

Petgevity



**Your pet insurance policy document -**  
Petgevity Lifetime

## Welcome to Petgevity

Thanks for choosing Petgevity to protect your pet. We hope you've got all the info you need to feel confident about vet bills if your pet becomes unwell. We're here if you need us. Call us on the number below if there's anything we can do for you.

Petgevity hasn't given you any advice or recommendations. Please check if this product meets your needs. We may record your calls to help us make sure you're getting the best service possible.

Please read this document with your confirmation of cover to find out what is and what isn't covered.

If anything doesn't look right, please let us know as soon as possible.

If the information we have isn't accurate, we might not be able to pay your claim.

## Useful contact details



### Email

[info@petgevity.co.uk](mailto:info@petgevity.co.uk)



### Phone us

0333 006 3211



### Live chat us

[www.petgevity.co.uk](http://www.petgevity.co.uk)

Your online account



### Claims

**Tel:** 0333 009 0998

[claims@petgevity.co.uk](mailto:claims@petgevity.co.uk)

## Opening hours

### Monday to Friday

8.30am – 6pm

### Saturday and Bank Holidays

9am – 5pm

### Sundays

Closed

Throughout this document we use bolded words.

These have special meanings which can be found on page 13.

## Stay in control of your cover online

Managing your cover is quick and easy through your online account. This includes:

- ✓ Changing your vet fee limit, excess, and bill share (vet fee increases will need medical screening)
- ✓ Adding on optional extras like dental illness and travel and holiday cover
- ✓ Moving your monthly payment date
- ✓ Updating your pets neutering and microchip status

Plus so much more – so register or log in today: [www.petgeevity.co.uk](http://www.petgeevity.co.uk)

## How do I register with FirstVet?

### FirstVet is available to all Petgeevity policy holders

Once your cover has started you can register with FirstVet. We'll also send you an email with more information on how to register with FirstVet. Here's what you'll need to do:



1

#### Check your emails

We'll send you an email with access to FirstVet.

2

#### Add your pets

Under My Pets, add your pet that you have covered with us.

3

#### Book a consultation

When you need FirstVet, simply book a consultation. Just let us know your pet's symptoms and then pick a time slot.

4

#### Talk to a vet

It's as simple as that. You'll be sent a text reminder before your call is due to start. Just enter the app and join the video call with your vet!

# Contents

Welcome to Petgevity	Page 2
Useful contact details	Page 2
Summary of cover limits (Table of Benefits)	Page 6
Free unlimited online video calls with a vet	Page 9
<b>How this policy works</b>	Page 10
Your pet's Lifetime policy	Page 10
Important information	Page 10
Excess & Bill share	Page 10
Waiting periods	Page 11
Limits of cover & Inner limits	Page 11
About your contract	Page 11
Fraud	Page 12
Things you need to know	Page 13
Words with special meanings (definitions)	Page 13
Your pet's conditions	Page 15
Linked conditions	Page 15
Pre-existing conditions	Page 16
<b>How to make a claim</b>	Page 16
Making a claim	Page 17
Claims conditions (what you agree to)	Page 17

# What this policy covers

<b>Section 1:</b> Vet Fees	Page 18
<b>Section 2:</b> Emergency care	Page 20
<b>Section 3:</b> Third-party liability (dogs only)	Page 22
<b>Section 4:</b> Dental Illness (optional)	Page 24
<b>Section 5:</b> Missing pet (optional)	Page 25
A: Loss, theft or straying	Page 25
B: Advertising and reward	Page 26
<b>Section 6:</b> Farewell (optional)	Page 27
A: Death from Accidental Injury or Illness	Page 28
B: Cremation or burial	Page 29

<b>Section 7: Travel and Holiday (optional)</b>	Page 30
A: Vet Fees Abroad	Page 30
B: Emergency return home	Page 31
C: Cancelling or cutting short your trip	Page 31
D: Delayed return	Page 33
E: Quarantine expenses	Page 34
<b>What this policy doesn't cover</b>	Page 35
<b>Conditions applying to this policy</b>	Page 37
<b>Making changes to this policy</b>	Page 38
How to change your cover	Page 38
How to renew your policy	Page 39
How to cancel your policy	Page 40
<b>How to make a complaint</b>	Page 41
<b>Information about your insurer</b>	Page 42
The Insurer	Page 42
How we protect your money (Compensation Scheme)	Page 43
How we use your personal data	Page 43

## Summary of cover limits (Table of Benefits)

All cover limits are per **pet** per **policy** year unless otherwise stated.

Section	Cover	Limit of Cover	Excess	Bill Share
1	<b>Vet Fees</b>	Your chosen amount as shown on your confirmation of cover	Y	Y
	• Behavioural Treatment	• up to £1,000	Y	Y
	• Complementary Therapy	• Your chosen vet fee amount or £1,500 whichever is lower	Y	Y
	• Dental (accident injury only)	Your chosen vet fee amount	Y	Y
	• Euthanasia	£250	N	N
	• Prescribed diet food	£100	Y	Y
	• Cruciate ligaments	Your chosen vet fee amount or £2,000 whichever is lower	Y	Y
	• MRI and CT scans	Your chosen vet fee amount or £2,000 whichever is lower	Y	Y
	• 24/7 Video Vet Access with FirstVet	Unlimited	N	N
2	<b>Emergency Care – kennel/cattery fees/dog-walking/pet-minding</b>	<ul style="list-style-type: none"> <li>• £35 per day up to £750 (professional)</li> <li>• £15 per day up to £750 (friend)</li> </ul>	N	N
3	<b>Third Party Liability (Dogs only)</b>	£2,000,000	£250	N
<b>Optional Extras (available subject to additional Premium and only valid if shown on Your Confirmation of Cover)</b>				
4	<b>Dental Illness</b>	Your chosen vet fee amount or £5,000 whichever is lower	Y	Y

Section	Cover	Limit of Cover	Excess	Bill Share
5	<b>Missing Pet</b>			
	<b>A. Loss, theft or straying</b>	Up to your pet's value or £5,000, whichever is lower	N	N
	<b>B. Advertising and Reward</b>		N	N
	• Advertising	£250	N	N
	• Reward	Up to twice your pet's value or £5,000, whichever is lower	N	N
6	<b>Farewell</b>			
	<b>A. Death from accidental injury or illness</b>	• Only available for dogs up to 8 years old and for cats up to 10 years old. Up to your pet's value or £1,000, whichever is lower.	N	N
	<b>B. Cremation or Burial</b>	• £250	N	N
7	<b>Travel and holiday</b>			
	<b>A. Vet fees abroad</b>	Your chosen amount as shown on your confirmation of cover	Y	Y
	• Behavioural Treatment	• Behavioural Treatment - up to £1,000	Y	Y
	• Complementary Therapy	• Complementary Therapy - your chosen vet fee amount or £1,500 whichever is lower	Y	Y
	• Euthanasia	£250	N	N
	• Prescribed diet food	£100	Y	Y

Section	Cover	Limit of Cover	Excess	Bill Share
	• Cruciate ligaments	Your chosen vet fee amount or £2,000 whichever is lower	Y	Y
	• MRI and CT scans	Your chosen vet fee amount or £2,000 whichever is lower	Y	Y
	• Dental (accident injury only)	Your chosen vet fee amount	Y	Y
	• 24/7 Video Vet Access with FirstVet	Unlimited	N	N
	<b>B. Emergency repatriation</b>	Together with vet fees, up to Your chosen vet fee amount	Y	N
	<b>C. Trip cancellation</b>	Up to £5,000 per person per trip	Y	N
	<b>D. Cutting short your trip</b>	Up to £5,000 per person per trip	Y	N
	<b>E. Delayed return</b>		Y	N
	• Additional travel and accommodation expenses	Up to £2,500 per person per trip	Y	N
	• Pet travel documents	Up to £1,000 per pet per trip	Y	N
	<b>F. Quarantine expenses</b>	£35 per day up to £1,500 per pet per trip	Y	N



# Free unlimited online video calls with a vet

## FirstVet

Using FirstVet won't affect **your premium**. There's no excess to pay for this service either.

**We've** partnered with FirstVet to give **you** 24/7 free access to video meetings with qualified  **vets**. This is for the **pet** or **pets** **you** have covered with **us**. FirstVet's friendly and experienced  **vets** can give **you** advice, information, and treatment suggestions. Or refer **you** to a local **vet** if necessary.

**You** can video-chat with a **vet** any time day or night from anywhere, even when you're abroad. Call FirstVet if **you're** worried about **your pet's** health but aren't sure if **you** need to visit a **vet**. They may be able to put **your** mind at ease or resolve minor issues and questions in **your** own home. If **you** need behavioural support, **you** can book sessions with a FirstVet Clinical Animal Behaviourist.

### Here are some of the things FirstVet can help with:

- Vomiting and diarrhoea
- Poisoning
- Eye and ear problems
- Skin problems and itching
- Coughing and sneezing
- Minor injuries
- Bereavement counselling
- Behavioural support.

