happens outside of the **period of insurance**.
3. Any death or destruction of **your pet** as a result of **illness** resulting from the failure to vaccinate **your pet** in accordance with the practice recommended by the British Small Animal **Veterinary** Association.
4. Any claims for treatment if **your pet** was under the age of 8 weeks.
5. Any **pet** that has had more than 2 litters in its lifetime will be considered by **us** as being used for commercial breeding and as such, **we** will not insure the **pet**. In the event that a third litter occurs during a **period of insurance, we** will not invite renewal of cover but will continue to maintain cover previously agreed, until the end of that **period of insurance**.
6. Claims arising due to war, invasion, act of foreign enemy, hostilities (whether war declared or not), civil war, rebellion, **terrorism**, revolution, insurrection or military or usurped power.
7. Claims arising due to ionising radiations or contamination by radioactivity from any fuel or from any nuclear waste from the combustion of nuclear fuel.
8. The confiscation or destruction of **your pet** by Government or Public Authorities, or under the Animals Act 1971 **United Kingdom** and the Control of Dogs Act 1986 and Control of Dogs (amendment) Act 1992 Republic of Ireland or Contravention of the Dogs (Protection of Livestock) Act 1953.
9. The cost and compensation for euthanasia of **your pet** under a court order or the contagious diseases act. Claims arising due to the intentional slaughter, irrespective of any order by Government, Local Authority or any person having jurisdiction in the matter.
10. **You** breaking the **United Kingdom** or Republic of Ireland laws, or regulations, including those relating to animal health or importation.
11. Malicious or wilful **injury** or gross negligence to **your pet** caused by **you, your** agents, employees, or members of **your** family.
12. Any medication or **treatment** not recommended by a **vet**.
13. Any pedigree pet that is not on **our** breed list when **you** purchased **your policy** (unless agreed by **us**), or a pet crossed with any pedigree breed not on **our** breed list. **We** specifically will not provide any cover if **your** pet is an African Crested Dog, Aladseer, American Akita, American Bandogge, American Bulldog, American Bully, American Mancon, American Pit Bull Terrier, American Pocket Bully, American Staffordshire Bull Terrier, Argentinian Mastiff, Australian Dingo, Bandogge Mastiff,

# GENERAL EXCLUSIONS APPLICABLE TO ALL POLICY SECTIONS (CONT)

Bandogs, Boar Hounds, Boerboel, Bully Kutta, Canadian Inuit, Canary Dog, Cane Corso, Cao Fila, Chinese Shar Pei, Cirneco Dell Etna, Czechoslovakian Wolfdog, Dingo, Dogo Argentino, Dogue Brasileiro, Dogue de Bordeaux, Fila Brasileiro, Grand Bleu de Gascoigne, Inuit, Irish Staffordshire Bull Terrier, Japanese Tosa, Korean Jindo, Laika, Lybian Desert Dog, Mexican Hairless (Miniature, Standard or Intermediate), Northern Inuit Dog, Perro De Presa Canario, Pit Bull Terrier, Portuguese Podengo, Presa Canario, Racing Greyhound, Saarloos Wolfhound, Segugios Italiano, Shar Pei, Tamaskan, Tosa Inu, Utonagan, Wolf Dog, Wolf Hybrid, Working Sheepdog, Asian Leopard, Feral, Munchkin, Weiner Cat, any pets listed under the Dangerous Dogs Act 1991 and the Dangerous Dogs (Northern Ireland) order 1991 or Dangerous Dogs (amendment) Act 1997 or any subsequent amendments.

14. **Recurring illnesses** which **your pet** previously suffered arising before **your policy** started, or within the first 14 days of **your insurance policy**.
15. **Recurring injuries** which **your pet** previously suffered arising before **your policy** started, or within the first 48 hours of **your insurance policy**.
16. **Your pet** being used for **commercial breeding** purposes, **guarding**, track racing, coursing, or used in connection with any business, trade, profession, or occupation (whether **you** are paid for such purposes or not).
17. Any loss due to variations in exchange rates of any and every description.

18. Where fraud has been committed against **us** or where false information has been provided to **us**.
19. Any liability where **you** are entitled to cover or benefit under any other insurance - unless that cover is exhausted.
20. Any claims resulting from infringement of **UK** animal health and importation legislation.
21. Any **pet** sold or where any financial interest whatsoever is parted with by **you**, whether temporarily or permanently.
22. Liability in respect of pollution or contamination of buildings or other structures or of water or land or the atmosphere unless directly caused by a sudden identifiable unintended and unexpected occurrence which takes place in its entirety at a specific moment in time and place during the **period of insurance** provided that:
  - a) All pollution or contamination which arises out of one occurrence will be deemed to have occurred at the time such occurrence takes place;
  - b) Our liability for all damages and claimants costs and expenses payable in respect of all pollution or contamination which is deemed to have occurred during the **Period of insurance** shall not exceed £1,000,000 in the aggregate.

# SECTION 1: VETERINARY FEES

## What is covered?

**We** will pay **you** for charges made for **treatment** to **your pet**, carried out by either a **vet** or a qualified specialist. Some specific types of **treatment** or charges do have limitations, which are detailed below and in the tables of cover.