### How do I register with FirstVet?

**You** can register with FirstVet once **your** cover has started. **We'll** email **you** with more information on how to register. Here's what **you'll** need to do:

#### 1. Check your emails

**We'll** email **you** with access to FirstVet. Log on to your online account or visit **our** website

**Download the app and log in**

**Download the FirstVet app from** <https://firstvet.com/uk/>

**Log in with your Petgeivity details**

2. Add your **pets** Under 'My **pets**', add the **pet** **you've** covered with **us**.
3. Book a meeting, let them know **your pet's** symptoms and then pick a time slot.
4. **We'll** send a text reminder before **your** call is due to start. Just log onto the app and join the video call with **your vet**.

## How this policy Works

### Your pet's Lifetime policy:

This **policy** provides annual cover for **your pet** for illness and accidental injury. **We'll** provide cover up to a maximum of 8 pets in **your** household. **We'll** provide cover up to the limit of cover in each **policy** year. The limit of cover is on **your confirmation of cover**.

This will refresh every 12 months. If **you** renew **your policy**, you'll be able to claim up to the **limit of cover** in the next **policy year**.

If **your policy** stops for any reason (including when **premiums** aren't paid) all cover for **your pet** will end. **We** won't pay any more claims.

### Important information

Please keep a record of all information **you** share with **us**. This includes phone calls, letters, emails, and forms **you** fill out. This might be on paper or online. A copy of the **policy** is available on request.

**We** need all the details given to **us** to be right. Please answer **our** questions honestly and in full.

**We** need to know if the details or something else changes. So please tell **us** as soon as possible.

If **you're** unsure, **you** may need to talk to **your vet**. The breed of **your pet** should be the same as the breed **your vet** has. Please tell us if **you** don't, as an error may make **your** insurance invalid.

### Excess

**You** can choose the amount **you** want to pay towards the cost of a claim. This is known as the excess. **You** can choose to increase the amount of excess **you** pay to reduce **your premium**. This amount will be taken off when **we** pay a claim. Each section will say how the excess is applied.

The amount of excess is shown on **your confirmation of cover**.

### Bill share (also known as co-pay)

Bill share is the percentage share **you** pay towards the cost of a claim. The bill share is taken off the amount left after the excess has been taken off.

When **your** dog reaches the age of 8 and **your** cat reaches the age of 10, a bill share of 20% will apply. **You** can choose to increase this to 30% if **you** wish to pay a lower **premium**.

When **your** dog is under the age of 8 and **your** cat is under the age of 10, **you** can select a percentage of bill share to reduce the cost of **your policy**.

For example, **you** have an excess of £200 and 20% bill share:

Valid claim amount (for one <b>Condition</b> )		£1000
Less Excess	£200	£800
Less bill share	20% = £160	£640
Total excess and bill share paid by you	£360	
Total paid by us	£640	

Each section of the **policy** will say how the bill share is applied.  
The percentage of bill share **you**'ll pay is on **your confirmation of cover**.

### Waiting periods:

It is normal for **pet** insurance to have time to wait before **you** can make a claim. No claims will be paid for any treatment in the waiting period. **We** also won't pay for treatment if the symptoms start in the waiting period.

#### **We won't pay any claims for: -**

- Any symptom or illness within the first 14 days after the **cover start date**.
- Any accidental injuries within the first 2 days after the **cover start date**.

The waiting period will start on the first full day after the **cover start date**.

The waiting period won't apply if **you** have previous insurance with no gap in cover.

**You** must have similar cover on **your** previous insurance, but **you** can have different benefit levels. **You**'ll need to provide **us** full details of **your** previous insurance.

#### **Here are some examples**

- If **you** want to claim for trip cancellation within the waiting period. **Your** previous insurance must have covered trip cancellation.
- **Your** previous insurance had a lower **vet** fee level and no gap in cover. The waiting period will not apply as **you** had cover for **vet** fees.

### Limits of cover and inner limits

Each section of the **policy** has a limit on the amount **we**'ll pay under that section. This is called the limit of cover. **You** can choose to increase some limits of cover and add extra covers.

Some sections have inner limits. These are the most **we**'ll pay for certain items. When the **policy** is renewed the amounts will refresh. **We**'ll only pay the lowest amount of the limit of cover or the inner limit.

#### **For example:**

- Vet fee limit £1k – the most **we**'ll pay is £1k.
- Vet fee limit £6k – the most **we**'ll pay for cruciate ligaments is £2k.

**You** can see the limit of cover and inner limits for each section in the “table of benefits”.

### About your contract

**Your policy** is a legal contract between **you** and **us**.

**Your policy** wording and **your confirmation of cover** make one legal document. **You** must read them both.

### **For our part of the contract:**

We'll provide the cover set out in **your policy** and **your confirmation of cover**. They will show:

- which cover options **you** have chosen
- The total **premium**
- other information about **your pet**

This cover will only apply to the **pet** named in the **policy**, for the **policy year**.

### **For your part of the contract**

- **You** must pay the **premium** for **your** annual **policy**. This can be a single amount at the start or in monthly payments
- **You** can pay the **premium** with a debit or credit card or another method **we** agree
- **Your policy** is based on the information **you** gave **us** about **you** and **your pet**. The details are shown on **your confirmation of cover**
- Every time **we** or **you** make a change to **your** insurance, **we'll** send **you** a new **confirmation of cover**

The law of England and Wales will apply to this contract. All information between **you** and **us** will be in English.

### **Fraud**

#### **Your policy could become invalid if you or someone acting for you:**

- Knowingly provides information to **us** that isn't true;
- Mislead **us** in any way to get insurance from **us**, obtain more favourable terms or a reduced premium.

#### **To avoid committing fraud, don't:**

- Knowingly provide information to **us** that isn't true;
- Mislead **us** in any way to get insurance from **us**, obtain more favourable terms or a reduced premium;
- Make a claim under the **policy** knowing it to be false or fraudulently exaggerated in any way;
- Submit a document in support of a **policy** or claim knowing the document to be forged or false in any way;
- Make a claim for loss or damage deliberately caused by **you**, or on **your** behalf without telling **us**;
- Engage in any other behaviour to gain monetary benefit that **you** wouldn't normally receive.

#### **If you're found to have committed fraud, we:**

- Won't pay any part of the claim;
- Will cancel **your policy** from the date the fraud occurred;
- Won't return any **premium** paid;
- Will ask **you** to pay **us** back any claims **we** have paid from the date the fraud occurred;

- May take legal action;
- May pass **your** details to relevant agencies to prevent fraud and money laundering.

### Things you need to know

It's important to read this **policy** document and **your confirmation of cover**. Please check **you** understand the cover provided and what is and what isn't covered.

**You** have the right to cancel this **policy** within the cooling-off period.

Please see [\*\*"Cancelling your policy"\*\*](#) for more information.

### You can find the things we don't cover in:

- The **"What this policy doesn't cover"**
- **"We don't cover"** in each section of cover.

**You** can insure more than one **pet** under this **policy**. We'll use the word **"pet"** to refer to one or more **pets** in this **policy**. Please note the limits of cover, inner limits, excess and bill share will apply to each **pet**.

### Words with Special Meaning (definitions)

We've tried to make this **policy** easy to read and not use jargon. In some cases, **we** do use terms with defined meaning. **You** can see these below, so **we** don't explain them throughout the document.

### Behavioural Treatment

Treatment or therapy, recommended by a **vet**. To treat **your pet**, or help it recover from a mental disorder or condition. If **your pet** hasn't been trained or socialised, **we** won't cover the cost of the therapy.

The person giving the treatment must be qualified or certified to work with **your pet**.

For example: a Certified Clinical Animal Behaviourist.

### Complementary Therapy

Treatment or therapy recommended by a **vet**.

To treat **your pet**, or help it recover from a physical disorder, including:

- Physiotherapy
- Hydrotherapy
- Osteopathy
- Massage
- Laser treatment
- Electrical muscle stimulation
- Acupuncture
- Chiropractic treatment
- Homeopathic treatments
- The use of complementary and herbal medicines

The person giving the treatment must be qualified or certified to work with **your pet**.

For example: a member of the Association of Chartered Physiotherapists in Animal Therapy.

### **Confirmation of cover**

The **confirmation of cover** shows the levels of cover **you** have chosen. Please read it with this **policy** wording.

### **Cover start date**

The date **your pet's** cover begins in the first year of the **policy**. This is shown on **your confirmation of cover** as 'cover date' under each pet.

If **you** let **your** cover with **us** cancel and then buy a new **policy**. The **cover start date** is the start of **your** cover under the new **policy** when **you** buy a new one.

If **you** choose to add extra cover after buying or renewing this **policy**. The **cover start date** for any extra cover will be the date **you** add it unless **we** tell **you** a different date.

### **ERGO TIS/We/Our/Us**

ERGO TIS on behalf of Great Lakes Insurance UK Limited.

### **Family**

**Your** husband, wife, civil or life partner, parents, grand-parents, children. This includes foster/adopted/stepchildren.

### **Pet**

A cat or dog insured under this **policy**. Named and described on **your confirmation of cover**.

### **Policy**

The contract of insurance as set out in this document.

### **Policy Year**

The 12-month period from **your** renewal date or **cover start date** if **you're** in the first year of **your policy**.

### **Premium**

The amount **you** pay for the cover provided by this annual **policy**. **You** can pay in full as a single amount or by monthly instalments.

### **United Kingdom/UK**

The United Kingdom of Great Britain and Northern Ireland, the Isle of Man, or the Channel Islands.

## Vet

- a. In the United Kingdom. A member of the Royal College of Veterinary Surgeons, working as a **vet** surgeon. Or holding a **vet** degree approved by the Royal College of Veterinary Surgeons; or
- b. Outside the United Kingdom. A registered **vet** surgeon who is allowed to work in the country where **your pet** is.

## You, your, yourself

The person named on this insurance **policy** and is responsible for **your pet**.

## Your pets' Conditions:

**We'll** consider a condition to be any accident or illness. Including anything inherited or due to a birth defect whether **you** have a diagnosis, or not.

**Your pet** may need different types of treatment. Some examples of treatment include:

- Medication and surgery
- Nursing and care
- Behavioural treatment
- Complementary treatment

**We'll** need these to be given by a **vet** or someone at the **vet** practice.

Any **behavioural** or **complementary treatment** must be recommended by **your vet**.

## Linked Conditions:

These are conditions that may be connected to another condition. These conditions may fall into the following categories:

### a. **Bilateral Condition(s)**

Any condition affecting both the right and left sides of the body. Or pairs of organs or body parts of **your pet**. For example, ears, eyes, cruciate ligaments, hips, and patellae where there's an underlying cause.

### b. **Recurring Condition(s)**

Any previous accident or illness or any symptoms that may return or keep coming back. No matter how many times this comes back or how many areas of the body are affected.

### c. **Related Condition(s)**

Any illness, accident or symptom which is:

- diagnosed as one illness or accident
- caused by, related to, or resulting from another illness, accident, or symptom

**We'll** treat bilateral, recurring, or related conditions as one condition. **We'll** apply cover limits, excesses, or exclusions to one condition. **Your vet** may state the conditions aren't related. **Our policy** needs **us** to treat them as one condition.

### Pre-existing conditions:

**We** want to make it clear **we** won't pay claims for any pre-existing conditions.

**Our** definition of pre-existing conditions might be different from **your** current insurer, so please check.

### A pre-existing condition is:

- anything before the **cover start date** or in the waiting period.

### When we say anything, we mean:

- showing signs or symptoms of a change in health or behaviour
  - A symptom is a change in **your pet's** normal healthy state, its bodily functions or behaviour
- any condition or illness
  - A physical disease, sickness, deformity, infection, or failure which is not due to an accident. This includes any symptoms, even if it has not been diagnosed
- check-ups, monitoring, follow-ups, investigations, or advice
- needs or received treatment, surgery, medication, or prescribed food
- already has a physical deformity, illness, or injury
- any undiagnosed symptoms
- any undiagnosed or suspected conditions
- Any symptoms, illnesses or injuries **you** haven't seen **your vet** about
- any surgery or treatment **your vet** has told **you** might be needed

**You** must keep following the advice and treatment given by **your vet**.

### How to make a claim: When making a claim

Please check **your** documents and this **policy** wording to see if the claim is covered.

### Make sure you read any specific conditions including:

- treatment dates are after **your** policy start date.
- for first claims only, the amount **you** are claiming is more than the amount of excess **you** need to pay.



## To make a claim

Log on to **your** online account to complete a claim form online. **We**’ll send it on to **your vet** to complete their part. **We** aren’t able to pre-authorise claims. Please submit **your** claim as soon as possible. **Our** claims team will assess **your** claim once all information has been received. **We**’ll also send a copy to **your** online account.

If **you** prefer, **we** can email/post a claim form to **you**. **You** can then fill it out with **your** vet or contact **our** claims team.

If **you**’d like to contact Petgevity Claims:

Tel: 03330 090998

Email: [claims@petgevity.co.uk](mailto:claims@petgevity.co.uk)

## Address:

Petgevity Claims

2nd Floor

5000 Lakeside

North Harbour Western Road

Portsmouth

PO6 3EN

Monday: Friday 9am-6pm

Saturdays: 9am- 2pm

Sundays and Bank Holidays: closed.

## Important

If **your pet** is very sick or badly injured, please see a **vet** immediately.

## As part of your policy, you agree to and accept the following:

1. **We**’ll ask for information or records to help **us** assess **your** claim. This might be from any **vet** **you** have seen, a specialist, breeder, or rescue centre.
2. Any **vet** treating **your pet** can openly talk about and receive information about **your** claims with **us**. This includes sending **your** claim using a third-party computer system.
3. **We**’ll take off any excess and bill share from any payment **we** make to **you**. If **we**’re paying **your vet**, **you**’ll need to pay them any excess and bill share amount.
4. **You** must get all receipts, invoices, reports, and any other documents **we** need to support **your** claim. **You**’ll need to pay any charges for getting these documents. These must be original documents, not photocopies. Please keep a copy for **yourself**.
5. No interest will be added to any claim payments made.

## What this policy covers Section 1: Vet Fees

This section provides cover for the cost of necessary treatment **your pet** receives. Excesses will be for each condition for each **policy year**.

Bill share will be for all claims.

### What we Cover

1. **Vet** fees up to the **vet** fee limit **you** chose. This is for an accidental injury or condition. **your vet** fee limit is shown on **your confirmation of cover**.
2. Up to £2,000 to treat **your pet** for conditions relating to cruciate ligaments. This amount won't be more than the limit of cover for this Section.
3. Up to £1,000 towards the cost of **behavioural treatment** or linked therapy each **policy year**. They must be recommended by **your vet** to help them recover from a mental disorder or condition.
4. Up to £1,500 towards the cost of **complementary therapy**, (or **your** chosen vet fee limit, if lower) each **policy year**. This must be recommended by **your vet** to help **your pet** recover from a condition.
5. Up to £250 to have **your pet** put to sleep (euthanasia) if recommended or agreed by **your vet**. No excess or bill share will be taken off.
6. Up to £100 towards the cost of food for **your pet**. This must be prescribed by **your vet** to treat a condition that is not due to obesity.
7. MRI scans or CT scans are covered. This amount won't be more than the limit of cover for this Section.
8. Dental treatment of **your pet** following an accidental injury.

### We don't Cover:

1. The cost of any treatment for a condition or symptom that started in the waiting period or before the **policy** began.
2. Any pre-existing condition.
3. The cost of dental treatment for a condition not caused by an accidental injury.
4. House calls, ambulance fees or other costs for out of hours treatment. **We'll** pay these costs if **your vet** or FirstVet confirm that any delay or moving **your pet** would have had a huge effect on **your pet's** life.
5. Any cost relating to routine or investigative tests including blood tests done before surgery. Unless these tests are to diagnose a condition or symptoms and the condition is covered under this **policy**.
6. Any tests more often than once every 3 months that monitor an ongoing illness. Unless **your vet** confirms the reason, and **we** agree.

7. Any routine and/or preventative treatments:

- Flea/worming
- Vaccinations
- Cosmetic dentistry
- Cosmetic surgery
- Removal of dew claws
- Grooming and nail clipping.
- Spaying or castration
- Dental crowns, root canals or fillings
- Cleaning and descaling of teeth

This also includes any problems arising from these treatments. This may also be to treat or prevent another condition.

11. Any treatment linked to baby/milk teeth if **your pet** is over 16 weeks of age at the **cover start date**.
12. Any treatment linked to retained testes if **your pet** is over 16 weeks of age at the **cover start date**.
14. Any post-mortem costs.
15. Any treatment for an illness that a yearly vaccination would have stopped. Unless **your vet** agrees not to vaccinate **your pet** due to health concerns.
17. More than one reusable protective items such as collar (or cone), boot (one per foot), shirt or harness per treatment.
18. Any treatment linked to pregnancy, giving birth or breeding.
19. Any after surgery treatment or care **you** could have provided in **your** home **yourself**. **Your vet** will need to confirm this.
20. Any organ or stem cell transplants, fake limbs, and any linked treatment.
21. Any travelling costs incurred by **you**.
22. Claims resulting from **your** dog being involved in a fight where **your** dog has been in a fight before.
23. Any treatment following a fight between two or more of **your pet**'s.
24. Any fees charged by **your vet** for completing claim forms or for referral to another **vet**.
28. Any claims for treatment without an original receipt from **your vet**. The invoice must show the address and telephone number of the **vet** surgery providing treatment.
29. Anything in the **"What this policy doesn't cover"**.

### **Additional conditions applying to this section**

1. Sometimes **we** may ask **our vet** advisor if **we** think:
  - a. the **vet** fees appear to be too high.
  - b. the treatment was not needed or too much treatment.
3. If **we** think **you** have been charged too much, **we**'ll talk to **your vet** to agree lower costs. **We**'ll try and agree lower costs with **your vet**. If **we** can't agree, **we**'ll only pay the costs **our vet** advisor thinks are reasonable and essential.