**Your veterinary** fee allowance on the **policy you** have chosen is 1 overall monetary limit. Please refer to the tables of cover near the start of this **policy document**, to see which benefits fall under the overall **veterinary** fee limit and do not have their own separate monetary limits.

**Complementary treatment/medicine** which is **veterinary** recommended including up to 10 sessions of hydrotherapy as long as it is provided by members of the cha (Canine Hydrotherapy Association), ICH (Institute of Canine Hydrotherapists) or NARCH (National Association of Registered Canine Hydro-therapists).

**Dental** cover is provided on all levels of cover as a result of an **accident**. **You** are only covered for **dental conditions** as a result of an **illness** as well, if **you** chose the Lifetime £6,000, Lifetime £8,000 or Lifetime £10,000 **policy**. **Your pet** must have yearly **dental** check-ups and any work that is recommended by **your vet** must be carried out. Any **treatment** advised or recommended by **your vet** which has not been carried out ahead of a **dental** claim, may result in **your** claim not being paid.

Specialist diet food is only covered if it is to dissolve bladder stones or crystals in urine and no other purpose. It must be

prescribed by **your vet** and is a diet that can only be bought from a **veterinary** surgery or an online pharmacy. **You** can claim up to a maximum of 60 days or up to the amount of cover **you** have on **your** chosen **policy** (whichever limit is reached first). **We** will deduct 75p per tin and/or £1.50 per kilo of diet food, which represents normal feeding costs associated with owning a **pet**.

In the event **your pet** requires tube feeding, costs associated with this are limited to £100.

Cruciate ligament **treatment** is covered up to the amount shown on **your** chosen **policy** and is provided per leg.

CT/MRI scans are covered up to the amount shown on **your** chosen **policy**. Any costs whatsoever associated with undertaking the scan (such as sedating **your pet**) are also settled under this benefit limit and not under the overall **veterinary** fee limit. If a scan is required for cruciate ligament **treatment**, the scan will be covered separately.

**Behavioural treatment** is only provided if **your pets** change in behaviour can be proven by **you** or **your vet** to have been caused by an **accident**, which is covered on **your policy**.

Where **treatment** for different, **injuries** or **illnesses** are carried out at the same time and the separate costs of **treatment** cannot be identified, the cost of **treatment** will be split equally between each **injury** or **illness** and the **fixed excess** and **co-insurance** (if applicable) will be applied to each **injury** or **illness**.



## SECTION 1: VETERINARY FEES (CONT)

The **fixed excess** is payable by **you** on a per **incident**, per **period of insurance** basis. If **your pet** is seen and/or treated by another **veterinary** practice (or specialist) for the same **condition** in the same **period of insurance**, another **fixed excess** becomes due for any further costs incurred from that second treating **vet**.

Example of how to calculate the amount **you** will have to pay and the amount **we** will pay in the event of a claim: A valid claim arises for **veterinary** fees totalling £1,000 with a £100 **fixed excess** and the 10% **co-insurance** is applicable:

Amount claimed		£1,000
Less <b>fixed excess</b>	£100	£900
Less <b>co-insurance</b>	10% = £90	£810
Total excess paid by <b>you</b>	£190	
Total paid by <b>us</b>	£810	

### What is not covered?

1. **Your fixed excess** and (if applicable) the additional 10% **co-insurance** as shown in **your policy schedule**.

The **fixed excess**, which is payable by **you** on a per **incident**, per **period of insurance** basis. If **your pet** is seen and/or treated by another **veterinary** practice (or specialist) for the same **condition** in the same **period of insurance**, another **fixed excess** becomes due for any further costs incurred from that second treating **vet**.

If **your pet** turns 5 years of age mid **policy** year, the **co-insurance** will apply in respect of any **treatment** that takes place on or after **your pet's** 5th birthday..

2. Any costs where a benefit limit has been reached.
3. Any medication costs that has more than a 100% mark up on the manufacturer's or wholesaler's price of **veterinary** medicines based on **our** catalogue of prices (VAT is payable and inclusive of this mark up). This will include any dispensing fees.
4. Any costs that **we** deem to be excessive, **we** will challenge these costs with the treating **vet** or specialist and **we** will only settle what **we** deem as appropriate. **We** do this by comparing costs for the same **treatment we** have in **our** own data to decide how much **we** will pay.
5. Any **treatment** after **your policy** has lapsed/ expired.