**We**'ll only pay up to 100% mark-up on the manufacturer's price for **vet** medicines. This includes a dispensing fee billed by **your vet**.
4. **We** may refer **your pet**'s case history to a **vet** of **our** choice. This is rare, but if **we** do, **you**'ll need to have **your pet** examined by this **vet**. **We**'ll pay any costs for this.
5. If **you** decide to take **your pet** to a different **vet** for a second opinion, please tell **us** first. If **you** don't, the costs for this second opinion may not be paid.

### **To make a claim, these are the documents we'll need from you:**

- a. The invoices from the **vet** practice or therapist for the amount **you** are claiming.
- b. For **your** first claim **we** need **your pet**'s full clinical history. This is from each of the **vet** practices **your pet** has seen. For the next claim, **you**'ll only need to send the clinical history from the date of the last treatment **you** claimed for.
- c. If **you** are covered by the Travel and Holiday section, **we**'ll need the booking invoice for **your** journey showing the travel dates. **We**'ll also accept any other official documents if they show **your** travel dates.

## **Section 2: Emergency Care**

No excess or bill share will be taken off a claim.

This is for boarding or **pet** minding fees if **you** become ill and need emergency care. **We**'ll pay up to the limit of cover. The limits of cover are in the 'table of benefits' in this document.

The costs **we** cover include: if **you**, or a member of **your family**, must stay overnight in hospital. This must be for 24 hours in one visit due to injury or illness.

If **you** or someone in **your** home can't walk **your** dog because **you** are housebound due to an injury or illness.

If **your** home is badly damaged and **you** can't live there, **we**'ll cover these costs. The damage must be due to an explosion, storm, flood, subsidence, or burglary.

### What we cover:

Up to £35 per day towards:

**Your pet** staying in a licensed kennel or cattery or with a **pet**-minder. This is while **you** are staying in hospital overnight or **your** home is unliveable.

A professional dog-walker to walk **your** dog twice a day while **you** are housebound.

### We'll cover up to £15 per day for:

Someone who does not live with **you** who is looking after **your pet**. This would be while **you**, or a member of **your family**, are staying in hospital or **your** home is unliveable.

### What we don't cover

More than the total limit of cover on the table of benefits in this booklet for all claims during the **policy year**.

**We** won't cover a claim if the person looking after **your pet** normally lives with **you**. **We** won't cover a claim if **you** or a member of **your family** stays in a care or nursing home.

**We** won't cover any stay in hospital that is directly or indirectly arising from:

- a. any illness or injury which occurred or showed symptoms within the waiting period.
- b. pregnancy or childbirth. Unless there are problems which happened or first showed symptoms after the **cover start date** and waiting period.
- c. a cosmetic procedure **you**'ve chosen to have. This includes any other treatment not related to illness or injury. Also, if the procedure wasn't on the advice of a doctor, specialist, or consultant.
- d. alcohol, solvent or drug abuse/addiction, attempted suicide or self-inflicted injury or illness.

Anything mentioned in the "**What this policy doesn't cover**".

**We**'ll need to have a few documents from **you** that **we**'ve listed below:

These must show the name, address, and the dates:

1. A medical certificate from the hospital **you** or the member of **your family** were admitted to. **Your** GP can also give **us** a medical certificate. It must show the reason for being in hospital or housebound.
2. Original receipts from the boarding kennel, cattery, or pet-minder where **your pet** stayed. This must show the costs for each day.

3. Original receipts from the dog-walker. This must show the dates of walking and the costs for each day.
4. Written confirmation that **your pet** was looked after by another person. This must include their telephone number and the number of days **your pet** was looked after.

### Section 3: Third-party Liability (dogs only)

Excess will be taken off a claim.

No bill share will be taken off a claim.

In this section when **we** say **you** or '**your** household' **we** mean -

- **You**
- **Your** relative
- A member of **your** household
- Someone **you** employ
- A visitor in **your** house
- Someone **you** have asked to look after **your** dog

**We**ll pay up to the limit of cover seen on the 'table of benefits' in this booklet if **your** dog causes:

1. Death or bodily injury to another person; or
2. Loss or damage to the property of another person or their **pets**.

#### What we cover

1. Material damages and compensation for legal action that **you** are legally responsible for.
2. Legal costs when defending an action against **you** or agreeing the settlement of an action.
3. **Your** costs if **your** attendance is needed by **us** in the defence of an action.

#### What we don't cover

1. **Your policy** excess. **You**ll find the amount **you**ll need to pay on **your confirmation of cover**.
2. Any liability directly or indirectly arising from:
  - a. Death or bodily injury to someone in **your** household.
  - b. Loss of or damage to material property, buildings, or land. Only if they are owned by, or in the care, custody, or control of **your** household.
  - c. **Your** trade, job, or business or that of a member of **your** household.
  - d. Something happening at **your** place of work or of a member of **your** household.

- e. A legal contract which makes **you** legally responsible.
- f. **You** are unlawful or acting knowingly to cause a claim.
- g. A claim if **you're** fined, charged, or prosecuted.
- h. Any event made by or against a paid business or a professional. This includes when **your** dog is in the care of a:
  - dog walker
  - **pet** minder or sitter
  - boarding kennel
  - **vet**
  - grooming parlour
- i. If **you've** not followed the advice given to **you** about the behaviour of **your** dog. This advice could have been given by a **vet**, rescue centre, qualified trainer, or authority.
- j. If **your** dog enters an area where dogs are clearly not allowed. Unless **your** dog escapes and enters the area outside of **your** control.
- k. **Your** dog's interaction with other animals causing harm or worrying livestock.
- l. Anyone handling **your** dog without **your** permission.
- 3. Any claim if **your** dog lives on a property that sells alcohol. There is no cover if an event happens on or near the property.  
**You** must not be able to access the property that sells alcohol from **your** home.
- 4. Any liability if cover is provided under any other insurance or guarantee.
- 5. Damages awarded due to **your** carelessness.
- 6. Any claim if **you** didn't tell **us** of any accident involving a third party that happened before. When **you** bought or renewed the **policy you** need to tell **us** if **your** dog has bitten or attacked another dog. As well as if it has shown aggressive tendencies towards other people or dogs.
- 7. Any claim happening outside of the United Kingdom. Unless **you've** bought **our** optional Travel and Holiday cover.
- 9. Any fines, compensation, and legal costs if **you**:
  - break any laws or regulations.
  - breach of quarantine restrictions or import or export regulations.
- 11. Any claim if **you** are responsible for air, water, or soil pollution.
- 12. Any claim if **you** didn't tell **us** about it in a reasonable time. If **you** don't tell **us**, it will affect **our** ability to defend the claim or limit **our** liability.
- 13. Anything in the **"What this policy doesn't cover"**.

### Additional conditions applying to this section:

1. Let **us** know as quickly as **you** can of anything that might result in a claim. Send **us** all letters and legal documents unanswered. Please don't discuss liability with any third party.
2. Please don't admit liability, offer, promise, make a payment or compensation without **our** written agreement.
3. Please give **us** details of any other insurances that might provide cover for the claim.
4. **We**'ve the right to take over the defence and settle any claim in **your** name. **We**'ll have freedom to decide in the conduct of any legal action and the settlement of any claim.
5. **We** may take over proceedings in **your** name at **our** own expense. **We**'ll have freedom to decide to recover any loss, damage, or expenses.
6. **We** may need **you** to attend or participate in the defence of an action against **you**. If **we** do, **we**'ll pay **your** reasonable and necessary transport and housing costs. **We**'ll need to agree to this first and in writing.
7. **We**'ll only pay up to the limit of cover. Even if **you** have more than one dog insured under this **policy**.
8. **You** must make sure suitable third-party liability insurance is in place. This is for any business or professional handling **your** dog. This includes:
  - a dog walker
  - a pet minder or sitter
  - boarding kennels
  - a **vet**
  - a grooming parlour

**You** should let them know if **your** dog needs special care. This includes any behavioural issues or special handling so they can properly care for **your** dog.

## Section 4: Dental Illness (optional)

Excesses will be for each condition for each **policy year**.

Bill share will be for all claims.

This Dental Illness cover will only apply if **you**'ve paid for this extra cover. This will be shown on **your confirmation of cover** document.

The Dental Illness cover will pay for treatment up to the overall 'limit of cover' for **vet** fees.



## What is covered?

- **Vet** fees for the cost of treatment for a dental illness. **Your pet** must have a yearly check-up. Any advice from **your vet** at the check-up must be done within six months.
- Treatment if it is to relieve suffering due to illness.

## What isn't covered?

See the [vet fee section](#) for what is not covered and any additional conditions that will apply.

## Section 5: Missing pet (optional)

No excess or bill share will be taken off a claim.

This missing **pet** cover will only apply if **you**'ve paid for this extra cover. This will be shown on **your confirmation of cover** document and only applies if **your pet** is microchipped.

The microchip information held on record must be up to date.

### A. Loss, theft or straying

If **your pet** is lost, stolen or strays and isn't found within 30 days, **we'll pay you**:

1. **Your pet's** value, up to £5,000. The amount **you** paid for **your pet** is on **your confirmation of cover**.

### What we don't cover

1. Any claim if **your pet** goes missing before the **cover start date**. This includes **your pet** going missing within the [waiting period](#) unless **you** had previous insurance.
2. Anything in the ["What this policy doesn't cover"](#).