## SECTION 1: VETERINARY FEES (CONT)

6. Any **illness** or symptoms of any **illness** before, or within the first 14 days of **your policy** starting (**pre-existing conditions**).
7. Any **accident** or **injury** that occurred before or within the first 48 hours of **your policy** starting.
8. Any costs for hydrotherapy used as an aid to weight loss.
9. Any costs for neutering or spaying **your pet** unless these procedures are part of the **treatment** specifically for pyometra or cryptorchidism. No other **condition** will have these costs covered.
10. Any claim or **treatment** for cryptorchidism (retained testicles), unless **your pet** was insured with **us** before they were 12 weeks of age.
11. Any claim for **treatment** relating to, or as a result of, mating, pregnancy or parturition.
12. Any costs for bathing, grooming or de-matting **your pet**, regardless of **your** personal circumstances.
13. Any costs for any pheromone products, unless pre-approved as part of a **behavioural treatment** recommended by a specialist, where **we** will pay these costs for a maximum of six months.
14. The cost of any **treatment** outside normal **veterinary** surgery hours, unless **your vet** can explain how not seeing **your pet** immediately would endanger **your pet's** health. For necessary **treatment** outside of normal **veterinary** hours, the maximum **we** will pay for any consultations is £100.
15. Any costs for non-essential hospitalisation of **your pet** unless **your vet** can explain to **us** how moving **your pet** would seriously endanger its life.
16. Any ambulance charges or **pet** transfer costs to another practice (regardless of **your** personal circumstances), unless **your vet** can explain to **us**, why they arranged this instead of **you** taking **your pet** to where **your pet** needed to go.
17. Any costs for home visits by **your vet** (regardless of **your** personal circumstances), unless **your vet** can explain to **us** how moving **your pet** would seriously endanger its health.
18. Any costs higher than £100 for the euthanasia of **your pet**.
19. Any cost in respect of euthanasia in the event that this was caused by a **pre-existing condition** or **condition** not covered by the insurance.
20. Any claim for any form of housing, cage, nappies or bedding needed for **treatment** or wellbeing of **your pet**.



## SECTION 1: VETERINARY FEES (CONT)

21. Any charge for surgical equipment that can be used more than once.
22. Any fees charged by **your vet**, including but not limited to completing a claim form, any ancillary administration fees, dispensing fees, late payment fees, administration referral fees to specialist **vets**, referral fees and x-ray referral fees.
23. Any costs for nutritional supplements and vitamins unless prescribed by a **vet** and given to **your pet** instead of medication.
24. Fees for unapproved **alternative medicine** or **complementary medicine** (including but not limited to pulsed magnetic field therapy, matrix energy field therapy, the Bowen technique, Reiki massage, and faith healing).
25. Any costs for any **treatment** or **complementary therapy** connected to or resulting from organ transplants and fitting full or partial artificial limbs (prosthesis) with the exception of costs relating to replacement hip, elbow and or knee joints including pre and post-operative care.
26. Any costs for any **treatment**, or complications arising from **treatment**, that **you** choose to have carried out that is not directly related to an **injury** or **illness**.
27. Any costs for routine or investigative tests or diagnostic procedures, unless these are being undertaken specifically to diagnose an **injury** or **illness**.
28. Any costs for procedures involved in the diagnosis of an **injury** or **illness** that are repeated when **your pet** is referred to another **vet**.
29. Any costs for routine blood tests including blood tests carried out before surgery if **your pet** is under 6 years of age, unless there is something in **your pet's** medical history to suggest **your pet's** health may be at risk from the anaesthetic, surgery, or a procedure.
30. Any claim as a result of a 'notifiable' disease (as defined by DEFRA) e.g. rabies.
31. Any post mortem costs.

### Second opinion vets

There may be times when **you** wish to take **your pet** to a different **vet**, as **you** are unhappy with their diagnosis or **treatment** suggestions. Should the second opinion **vet** agree with the first diagnosis or **treatment**, then **we** shall only pay for one claim. Another **fixed excess** becomes payable by **you** if **you** choose to take **your pet** to another **vet**.

If **your pet** is referred to a specialist, please make sure that the **vet** who normally treats **your pet** has completed a separate claim form for the initial costs.

**We** will not normally be able to assess the claim form and supporting invoices from the referral practice until **we** have processed the initial **treatment** from **your** own **vet**.

## SECTION 1: VETERINARY FEES (CONT)

### Claims information

Before **your pet** is treated, check that **your vet** is willing to complete the claim form, provide medical history and supply **us** with the supporting invoices. The claim form and invoices along with a full clinical history must be returned to **us** within 180 days of the **pet** receiving the **treatment** for **your** claim to be considered.

### Policyholders who are veterinary surgeons or staff

If **you** are a **veterinary surgeon**, **you** may treat **your** own **pet** but another **vet** must countersign the claim form confirming the **treatment** has gone ahead. The same applies if **you** are a **vet** nurse, **you** cannot complete **your** own claim form.

## SECTION 2: DEATH FROM ILLNESS

**This section does not apply for pets aged 7 years or over.**

### **What is covered?**

If **your pet** dies because of an **illness**, or as a result of **your vet** putting **your pet** to sleep, to alleviate incurable and inhumane suffering from the **illness**.

**We** will pay the purchase price **you** paid for **your pet** as declared by **you** and detailed on the **policy schedule**. This payment is restricted to the maximum **policy** limit shown on **your** chosen **policy**.

If **you** are unable to provide **us** with proof of the amount **you** paid for **your pet**, **we** will pay a current **monetary pet value**, based on average prices of **your pet's** breed shown in **our** data at the time of **your pet's** death or up to a maximum of £250 (whichever is lower) for either a dog or a cat.

### **What is not covered?**

Death resulting from any **illness** that occurred before or within the first 14 days of **your pet's** insurance first starting.

Any claim where the **illness** is excluded from claim under section 1 **veterinary** fees.

Any claim where **your pet** is put to sleep due to aggression unless this can be linked to an **illness**.

Any claim if a **vet** believes it is more humane to keep **your pet** alive rather than put it to sleep, but despite this **you** still have **your pet** put to sleep.

Any claim where **you** are not able to provide **us** with confirmation from **your vet** that **your pet** has passed away or a statement from an independent witness unrelated to **you**, to confirm **your pet's** death.