### Additional conditions applying to this section:

1. Within 24 hours of finding out that **your pet** is missing **you** must tell **your** local authority. If **you** believe **your pet** was stolen, call the police within 24 hours.
2. Within 48 hours of finding out that **your pet** is missing, **you** must notify:
  - **Your** microchip provider
  - **Your** local rescue and welfare centres
  - At least one **vet** practice in the area where **your pet** was last seen
3. If **you** paid for the Travel and Holiday cover and **your pet** goes missing abroad, **you'll** need to report it. **You** must report it to the local police. If **your pet** is lost on a ship, aircraft, train, or coach, **you'll** need a written report from the transport provider.

4. **You** must tell **us** as soon as possible in writing within 30 days after **your pet** goes missing.

To make a claim, **we**'ll need from **you**:

- Proof of what **you** paid for **your pet**. This can be a purchase receipt or a donation certificate if **you** got **your pet** from an animal charity.
  - If **you** claim for a pedigree **pet**, **we**'ll need any original recognised Breed Club registration and Pedigree documents.
5. If **you** don't have a purchase receipt or donation certificate, **we**'ll pay the estimated value of **your pet**. **We**'ll use the age, breed, pedigree, sex, and breeding ability of **your pet** at the time of the insurance event. **We** won't exceed **our** limit of cover.
  6. If **we** pay a claim under this section, **you**'ll need to ask **us** to cancel the **policy**. For **your pet** to stay covered while it is missing, **you** must continue to pay the **premium** and renew the **policy**.
  7. If **your pet** is later found alive, **you**'ll need to repay **us** the claim.

## **B. Advertising and reward.**

If **your pet** is lost, stolen or strays, **we**'ll repay **you** for the below costs for trying to find **your missing pet**. This is up to the limit of cover on the table of benefits in this booklet.

### **What we cover**

1. Up to £250 towards the cost of advertising materials and advertising on social media. This could be posters, flyers, leaflets and similar.
2. The reward **you** have offered and paid to recover **your missing pet**. **We**'ll pay the lowest amount of either:
  - a) twice the amount **you** paid for **your pet**
  - b) the limit of cover

### **What we don't cover**

1. Any claim:
  - a. Any claim if **your pet** goes missing before the **cover start date**. This includes **your pet** going missing within the waiting period unless **you** had previous insurance.
  - b. If **you**, or the person looking after **your pet**, freely parted with or abandoned it. Even if **you**, or the person looking after **your pet** was tricked into doing so.
  - c. Made more than 90 days after the date **your pet** went missing.
2. Payment of any reward:

- a. That **we**'ve not agreed to before **you** advertised it.
  - b. To **you**, **your** relative, member of **your** household, person **you** employ, or anyone **you** knew before **your pet** went missing.
  - c. To the person who stole **your pet**, or any person who worked with the person who stole **your pet**.
3. Any costs for the services of any person, company, body, or **pet** detective to search for **your pet**. This includes either on foot or with search dogs or equipment.
4. Anything mentioned in the **"What this policy doesn't cover"**.

#### **Additional conditions applying to this section:**

1. Within 24 hours of finding out that **your pet** is missing **you** must tell **your** local authority. If **you** believe **your pet** was stolen, call the police within 24 hours.
2. Within 48 hours of finding out that **your pet** is missing, **you** must notify:
  - **Your** microchip provider
  - **Your** local rescue and welfare centres
  - At least one **vet** practice in the area where **your pet** was last seen
3. If **you** paid for the Travel and Holiday cover and **your pet** goes missing abroad, **you**'ll need to report it. **You** must report it to the local Police. If **your pet** is lost on a ship, aircraft, train or coach, **you**'ll need a written report from the transport provider.
4. **Your pet** must have been missing for at least 48 hours before **you** can make a claim.
5. If **your pet** is found, and **you**'ve paid a reward to the person who found it, **you**'ll need to give **us** a signed receipt. This must show their full name, address, telephone number and email address. This will enable **you** to claim for the payment of a reward.
6. **You** must give **us** original receipts for all costs incurred.

## **Section 6: Farewell (optional)**

No excess or bill share will be taken off a claim.

This Farewell cover will only apply if **you**'ve paid for this extra cover. This will be shown on **your confirmation of cover** document.

## This section is in 2 parts:

A: Death from Accidental Injury or Illness

B: Cremation and Burial

### A. Death from Accidental Injury or Illness

If **your pet** dies or has to be put to sleep by a **vet** due to accidental injury or illness. **We'll** pay **you** the amount set out below if this happens.

This section of cover is only available if **your** dog is up to age 8 and **your** cat is up to age 10.

### What we cover

1. **Your pet's** value, up to £1,000 as set out on **your confirmation of cover**.

### What we don't cover

1. Farewell claims if **your** dog is aged 8 or over, or if **your** cat is aged 10 or over
2. Death from:
  - a. poisoning within the waiting period
  - b. Death from any pre-existing condition
  - c. Death from breeding, pregnancy or giving birth
  - d. Death due to problems from any preventative, routine or optional treatment or surgical intervention.
3. Euthanasia following:
  - a. Accidental injury or illness. Unless the **vet** confirms that it was not humane to keep **your pet** alive.
  - b. Euthanasia due to any act of any legal or law-making authority for any reason. Including any order made in respect of a reportable disease.
  - c. Euthanasia due to behavioural problems or for financial reasons.
4. Any claim under this section if **we've** already paid a claim under the "Missing pet - Loss, theft or straying". This must be linked to the same insurance event and **your pet** is later found to have died.

Anything mentioned in the **"What this policy doesn't cover"**.

### Additional conditions applying to this section:

1. The death must occur within 12 months of the accidental injury and renewed **your policy**.
2. **You** must tell **us** as soon as possible, but not later than 30 days after **your pet's** death.
3. To make a claim, these are the documents **we'll** need from **you**:
  - proof of what **you** paid for **your pet**. This can be a purchase receipt

- If **you** claim for a pedigree **pet**, **we**’ll need any original recognised breed club registration and pedigree documents.
4. If **you** don’t have a purchase receipt or donation certificate, **we**’ll pay the estimated value of **your pet**. **We**’ll use the age, breed, pedigree, sex, and breeding ability of **your pet** at the time of the insurance event. **We** won’t exceed **our** limit of cover.
  5. **You** must send **us** a **vet** certificate stating the cause of death at **your** own cost. If **we** need to arrange for a post-mortem exam, **we**’ll pay this cost.
  6. If **we** pay a claim under this section, **we**’ll automatically cancel **your pet** from the **policy**. If there are multiple **pets** on **your policy**, **we**’ll only cancel the deceased **pet’s policy**. **We**’ll cancel the **policy** entirely if there was only one **pet** on **your policy**. This will be the day after **you** told **us** of **your pet’s** death, or the date confirmed by **your vet**. **We**’ll use the earliest date.
  4. If **you** don’t have a purchase receipt or donation certificate, **we**’ll pay

## B. Cremation or burial

If **your pet** dies or must be put to sleep (euthanasia) by a **vet** due to accidental injury or illness. **We**’ll repay **your** costs, up to the limit of cover on the table of benefits in this booklet.

### What we cover

Up to £250 in total towards:

1. The costs of cremation or burial or having **your pet’s** body taken care of by the **vet**.
2. The cost of an urn, casket, or box.

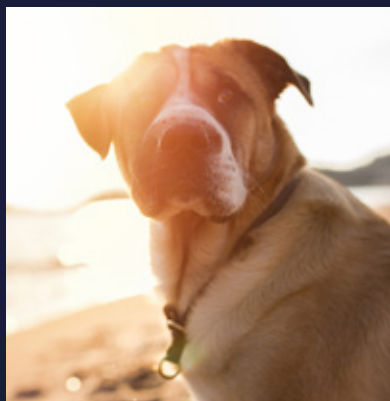
### What we don’t cover

1. If **your pet** dies due to accidental injury or illness not covered elsewhere under this **policy**.
2. Any future cemetery fees for maintenance of **your pet’s** grave or the cemetery in general.

### Additional conditions applying to this section

1. Original receipts for all expenses must be sent to **us**

# Access to Blue Cross for emotional support



Losing **your pet** can be a very painful experience, and many people feel they must struggle through it on their own.

The Pet Bereavement Support Service is available 365 days a year from 8.30am to 8.30pm. Their fully trained volunteers have also experienced pet loss and offer support in a safe, non-judgmental, and confidential space.

## Section 7: Travel and Holiday (optional)

To travel abroad with **your pet**, you might need a **pet** passport or health certificate. What **you** need will depend on which country **you're** going to. **You're** covered to travel between **Northern Ireland** and **Great Britain** at no extra cost. For the latest information please see [www.gov.uk/taking-your-pet-abroad](http://www.gov.uk/taking-your-pet-abroad).

Travel and Holiday cover will only apply if **you've** paid for this extra cover. This will be shown on **your confirmation of cover** and allows worldwide travel. Cover is provided for a maximum of 183 days abroad per **policy** year. Each trip must not be longer than 90 days and **you** must travel with **your pet**.