## SECTION 3: DEATH FROM ACCIDENT

### What is covered?

**Pets** of any age are eligible for this benefit.

If **your pet** dies because of an **accident** or **injury**, or as a result of **your vet** putting **your pet** to sleep, to alleviate incurable and inhumane suffering from the **accident/injury**.

**We** will pay the purchase price **you** paid for **your pet** as declared by **you** and detailed on the **policy schedule**. This payment is restricted to the maximum **policy** limit shown on **your** chosen **policy**.

If **you** are unable to provide **us** with proof of the amount **you** paid for **your pet**, **we** will pay a current **monetary pet value**, based on average prices of **your pet's** breed shown in our data at the time of **your pet's** death or up to a maximum of £250 (whichever is lower) for either a dog or a cat.

### What is not covered?

Death resulting from any **injury** that happened before or within the first 48 hours of **your pet's** insurance first starting.

Any claim where **your pet** is put to sleep due to aggression unless this can be linked to an **injury**.

Any claim if a **vet** believes it is more humane to keep **your pet** alive rather than put it to sleep, but despite this **you** still have **your pet** put to sleep.

Any claim where **you** are not able to provide **us** with confirmation from **your vet** that **your pet** has passed away or a statement from an independent witness unrelated to **you**, to confirm **your pet's** death.

## SECTION 4: CREMATION/BURIAL

**This section does not apply for pets aged 7 years or over.**

### What is covered?

**We** will pay up to a maximum of £100 for costs incurred if **you** choose to have **your pet** cremated or put towards burial costs.

### What is not covered?

Any costs for the cremation or burial of **your pet** where **you** cannot provide an invoice or receipt to **us**.

Any costs unless **your vet** has been informed of **your pet** passing away and have updated their records to show this.

## SECTION 5: THIRD PARTY LIABILITY

**This section does not apply for cats.**

### What is covered?

**We** will pay up to £1,000,000 if **you** become legally liable to pay in the **UK** courts as damages (including costs) during the **period of insurance** for any claim or series of claims arising from any one event or multiple events and in respect of all and any **incidents** occurring during the **period of insurance** involving **your** dog:

1. Bodily **injury** or death to any person who is not in **your** employment or who is not a member of **your** family or household.
2. Loss of or damage to property that does not belong to and is neither in the charge of or under the control of **you**, anyone in **your** employment or any member of **your** family or household within:
  - a) The **United Kingdom** or
  - b) Whilst temporarily in a member state of the European Union provided that **your** dog complies with all the relevant legislation relating to movement across international borders, but only for a maximum stay of 364 days during the **policy** period. The most **we** will pay under this section of the **policy** for all **incidents** occurring within the **period of insurance** will be £1,000,000.

If someone else is looking after **your** dog when the **injury** or damage happens, **we** will still pay as long as:

1. **You** asked them to look after **your** dog.
2. **You** did not agree to pay them (or their family) or offered any thank **you** payment to look after **your** dog.
3. The **injury** or damage was not to them or their property.

### What is not covered?

1. The third party liability excess of £250 per claim. Failure to pay the excess when requested may result in **us** refusing to pay additional costs incurred or in **us** refusing to deal with any third party claim.
2. Claims where no legal liability is established.
3. Claims for **incidents** that occur within 72 hours of the commencement of **your policy**.
5. Compensation or legal costs if the injured person is part of **your** family, lives in **your** home, works for **you**, or is looking after **your pet** or is paid to look after **your pet**.
6. Compensation or legal costs if the damaged property belongs to **you** or a person who is part of **your** family, lives in **your** home, works for **you**, is looking after **your pet** or is paid to look after **your pet**.

## SECTION 5: THIRD PARTY LIABILITY (CONT)

7. Compensation or legal costs if **you** or someone listed above is looking after the property or holding it in trust or any liability when **your pet** is under the control or custody of a professional dog sitter, walker, groomer, or other similar professional caring for **your** dog where payment is made.
8. Any claim resulting from a period when **your pet** was left **unattended**.
9. Cover is not in force at any place where **you** or members of **your** family are subject to a contract of employment, carry out self-employed or voluntary work.
10. Cover is not provided at any event of confirmation show, agility event, working trial or Schutzhund competition.
11. Cover is not provided at any organised or recreational shooting or sporting event.
12. Any liability arising from an agreement, which imposes a liability on **you**, which **you** would not be under in the absence of such an agreement.
13. Compensation or legal costs where the **injury** or damage was caused by the deliberate acts or omissions of **you** or members of **your** family.
14. Any claim resulting from **your pet** passing on any disease or virus.
15. Any claim where **you** have not followed advice given to **you** by previous owners of **your** dog or by any rehoming organisation about **your** dog's behavioural traits.
16. Any claim whilst **your pet** is being transported in a motorised vehicle.
17. Fines, penalties or **your** breach of quarantine restrictions or import or export regulations.
18. Any damages, costs or expenses if **you** are insured under any **policy** which covers any liability relating to **your pet** (including **your** household insurance) unless that cover has been exhausted.
19. Any claim costs in excess of the **policy** limit under this section of **your policy**.
20. Any amount in excess of £1,000,000 in respect of all **incidents** occurring during the **period of insurance**.

### Special conditions that apply to this policy section

No claims under this **policy** section will be paid for any pedigree dog that is not on **our** breed list when **you** purchased **your policy** (unless agreed by **us**), or a dog crossed with any pedigree breed not on **our** breed list. **We** specifically will not provide any cover if **your** dog is an Aladseer, American Bulldog, American Bully, American Pocket Bully, Australian Dingo, Cane Corsos, Dogo Argentino/Argentinian Mastiff, Fila

## SECTION 5: THIRD PARTY LIABILITY (CONT)

Braziliero, Irish Staffordshire Bull Terrier, American Staffordshire Bull Terrier, Japanese Tosa/Tosa Inu, Perro de Presa Canario, Pit Bull Terrier or any dogs listed under the Dangerous Dogs act 1991 and the Dangerous Dogs (Northern Ireland) order 1991 or Dangerous Dogs (amendment) Act 1997 or any subsequent amendments.

1. **You** must contact **us** as soon as there is an **incident** that could give rise to a claim.
2. **You** must not admit to anyone that **your pet** was at fault, offer any compensation, make a payment, or try to negotiate.
3. **You** must forward on to **us** any letters, writs, summons, or other legal documents **you** receive, immediately, and **you** must not answer them.
4. **You** must tell **us** or assist **us** to establish the full circumstances of an **incident** provide written statements and go to court if necessary.
5. **We** may pay what **we** judge to be a reasonable amount for the compensation and costs, which will release **us** from any more payments under this **policy**.
6. **We** will have complete control of any claim or the defence of any legal proceedings.
7. **You** must not give anybody information or anything that could help them claim against **you** other than disclosing **your policy** number and name and address of **us**. In relation to any third party liability claims, **we** may pay up to the limit of **your** stated **policy** cover 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).

## SECTION 6: ADVERTISING AND REWARD

The monetary limit shown on your chosen policy is an overall limit for both of these benefits.

If you need to claim under this section, please call us to approve how you plan to use this benefit.

### Advertising – What is covered?

If **your pet** is lost or stolen, **we** will reimburse **you** for advertising in a local newspaper, making posters or any other expenditure for the recovery of **your pet** (previously agreed by **us**).

Any costs up to the benefit limit as shown in **your** chosen **policy** per **period of insurance**.

If **you** wish to use an animal location service these costs must be approved by **us** before they start work. **You** must provide **us** with a full estimate invoice listing what they plan to do and **we** will tell **you** what **we** will cover. Failure to do so may mean **your** claim is not settled.

### Advertising – What is not covered?

Reimbursing any money **you** spend trying to find **your pet** if **we** have not agreed to the way **you** are doing this.

More than £50 for the cost of advertising materials.

Any costs if **you** cannot provide **us** with invoices or receipts to show what **you** have paid for materials/advertising.

### Reward – What is covered?

If **your pet** is lost or stolen, **we** will approve a suitable reward to be offered for recovery of **your pet** up to the maximum amount as shown on **your** chosen **policy**.

### Reward – What is not covered?

Any reward payment to anyone who is a member of **your** family or house hold or by any person employed by **you**, residing with **you**, or otherwise known to **you**.

Any reward payment to the person who was caring for **your pet** when it was lost or stolen.

Any reward payment to the person or persons who stole or was involved in the theft of **your pet**.

Any reward payment that was not approved by **us**.

Any reward not supported by a signed receipt giving the full name, address, email address and telephone number of the person who found **your pet**, so **we** can contact them.



## SECTION 7: LOSS OF PET – THEFT OR STRAYING

**You must have claimed under Section 6: Advertising and Reward before you are able to use this benefit.**

### What is covered?

**We** will pay **you** up to the purchase price or the maximum sum shown on **your** chosen **policy**, (whichever is lower) in respect of the permanent loss of **your pet** due to being lost or stolen and after no recovery has been made after 45 days.

**You** must be able to prove **you** have attempted to locate **your pet** by notifying local rescue centres and for dogs, **your** local dog warden and in the case of theft, **you** have notified the police to report the theft and have a crime reference number.

This benefit can only be paid once per **period of insurance**.

If **you** are unable to provide **us** with formal proof of the amount paid for **your pet**, **we** will pay a current **monetary pet value** based on average prices at the time of **your pet's** death or up to a maximum of £250 for either a dog or a cat (whichever is lower).

### What is not covered?

If **your pet** is lost, stolen or strays prior to or within the first 14 days of **your policy** starting.

Any costs if **you** or the person looking after **your pet** has freely parted with them.

Any costs for the theft of **your pet** where it was not reported to the police and **you** are unable to provide **us** with the crime number.

Any costs for **your pet** straying, where it was not reported to local rescue centres and for dogs, **your** local dog warden. **You** will need to prove this in order for **your** claim to be considered.

Any claim for this benefit not submitted within 1 year of **your pet** going missing.

## SECTION 8: EMERGENCY BOARDING KENNEL/CATTERY FEES

### What is covered?

If **you** or a family member who permanently lives at **your** address are hospitalised for more than 72 consecutive hours, **we** will pay for **your pet** to be looked after by a registered kennel/cattery or pet sitter if there is no one else in **your** household who can do so.

If **you** choose to use a pet sitter, the maximum daily cost **we** will pay is £20.