**We'll** pay up to the limit of cover shown on **your confirmation of cover** for:

### **This section is in 5 parts:**

- A: Vet fees abroad
- B: Emergency return home
- C: Cancellation or cutting short **your trip**
- D: Delayed return
- E: Quarantine expenses

### **A. Vet Fees Abroad**

Excesses will be for each condition for each **policy** year.

Bill share will be for all claims.

**We'll** cover treatment costs up to the **vet** fees limit of cover shown on **your**

**confirmation of cover.** This **vet** fee limit applies to all treatment in the **UK** or abroad.

**We'll** only handle claims if the condition or symptoms appeared after traveling.

**Our vet** fee section shows what **we** cover and don't cover. The additional conditions in **our vet** fee section also apply to this section.

## **B. Emergency return home**

Excesses will be taken off a claim.

No bill share will be taken off a claim.

This covers emergency return of **your pet** or their body following an injury, illness, or death of **your pet**.

### **What we cover**

1. Reasonable costs to bring **your pet** or their body home. A **vet** will need to certify that **your pet** is too ill to travel due to the injury or illness

### **What we don't cover**

1. Any costs or expenses that **you** would have had to pay.
2. The cost of an urn, casket, or box for **your pet's** body.
3. Anything in the **"What this policy doesn't cover"**.

#### **Additional conditions applying to this section:**

1. any extra travel and housing expenses must be agreed by **us** first.
2. **You** must provide **us** with written evidence and original receipts of these costs.

## **C. Cancellation or cutting short your trip**

Excesses will be for each person for each trip.

No bill share will be taken off a claim.

If **your** pet:

1. Is lost, stolen or strays; or
2. Dies or is put to sleep by a **vet** because of an injury or illness; or
3. Needs life-saving treatment due to an injury or illness. This should be within 7 days before **your** trip starts.
4. Needs to go home quickly due to an injury or illness abroad. This is due to the condition getting worse and must have happened after **you** left home.

### **What we cover**

1. **Your** reasonable additional travel and accommodation expenses which **you** pay in cutting short **your** trip and returning home.

2. The cost or part of the cost if **you** can't get a refund and **you've** already travelled if:
  - a. **Your** prebooked travel and accommodation which **you've** paid or must pay.
  - b. **Your** paid, pre-booked airport services and excursions.
  - c. **Your** visa or other relevant travel permission that **you've** paid.
  - d. **Your** pre-booked kennel and/or cattery fees that **you've** paid or must pay.

### What we don't cover

1. The cost of any treatment or poisoning within the waiting period.
2. Any claim for lost, stolen, or missing **pets** unless Missing **pet** cover is shown on **your confirmation of cover**.
3. Any claim for the death of **your pet** unless farewell cover is shown on **your confirmation of cover**.
3. Any claim if a **vet** confirms it is not urgent and lifesaving.
5. Any extra expenses because **you** didn't cancel **your** trip promptly.
6. Costs that can be recovered elsewhere. For example, a travel insurance **policy** or payment provider for **your** trip.
7. Any loss in respect of Air Passenger Duty. **You** can claim this through **your** travel agent or airline.
8. Timeshare or holiday property expenses.
9. Claims for promotional vouchers or reward points such as Air Miles or Avios points.
10. Non-family members travelling with **you**. Costs paid on behalf of other uninsured persons will be covered under this **policy**.
12. Anything in the "What this policy doesn't cover".

### Additional conditions applying to this section:

1. Let **your** tour operator or travel provider know quickly if **you** need to cancel **your** trip. **We** won't pay for any extra charges because of the delay.
2. Contact Claims as soon as **you** know if there is a chance that **your** trip won't go ahead or might be cut short.
3. Give **us** any written evidence and original documents needed to support **your** claim.  
This includes proof of the cancellation reason and costs.
4. For any **vet** fee claims, the **vet** treating **your pet** will need to fill out the **vet** certificate on the claim form.
5. **We**'ll not pay more than the limit of cover if **you** have more than one **pet**.



## D. Delayed return

Excesses will be taken off a claim.

No bill share will be taken off a claim.

When **you**'re delayed in returning home past **your** booked return date because of:

1. Accidental injury or illness of **your pet** making it unfit to travel home.
2. Loss, destroyed or theft of essential **pet** Travel Documents for **your pet** during **your** trip.
3. Failure of **your pet**'s microchip during **your** trip.
4. If there's a gap in **your pet**'s parasite/worming treatment because of a delay in **your** booked return travel. This must be outside of **your** control.
5. Loss, theft or straying of **your pet** abroad.
6. The death of **your pet** abroad.

## What we cover

1. Reasonable extra travel and room only expenses for **you** to extend **your** stay after **your** booked return date until:
  - a. **Your pet** is unfit to return home.
  - b. **You** receive necessary replacement **pet** travel documents.
  - c. **You** receive necessary new microchip approval for **your pet**.
  - d. **your pet** receives repeat their parasite/ worming Treatment certificate.
  - e. **You** recover **your pet**.
  - f. **You**'re able to arrange to bury or cremate **your pet** abroad or arrange the return of their body.
2. Reasonable extra costs of meeting the needs for **pet** travel documents so that **your pet** can return home.

## What we don't cover

2. Any costs or expenses that **you** would have had to pay.
3. Any claim unless a **vet** confirms that **your pet** is too ill to travel when **you** are due to go home.
4. Any costs or expenses incurred after **you** and **your pet** could have returned home, if **you** choose not to do so.
5. Any claim arising from:
  - a. A claim if **you** don't provide the **pet** travel documents that are needed. This is unless they're covered by this **policy**. The documents must be needed for the **UK** or foreign government regulations, transport providers, or other authorities.
  - b. Any **pet** travel documents lost, destroyed, or stolen before **you** left home.

- c. Microchip failure if **your pet's** microchip was not tested before **you** left home.
  - d. Seizure, detention, demand, damage, destruction, or any restrictive regulations by customs or any government officials or authorities of any country.
7. Anything in the **“What this policy doesn't cover”**.

### **Additional conditions applying to this section**

1. Any additional travel and housing expenses must be agreed by **us**. **We'll** only pay for available economy class travel. This includes housing to a similar standard as the original booking.
2. Without a valid return ticket, **we'll** subtract an amount equal to **your** original carrier's one-way charges. This will be the same class of ticket as **your** outward travel.
3. **You** must act as quickly as possible to return home as soon as **you** can.
4. Take care to protect **your pet** travel documents against loss or theft. Try to keep them locked away.
5. Report any loss or theft of **your pet** travel documents to local authorities or the transport provider. Do this quickly and get written confirmation.
6. **We'll** need written evidence of the reasons for **your** delayed return home. **We'll** need original receipts for any additional expenses.

### **E. Quarantine expenses**

Excesses will be taken off a claim.

No bill share will be taken off a claim.

This section covers the unexpected legal requirement to quarantine **your pet**, due to:

1. A new illness of **your pet**; or
2. The failure of **your pet's** microchip, or
3. The loss, destruction, or theft of **your pet's** travel documents.

### **What we cover**

1. The reasonable costs to quarantine **your pet**.

### **What we don't cover**

2. Any costs or expenses that **you** would have had to pay.
3. Any claim due to:
  - a. **Your pet** being ill before **you** left home

- b. If **you** don't give us any **pet** travel documents. These may be needed by **UK** regulation or a foreign Government. Transport providers, their agent or other authorities may also need **pet** travel documents.
  - c. Any **pet** travel documents lost, destroyed, or stolen before **you** left home.
  - d. Microchip failure if **your pet's** microchip wasn't tested before **you** left home.
  - e. Seizure, detention, demand, damage, destruction, or any restrictive regulations. These will be from customs or any government officials or authorities of any country.
4. Anything mentioned in the **"What this policy doesn't cover"**.

### **Additional conditions applying to this section**

1. Any additional travel and housing expenses must be approved by **us** first.
2. **You** need to give **us** written proof of the reasons for **your pet's** quarantine. **We'll** also need original receipts.

## **What this policy doesn't cover**

These apply to all this **policy**. Please note some sections of cover have specific things **we** don't cover.

**We** won't provide cover unless:

- a. **You** are a resident of the **United Kingdom** and **your pet** lives with **you**.
- b. **Your pet** is more than 4 weeks old.
- c. **Your pet** had a health check-up with a **vet**. This must be in the 12 months before the **policy** started.

**We** won't cover:

- a. claims if the event causing the claim and the losses happen outside the countries **we** cover.
- b. claims that are not directly linked to the event causing a claim. For example:
  - i. loss of earnings if **you** need to take time off work.
  - ii. cost of repairing or cleaning **your** furniture if it's damaged by **your pet**.
- c. claims if there is another insurance policy that will cover the claim. For example, travel or home insurance. **We'll** only pay **our** share of a valid claim.
- d. Treatment for an Illness that could be prevented with a vaccination. Unless **your vet** has told **you** not to due to **your pets'** health.