### What is not covered?

1. Any claim under this section within the first 14 days of the start of **your policy**.
2. Any costs that are for dog walking services, unless **you** contact **us** before these happen and **we** approve the costs.
3. Any costs if **you** or **your** family member goes into hospital for any reason, **illness** or **injury** that was known to **you** before **your policy** first started.
4. Any costs if the hospitalisation is the result of pregnancy, giving birth, alcoholism, drug abuse, drug addiction, attempted suicide or self-harm.
5. Any costs resulting from nursing home care or any convalescence care that **you** do not receive in a hospital.
6. Any costs for the transportation of **your pet** to or from the boarding kennel/cattery/pet sitter establishment.
7. Any costs to a person who is a member of **your** family.
8. Any costs if **you** do not attend hospital for a continuous period of more than 5 hours a day over a continuous period of no less than 72 hours whilst a family member who permanently resides with **you** have an **illness** or **injury** which requires **you** to attend hospital.
9. Any costs if **you** do not provide **us** with invoices/receipts from the business who looked after **your pet**.
10. Any costs if **you** do not provide **us** with documents from the hospital showing when the admission and discharge took place.

## SECTION 9: EMERGENCY HOLIDAY CANCELLATION

### What is covered?

**We** will reimburse **you** up to the amount shown on **your** chosen **policy** for the non-recoverable cancellation and curtailment costs incurred by **you** if:

**You** cancel **your holiday** within 7 days prior to departure or;

**You** come home early because **your vet** believes **your pet** needs lifesaving **treatment** or lifesaving surgery.

### What is not covered?

Claims within the first 14 days of the commencement of **your policy**.

Any costs if **your pet** does not have lifesaving **treatment** or lifesaving surgery which resulted in **your** cancelling **your holiday** or returning home early.

Any costs if the **treatment** was for an **illness** or **accident** that is not covered on **your policy**.

Costs for anyone else who is on **holiday** or who is going to be on **holiday** with **you**. Unless they are under 18 years of age and no other adult is able to take care of them.

If **you** booked **your holiday** less than 28 days before **you** were due to leave.

If **you** knew about the **injury** before going on **holiday** and the **injury** was likely to necessitate emergency **treatment** and/or surgery.

Any additional costs which are incurred, e.g. if **you** fail to arrive on time at the airport/ferry port.

Any costs if **you** can claim these expenses back from anywhere else, for example, from **your** travel insurance.

Any additional cancellation charges incurred because **you** did not tell the company providing **your** transport or accommodation, their agents or any person acting for **you**, as soon as **you** knew **you** had to cancel **your holiday**.

Any costs if **your holiday** does not start and finish whilst **your policy** is in force.

Any claim more than one year after **you** return.

Any costs if **you** cannot provide **us** with all invoices and receipts for the expenses **you** are claiming. **You** must provide **us** a booking invoice for the **holiday**, detailing any cancellation charges. **You** must also provide **us** with confirmation and (where applicable) evidence that **you** are unable to claim these costs back from **your** travel providers.

## SECTION 10: OVERSEAS TRAVEL COVER

### What is covered?

Any costs in the event **your pet** requires **veterinary treatment** whilst temporarily outside the **UK**.

Cover overseas is subject to 364 days on all policies, meaning **you** must return to the **UK** at least once per **period of insurance** for **your policy** to remain valid.

Payment of any **treatment** must be made by **you** to the **vet** whilst **you** are outside of the **UK**.

Upon **your** return home, **you** should contact **us** immediately and report the claim on **0333 999 0933**, where **we** will send **you** a claim form to be completed.

**We** will reimburse **you** any eligible costs in sterling at the rate of exchange applicable at the date the bills were settled.

### What is not covered?

Any costs if **you** are able to provide invoices/receipts showing the **treatment** given to **your pet** and the cost.

# SECTION 11: UNEXPECTED QUARANTINE EXPENSES

**This section does not apply to Time Limited policies**

## What is covered?

**We** will pay up to the maximum amount payable, on **your** chosen **policy** for:

Quarantine kennel costs and other costs incurred in getting a new health certificate for **your pet**, should **your pet's** microchip of ISO Standard 11784 or Annex A to ISO Standard 11785 fail.

Quarantine kennel costs should **your pet** have to go into quarantine, due to **illness** despite **your** compliance with all the required and relevant regulations, laws and/or legislation of your country of travel.

**We** will pay **you** for the cost of a replacement health certificate should the original become lost, stolen or destroyed during the trip.

## What is not covered?

Any costs if the microchip was checked and found not to be working properly within the 14 days prior to **your** departure on any trip.

Any cost arising from any **condition** of which **you** were aware before the start of any trip.

Any costs resulting with **your** non-compliance with all or any relevant regulations, laws and/or legislation of **your** country of travel.

Any loss, theft or destruction of the health certificate prior to the start of **your** trip.

## SECTION 12: HELPLINES

### **Bereavement Counselling**

An understanding, confidential and professional service enabling **you** to talk for as long as **you** need about the death or **illness** of **your pet**. Help and advice to address the symptoms brought about by bereavement is available 24 hours a day, 365 days a year.

**Telephone: 0161 836 9498**

### **Pet Legal**

Lawyers are available to provide advice and explain legal issues in plain English and in a friendly and helpful way - available 24 hours a day, 365 days a year.

**Telephone: 01775 764 191**

# CANCELLATION

**You** may cancel this **policy** within 14 days of receipt of the **policy** documents or the renewal date by calling **us** on **0333 999 0933**, writing to **us** at:

ASDA Pet Insurance  
2nd Floor, 5000 Lakeside  
North Harbour  
Western Road  
Portsmouth  
PO6 3EN

or emailing **us** at:

**customerqueries@insurancefactory.co.uk**

Any premium already paid by **you** will be refunded to **you** providing no claim has been made or is intended to be made and no **incident** likely to give rise to a claim has occurred. If **you** do not exercise **your** rights during the 14 day period, **your policy** will continue as normal.

If **you** make a claim within the first 14 days of the **policy** start date, then this will be taken as accepting the **policy** cover and no refund would then be available.

The **policy** is an annual contract of insurance that can be paid monthly. If the premium is paid under a monthly instalment option and a claim has been settled, **you** must pay any remaining instalments for the same **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 the **policy** is cancelled during the same **period of insurance**.

Provided there has been no claim or **incident** likely to give rise to a claim during the current **period of insurance** and **you** cancel **your policy**, **we** will calculate the proportionate premium for the period **you** have been insured and refund any balance.

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.

If **your pet** dies or is reported as lost or stolen and you need to make a claim, the remaining premiums for the full **policy** year will not be charged.

**We** can cancel this **policy** if there are serious grounds to do so, for example:

Where **we** have been unable to collect a premium payment (payment terms including the procedures in the event of non-payment of the premium will have been agreed between **you** and **us** when **you** took out this **policy**); or

**You** have failed to take reasonable care in providing information in relation to this insurance as required by general condition 1 of this **policy**.

## CANCELLATION (CONT)

**You** have failed to co-operate or provide information and assistance in relation to any claim under this **policy** or with regards to the administration or operation of this **policy**.

Where **you** fail to take **your pet** for annual check-ups and keep **your pet** vaccinated against distemper, hepatitis, leptospirosis and parvovirus in the case of dogs; against feline infectious enteritis, feline influenza feline herpes virus, feline calicivirus and feline leukaemia in the case of cats; and as advised by **your vet** in accordance with general conditions 7 of this **policy**.

Where **we** have grounds to suspect fraud.

Where **you** use threatening or abusive behaviour towards a member of **our** staff or a member of staff of **your vet** or **our** supplier.

**We** will do this by giving notice in writing to **your** last address notified to **us**.

### Defaulted direct debits

In the event of payment default, **you** have 7 days from the date of default to contact **us** to arrange payment.

If payment is not received, **your policy** will be cancelled from the default date. A pro-rata charge for **your** period on cover will be made. Where a claim has been made, the remaining premium for the **policy** year will be charged.

### Cancelled direct debits

In the event **your** direct debit is cancelled, **you** have 7 days from the date the direct debit is cancelled to contact **us** to arrange payment and set up a new direct debit.

If **you** do not contact **us** and payment is not received, **your policy** will be cancelled from the date **we** are notified by **your** bank that the direct debit was cancelled. A pro-rata charge for **your** period on cover will be made. Where a claim has been made, the remaining premium for the **policy** year will be charged.

It is **your** responsibility to ensure **you** have sufficient funds to pay for **your** insurance when it is due. If **your policy** is cancelled due to either a defaulted direct debit, or **your** direct debit instruction with **us** was cancelled, **you** will not be able to continue with the same **policy** and will need to start a new **policy** if **you** wish **your pet** to be insured again. This means any **illness** or **injury your pet** was covered for will not be covered under the new **policy** and will be classed as a **pre-existing condition(s)**.



# FRAUD

It is unfortunate that with all types of insurance, fraud and attempted fraud can occur. **We** employ sophisticated fraud detection and prevention techniques to ensure **we** only pay out on genuine claims. By doing this, **we** are protecting the interest of all policyholders and are able to offer a comprehensive **policy** with competitive premiums.

**We** and/or **our** agents, along with other insurers pass information to fraud prevention and credit reference agencies.

**We** may pass **your** details to the Claims and Underwriting Exchange Register run by the Motor Insurers' Bureau and Insurance Hunter, a central insurance anti-fraud system and other databases, to which other insurers may have access.

**We** will not pay any claims and may void **your policy** if **you** or anyone acting for **you**:

1. Makes a claim under the **policy** knowing the claim to be false or fraudulently exaggerated in any respect.
2. Make a statement in support of a claim knowing the statement to be false in any respect.
3. Submit a document in support of a claim knowing the document to be forged or false in any respect.
4. Make a claim in respect of any loss or damage caused by **your** wilful act or with **your** connivance.

## What we will do if we suspect fraud

**We** shall be entitled to recover from **you** the amount of any claim **we** have previously paid under the **policy**, since the last renewal date.

**We** shall not make any refund of any premiums already paid.

**We** may inform the police of the circumstances.

**We** will immediately cancel this and all other **policies you** have with **us**.

# COMPLAINTS PROCEDURE

**We** are committed to providing **you** with an exceptional level of service and customer care. **We** realise, however, that sometimes things can go wrong and there may be occasions when **you** feel that **we** have not provided the service **you** expect from **us**.