**We** won't pay for a loss or damage due to:

1. A pandemic, epidemic or any disease or virus passed from animals to humans or humans to animals.

2. A mistake, error or missing information given to **us** by:
  - a. **You** or **your** family; or
  - b. A **vet** or someone from a **vet** practice; or
  - c. A provider of **pet**-related services; or
  - d. Any provider of transport or accommodation. Including any agents or booking service that made **your** travel arrangements.
3. Excluded cats

A cat:

  - a. Used for commercial or work purposes or breeding.
  - b. A breed, or a **pet** that has been mixed with a breed **we** don't cover.  
**You** can find a full list of the breeds **We** don't cover at [www.petgeivity.co.uk/excluded-breeds](http://www.petgeivity.co.uk/excluded-breeds)
4. Excluded dogs

A dog:

  - a. That lives at a property that sells alcohol.
  - b. Used for security, racing, **your** job or for work.
  - c. That has attacked, bitten or been aggressive towards a person or animal. Plus any that have shown aggressive behaviour or any accident involving a third party
  - d. Used for hunting, pointing, field work or breeding. **We** allow trained assistance dogs to help **you** with any disability **you** have. **We** also allow therapy dogs that have been approved for charity or volunteer work.
  - e. A breed, or a **pet** that has been mixed with a breed **we** don't cover.  
**You** can find a full list of the breeds **we** don't cover at [www.petgeivity.co.uk/excluded-breeds](http://www.petgeivity.co.uk/excluded-breeds)
  - f. Or any breed banned by the government.
6. Breeding

Any **pet** that has had or is likely to have three or more litters or used for commercial breeding.
7. If **you** don't follow advice and treatment recommended by a **vet** to:
  - a. Have **your pet** vaccinated, or give preventative medication to **your pet** at the right time; or
  - b. Follow their advice or accept the treatment or take the prescribed medication they recommend.
8. An event or claim that **you** knew would happen.
9. Any pre-existing condition.
10. If **your vet** thinks **your pet** hasn't been looked after properly.
11. If **you** hurt **your pet** on purpose or neglect **your pet**; or

- a. **You** put **your pet** in danger; or
  - b. using any drugs, or treatment on **your pet** that **you vet** doesn't agree with or had prescribed.
12. Other things **we** don't cover. Any claims caused by:
- war, riots, or terrorism.
  - radioactive contamination or pollution
  - breaking the law.
  - a government, authority or court ordering **your pet** to be confiscated or destroyed.
  - **pets** to be vaccinated as part of a mass vaccination programme.

## Conditions applying to this policy

These conditions apply to all this **policy**. Some sections have extra conditions.

1. **We** may not pay **your** claim if **you** don't:
  - a. Look after and take care of **your pet**; and
  - b. Do or don't do something that may increase the cost of a claim.
  - c. Give **us** all details of any event that may lead to a claim. Please do this as soon as possible; and
  - d. Give **us** every form, documents, letter, or messages **you** get about a claim; and
  - e. Provide all information **we** may need at **your** own cost. This may include details of **your** home or travel insurance.
2. **You** mustn't admit blame, or offer to make any payments, until **we** agree in writing.
3. **You** may need to pay an extra **premium** before **we** can make changes to **your policy**.
4. **We** may apply special terms and conditions to **your policy**. These will show on **your confirmation of cover**.
5. **You** agree that **we** can:
  - a. Make **your policy** void where a claim is found to be fraudulent;
  - b. Share information with other insurers to stop fraudulent claims via a register of claims. **You** can ask to see a list of registered participants. This includes any claim information **you** supply. Any information **you** gave when **you** brought the **policy** and any other claims' information.
  - c. Take over and act in **your** name to defend or settle a claim made under **your policy**;
  - d. Pay to recover any payments made under **your policy**. This is to reduce **our** claims costs.

- e. Obtain information from **your vet** to deal with any claims. No personal information will be shared with any third party without **your** approval.
- 6. **We** won't pay **you** more than the amounts shown in the "table of benefits" or on **your confirmation of cover**.
- 7. **You** must continue to follow the advice and treatment recommended by **your vet**.
- 8. **We'll** treat the policy holder as the only legal owner of **your pet**. If **your pet** has more than one owner there won't be any extra cover or benefits under this **policy**.
- 9. **You** agree that **we'll** only have to pay a part of a claim where there is another insurance **policy** in place. For example, household or travel insurance. **You** must give **us** details of any other **policy you** have that might cover the same risk.
- 10. **We** won't pay **you** any damages for late claim payments.
- 11. No one else has any rights under this contract. No one else has any right to enforce any term of this **policy**. This is due to the Rights of Third Parties Act 1999. This does not affect any right or remedy of a third party that exists or is available from that Act.
- 12. **You** cannot transfer **your** interest in this **policy** to anyone else.
- 13. **We** won't provide any cover or be liable to provide any indemnity, payment or other benefit under this **policy**. This would be if this would expose **us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the EU, UK, US or other country of **policy** issue.

## Making changes to this policy

**We** don't have any fees to change or cancel this **policy**.

### Changes to your cover

**Your policy** is based on the information provided in **your confirmation of cover**. **You** must tell **us** as soon as possible if there are changes to **your** details or **your pet** details. When changes are made, **we'll** send **you** a new **confirmation of cover**.

Some changes may change the **premium**.

This will only be for the rest of the **policy year**.

If **we** change any **policy** terms, conditions, excess, or benefits, **we'll** let **you** know.

**You** can increase or lower **your** cover mid-term or at renewal. **You** can choose a different **vet** fee limit, excess, or bill share amount. Or **you** can add or remove optional covers.

### **If You lower the level of your cover.**

- claims for new and ongoing conditions will be on the new lower cover.
- Any optional covers which are removed won't apply anymore.

### **If you increase the level of your cover**

- A waiting period will apply to any increase in cover, or other optional extras added. This will start from the date of the change on the **policy**.
- Choosing a lower amount of excess is an increase in cover.
- Choosing a lower percentage of bill share is an increase in cover.
- **You** can only increase the **vet** fee limit or lower the amount of excess or bill share, if **you** haven't made a claim.
- The new limits won't apply to any condition that showed signs and/or symptoms or received treatment before the date **you** changed **your pet's** cover.

An additional **premium** may apply.

**Your** new **confirmation of cover** will show the changes **you've** made.

### **Renewing your annual policy**

**We'll** send **your** renewal invitation at least 21 days before **your** renewal date. This will include **your premium** for the next year. **Your policy** will automatically renew unless **you've** told **us** **you** don't want it to. **You** can cancel the automatic renewal at any time.

**We'll** highlight any changes to **your policy**.

**Premiums** will increase on a lifetime **policy**. These increases can be large. This is because as **your pet** gets older, they're more likely to become unwell.

**You** must let **us** know if **you** need to make any changes to **your policy**.

If **you** don't tell **us** now about any material changes, **you** may not be able to claim.

If **you** have chosen to auto-renew, **you** don't need to do anything. **We'll** automatically renew **your policy** using the payment details **we** have. Please contact **us** before **your** renewal date if **you** need to change **your** payment method.

**You** can make changes to **you** or **your pets'** details or **your** cover options in your online account.

**We** do have the right not to offer renewal of **your policy**. This will only be if **you** no longer meet the eligibility criteria. **We'll** write to **you** at least 21 days before **your** next renewal date explaining why.

## Cancelling your policy

### Within the 14-day cooling-off period

Please tell **us** as soon as possible if **your policy** doesn't meet **your** needs.

**You** can cancel **your policy** within 14 days. **You** can call **us** or write to tell **us**. This is from the date **you** receive **your** documents. If **you** haven't made a claim, **you**'ll receive a full refund.

### Outside of the 14-day cooling-off period

After the first 14-days, **you** can still cancel **your policy**. Just let **us** know.

If **you** haven't made a claim, or **your** claim has been declined, **we**'ll cancel **your policy** and:

- a. Stop any monthly instalments once any outstanding **premiums** have been paid.
- b. Refund any **premium** if **you** paid too much. **We**'ll only charge **you** for the cover **you** received.

**We** won't refund any **premium** if a claim is made on the **policy**. If the claim is due to the death, loss, theft, or straying, then **we**'ll only charge **you** for the cover **you** received. For other claims **you** will need to keep paying **your** monthly **premium**.

### Multi-pet

**We**'ll only cancel the cover for one **pet**. Even if **you** have a few **pets** insured on **your policy**. This includes cover options, **premium**, and claims that are being cancelled.

### If we cancel your policy

**We** may cancel **your policy** at any time.

**We**'ll write to **you** to let **you** know within 14 days.

### We may cancel your policy if:

- **You** miss a payment and **you** have not paid it after 3 weeks
- **We** stop offering this product
- **You** made a misrepresentation when **you** bought **your policy** or made a claim

If this happens:

- a. **We**'ll stop any monthly instalments once any outstanding **premiums** have been paid.
- b. Refund any **premium** if **you** paid too much. **We**'ll only charge **you** for the cover **you** received.

Once **your policy** has been cancelled, **your** cover will end. **You**'ll not be able to make a claim.



## How to make a Complaint

**We** try to always give the highest service standards. **We** know that mistakes sometimes can happen.

So, **we**'ve made it easy for **you** to tell **us** if **you**'re unhappy with **our** service. This helps **us** review and improve **our** processes.