When this happens **we** want to hear about it so that **we** can try to put things right. Although it can help to make complaints in writing, **we** will accept complaints in whatever form **you** prefer.

## 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 provide **your** name, **policy** number and a contact telephone number.

Please explain clearly and concisely the reason for **your** complaint.

## Step one – Initiating Your complaint:

In all cases, if **you** wish to provide written details, the following checklist has been prepared for **you** to use when drafting **your** letter.

Head **your** letter ‘pet insurance complaint’.

Give **your** full name, postcode and contact telephone number(s).

Explain that **you** have an **ASDA pet insurance policy** and quote **your policy** number.

Explain clearly the reason(s) for **your** complaint.

The letter should be sent to the Complaints Manager at the following address:

ASDA Pet Insurance  
2nd Floor, 5000 Lakeside  
North Harbour  
Western Road  
Portsmouth  
PO6 3EN  
Email: [customerqueries@insurancefactory.com](mailto:customerqueries@insurancefactory.com)  
Tel: **0333 999 0933**

**We** will acknowledge **your** complaint promptly, normally within five days unless exceptional circumstances apply.

The Complaints department will investigate **your** complaint impartially taking into account all relevant factors and will provide **you** with a written response to **your** complaint within 8 weeks.

It is expected that the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **you** are not satisfied, or if **you** have not heard from **us** within 8 weeks, **you** can take the issue further.

# COMPLAINTS PROCEDURE (CONT)

## Step two – The Financial Ombudsman Service

If **we** have given **you** our final response, or if **you** have not heard from **us** within 8 weeks, or if **you** are still not satisfied **you** may refer **your** case to the Financial Ombudsman Service (FOS). The Ombudsman is an independent body that arbitrates on complaints about general insurance products and other financial services. It will only consider complaints after **you** have been provided with written confirmation that all internal complaints procedures have been exhausted.

Insurance Division  
Financial Ombudsman  
Service Exchange Tower  
Harbour Exchange Square  
London  
E14 9SR  
Tel: **0300 123 9123**  
Fax: **020 7964 1001**

Please note that **you** have six months from the date of the final response in which to refer **your** complaint to the Ombudsman. Referral to the Ombudsman will not affect **your** right to take legal action.

## Our promise to you

**We** will acknowledge all complaints promptly. **We** will investigate quickly and thoroughly. **We** will keep **you** informed of progress. **We** will do everything possible to resolve **your** complaint. **We** will learn from **our** mistakes. **We** will use the information from complaints to continuously improve **our** service. To help **us** improve **our** service, **we** may record or monitor telephone calls.

# DATA PROTECTION

**We** believe in keeping **your** information safe and secure. Full details of what data **we** collect and how **we** use it can be found in **our** privacy **policy** or by requesting a copy from **our** data protection officer (contact details below).

This section provides **you** with some basic information and briefly explains what **we** do with **your** information.

**We** are governed by the Data Protection legislation applicable in the **United Kingdom**. **We** collect **your** personal details in order to consider **your** application for insurance and to administer insurance services to **you**, including claims investigation and management.

**We** may use **your** personal information for a number of lawful purposes. These include providing **you** with **our** contracted services; dealing with **your** claim; carrying out checks such as fraud checks and credit checks; and where agreed, providing **you** with information about similar products and services which may be of interest to **you**.

In order to provide **our** services to **you**, **we** may share **your** personal information with other insurance companies, solicitors, regulators, business partners and third-party suppliers where necessary. These third parties may share **your** information with their own agents for insurance administration purposes.

**We** may also have a legal obligation to provide **your** personal information, in certain circumstances, to regulators, police and other public bodies.

## Providing you with details on other ASDA products and services

Where **you** have given **us your** consent to do so, **we** will send **you** information about other **ASDA** products and services or other third parties which may be of interest to **you** as **you** have indicated.

**You** have a right at any time to stop **us** from contacting **you** for marketing purposes or giving **your** information to other third parties.

If **you** have previously consented to being contacted for marketing purposes, **you** can unsubscribe or change **your** preferences at any time by e-mailing:  
[customerqueries@insurancefactory.co.uk](mailto:customerqueries@insurancefactory.co.uk)

## Your rights as a Data Subject

Under Data Protection laws, **you** have certain rights; these include for example, a right to understand what data **we** hold on **you** and a right to ask **us** to amend that data if it is incorrect. If **you** would like to exercise any of **your** rights as detailed within **our** full privacy policy, please contact **our** Data Protection Officer:

Data Protection Officer  
Insurance Factory Limited  
45 Westerham Road  
Bessels Green  
Sevenoaks  
Kent TN13 2QB

## DATA PROTECTION (CONT)

Please make sure **you** provide **your** name, address, **policy** number and other relevant information to allow **us** to identify **you** and promptly respond to **your** query. **You** understand that all personal data **you** supply must be accurate. If **you** would like any other person to discuss **your policy** or make amendments then **we** must have **your** permission.

### Updating your records

If **you** think **our** records are wrong or out of date, particularly **your** contact details, **you** must contact **us** immediately to correct them. **You** can do this by calling **0333 999 0933**

or by emailing: [customerqueries@insurancefactory.co.uk](mailto:customerqueries@insurancefactory.co.uk)

# NOTES

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# NOTES

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