### Sales and Service Complaints

If **your** complaint is about a quote, sale or amendment, **you** can:

- email [complaints@petgevity.co.uk](mailto:complaints@petgevity.co.uk)
- call on 0333 006 8033
- Or write to the  
Complaints Team,  
Petgevity,  
Britannia House,  
3-5 Rushmills Business Park,  
Bedford Road,  
Northampton  
NN4 7YB

### Claims Complaints

If **your** complaint is about a claim, **you** can:

- email [claims@petgevity.co.uk](mailto:claims@petgevity.co.uk)
- call on 0333 009 0998
- Or write to:  
Petgevity Claims,  
2nd Floor,  
5000 Lakeside North Harbour,  
Western Road,  
Portsmouth  
PO6 3EN

### Acknowledging your complaint

Please let **us** know about **your** complaint. **We**'ll tell **you** **we**'ve got **your** complaint within five working days. **We** might ask for more details about **your** complaint.

Please include **your** name and policy number. If it's about a claim also give **us** the claim number. **We**'ll try to resolve **your** complaint within 4 weeks by sending **you** a final response letter. If **we** can't do this, **we**'ll write to let **you** know how **we**'re getting on.

**We**'ll try to send **you** a final response letter within 8 weeks of getting **your** complaint. If **we** can't, **we**'ll write to explain why and give **you** a new timeframe.

## At this point you may refer your complaint to The Financial Ombudsman Service.

If **we** can't solve **your** problem, please contact:

The Financial Ombudsman Service Exchange Tower London, E14 9SR or email [complaint.info@financialombudsman.org.uk](mailto:complaint.info@financialombudsman.org.uk). If **you**'d prefer to call, the contact number is 0800 023 4567.

**You**'ll find full details of their impartial complaints' procedure on their website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

The Financial Ombudsman Service can only step in after **you**'ve completed **our** complaints process.

**You** can use both **our** process and complain to the Financial Ombudsman Service. This won't affect **your** right to take legal action against **us**.

## Information about your Insurer

### The Insurer

This **policy** is insured by Great Lakes Insurance UK Limited.

Great Lakes Insurance UK Limited is registered in England and Wales.

Their registered office is 1 Fen Court, London, **UK**, EC3M 5BN.

Their company number is 13436330.

Great Lakes Insurance UK Limited is approved by the Prudential Regulation Authority. It's regulated by both the Financial Conduct Authority and the Prudential Regulation Authority.

Firm Reference Number 955859. **You** can check this on the Financial Services Register by visiting; [register.fca.org.uk](http://register.fca.org.uk)

This **policy** is underwritten by **ERGO TIS**, registered in **England** and **Wales** under company number 11091555.

**ERGO TIS** is approved and regulated by the Financial Conduct Authority, registered under number 805870. They are located at 1 Fen Court, London, EC3M 5BN.

### How we protect your money (compensation scheme)

If **you** live in the **UK**, **you**'re protected by the FSCS. This is the Financial Services Compensation Scheme.

This scheme compensates **you** if a company goes out of business and they can't pay valid claims under its policies.

For more information, visit the Financial Services Compensation Scheme website ([www.fscs.org.uk](http://www.fscs.org.uk)) or contact them at Beaufort House, 15 St Botolph Street, London, EC3A 7QU, or call 0800 678 1100 or 020 7741 4100.

# Data protection notice

## Consent

**We** will only use **your** personal data when the law allows **us** to. Most commonly **we** will use **your** personal data under the following two circumstances:

1. When **you** gave explicit consent for **your** personal data to be collected and processed by **us** in accordance with this Data Protection Notice.
2. Where **we** need to perform the contract which **we** are about to enter into or have entered into with **you**.

## How We use Your Personal Data

**We** use **your** personal data for the purposes of providing **you** with insurance, handling claims and providing other services under **your policy** and any other related purposes (this may include underwriting decisions made via automated means). **We** also use **your** personal data to offer renewal of **your policy**, for research or statistical purposes and to provide **you** with information, products or services that **you** request from **us** or which **we** feel may interest **you**. **We** will also use **your** personal data to safeguard against fraud and money laundering and to meet **our** general legal or regulatory obligations.

ERGO Travel Insurance Services Ltd (ERGO TIS) and Petgevity collect and process **your** personal data as Data Controllers in line with the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR). Their purposes are detailed in their privacy policies available here:

[www.petgevity.co.uk/privacy-policy](http://www.petgevity.co.uk/privacy-policy)

[www.ergotravelinsurance.co.uk/privacy-policy](http://www.ergotravelinsurance.co.uk/privacy-policy)

Great Lakes Insurance UK Limited also acts as a Data Controller of **your** personal data. For more information about how Great Lakes Insurance UK Limited uses **your** personal data and to get its contact information, please go to:

[www.munichre.com/Great-Lakes-Insurance-UK-Information-Notice](http://www.munichre.com/Great-Lakes-Insurance-UK-Information-Notice)

## Special Categories of Personal Data

Some of the personal data **you** provide to **us** may be more sensitive in nature and is treated as a Special Category of personal data. The provision of such data is conditional for **us** to be able to provide insurance or manage a claim. Such data will only be used for the specific purposes as set out in this notice.

## Sharing Your Personal Data

**We** will keep any information **you** have provided to **us** confidential. However, **you** agree that **we** may share this information with **ERGO TIS** ((words with special meanings (definitions) we use) and other companies within the ERGO Group and with third parties who perform services on **our** behalf in administering **your policy**, handling claims and in

providing other services under **your policy**. Please see **our** Privacy Policy ([www.ergotravelinsurance.co.uk/privacy-statement/](http://www.ergotravelinsurance.co.uk/privacy-statement/)) for more details about how **we** will use **your** information.

**We** will also share **your** information if **we** are required to do so by law, if **we** are authorised to do so by **you**, or where **we** need to share this information to prevent fraud.

**We** may transfer **your** personal data outside of the European Economic Area (“EEA”). Where **we** transfer **your** personal data outside of the EEA, **we** will ensure that it is treated securely and in accordance with all applicable Data Protection legislation.

## **Your Rights**

**You** have the right to ask **us** not to process **your** personal data for marketing purposes, to see a copy of the personal information **we** hold about **you**, to have **your** personal data deleted (subject to certain exemptions), to have any inaccurate or misleading data corrected or deleted, to ask **us** to provide a copy of **your** personal data to any controller and to lodge a complaint with the local data protection authority.

The above rights apply whether **we** hold **your** personal data on paper or in electronic form.

**Your** personal data will not be kept for longer than is necessary. In most cases this will be for a period of seven years following the expiry of the insurance contract, or **our** business relationship with **you**, unless **we** are required to retain the data for a longer period due to business, legal or regulatory requirements.

## **Further Information**

Any queries relating to how Petgevity process **your** personal data or if **you** would like to request a copy of **your** Personal Data, get in touch by email or letter using the information below:

Data Protection Officer

**Petgevity**

Britannia House

3-5 Rushmills Business Park,

Bedford Road

Northampton

NN4 7YB

Email: [dataprotectionofficer@petgevity.co.uk](mailto:dataprotectionofficer@petgevity.co.uk)

Any enquiries in relation to data held by **ERGO TIS** should be directed to:

Data Protection Officer

**ERGO TIS**

Afon House

Worthing Road

Horsham

RH12 1TL

Email: [dataprotectionofficer@ergo-travel.co.uk](mailto:dataprotectionofficer@ergo-travel.co.uk)

Phone: **+44 (0) 1403 788 510**





# Petgeivity – Need to get in touch?

## Stay in control of your cover online

Access your online account 24/7 to update your policy, manage your claims and view your documents: [www.petgeivity.co.uk](http://www.petgeivity.co.uk)

## Customer Services Team

If you have a query or need to amend your pet(s) policy in any way

**Tel:** 0333 0063 211

**Email:** [info@petgeivity.co.uk](mailto:info@petgeivity.co.uk)

### Opening hours:

Monday to Friday: 08.30am – 6pm

Saturday and Bank Holidays: 9am – 5pm

Sundays: closed

## If you need to make a claim

### Petgeivity Claims

**Tel:** 0333 009 0998

**Email:** [claims@petgeivity.co.uk](mailto:claims@petgeivity.co.uk)

### Address:

Petgeivity Claims, 2nd Floor, 5000 Lakeside, North Harbour,  
Western Rd, Portsmouth, PO6 3EN

### Opening hours:

Monday to Friday: 8am – 6pm

Saturdays: 9am – 2pm

Sundays and Bank Holidays: closed

For information about “[Making a claim](#)” please see page 16

Petgeivity is a trading name of TICORP Limited. Petgeivity pet insurance is arranged by TICORP Limited which is registered in Gibraltar company number 111526. Registered Office: First Floor, Grand Ocean Plaza, Ocean Village, Gibraltar. TICORP Limited is authorised and regulated by the Gibraltar Financial Services Commission and trades into the UK on a freedom of services basis, FCA FRN 663617.

Petgeivity pet insurance is administered by Howserv Limited which is registered in England and Wales number 03882026. Registered office: Britannia House, 3-5 Rushmills Business Park, Bedford Road, Northampton, NN4 7YB. Howserv Limited is authorised and regulated by the Financial Conduct Authority FRN 599282.