

Immediate Veterinary Cover

Your insurance policy Terms and Conditions Effective from 18th October 2012

Written in Plain English

These Terms and Conditions are part of your insurance contract. The other parts are your Certificate of Insurance and your immediate veterinary cover note. To understand exactly what your insurance contract covers you must read your Certificate of Insurance, together with these Terms and Conditions.

Definitions

If we explain what a word means, that word has the same meaning wherever it appears in these Terms and Conditions.

Behaviour modification programme:	A programme written by a member of a veterinary practice or one of our approved behaviourists detailing specific techniques to be used and action to be taken with the aim of permanently changing your pet's behaviour.
Clinical sign(s):	A change(s) in your pet's normal healthy state, its bodily functions or behaviour.
Elective treatment, diagnostic or procedure:	Any treatment, diagnostic or procedure you request, which the vet confirms is not necessary.
Family:	Your husband, wife, civil partner, partner, parents, grandparents, brothers, sisters, sons, daughters, grandsons and granddaughters.
Illness:	Any change(s) to a normal healthy state, sickness, disease, defects and abnormalities including defects and abnormalities your pet was born with or were passed on by its parents.
Immediate family; Immediate veterinary cover note:	Your husband, wife, civil partner, partner, parents, sons and daughters. The Petplan form which is completed at the veterinary practice on the day of examination. This is signed by you and the vet or nominated person at the veterinary practice, and includes your details, your pet's details, the date of examination and background information.
Injury:	Physical damage or trauma caused immediately by an accident. Not any physical damage or trauma that happens over a period of time.
Market Value:	The price generally paid for an animal of the same age, breed, pedigree, sex and breeding ability at the time you took ownership of your pet . Any person legally employed by a veterinary practice under a contract of employment.
Member of a veterinary practice:	Any person legally employed by a veterinary practice under a contract of employment.
Period of cover:	Four weeks from the date of the vet's or nominated person's signature on the immediate veterinary cover note .
Physiotherapy:	Physiotherapy (not including hydrotherapy) carried out by a member of a veterinary practice or a qualified animal physiotherapist who is a member of one of the following organisations: <ul style="list-style-type: none">• Association of Chartered Physiotherapists in Animal Therapy (ACPAT)• Institute of Registered Veterinary and Animal Physiotherapist (IRVAP)• International Association of Animal Therapists (IAAT)• National Association of Veterinary Physiotherapists (NAVAP)
Pre-existing condition:	An injury or illness that: a) Happened or first showed clinical signs , b) Has the same diagnosis or clinical signs as an injury, illness or clinical sign your pet had, c) Is caused by, relates to or results from an injury, illness or clinical sign your pet had. Before the date of the vet's or nominated person's signature on the immediate veterinary cover note . No matter where the injury, illness or clinical signs are noticed or happen in, or on, your pet's body.
Therapist:	A Certified Clinical Animal Behaviourist (CCAB) or a member of one of the following organisations: <ul style="list-style-type: none">• Association of Chartered Physiotherapists in Animal Therapy (ACPAT)• Association of Pet Behaviour Counsellors (APBC)• Canine and Feline Behaviour Association (CFBA)• Institute of Registered and Animal Physiotherapists (IRVAP)• International Association of Animal Therapists (IAAT)• National Association of Veterinary Physiotherapists (NAVAP)
Treatment:	The cost of the following when required to treat injury and illness : a) Any examination, consultation, advice, test, x-ray, diagnostic procedure, surgery and nursing carried out by a vet , a veterinary nurse or another member of a veterinary practice under the supervision of a vet , and b) Any medication legally prescribed by a vet . The treatment of a change(s) to your pet's normal behaviour that is caused by a mental or emotional disorder which could not have been prevented by training and/or spaying/castration. Treatment must be carried out by a member of a veterinary practice , a Certified Clinical Animal Behaviourist (CCAB) or a member of one of the following organisations: <ul style="list-style-type: none">• Association of Pet Behaviour Counsellors (APBC)• Canine and Feline Behaviour Association (CFBA)
Treatment of a behavioural illness:	The United Kingdom, the Isle of Man and the Channel Islands. Registered Veterinary Surgeon. The amount vets in general or referral practices usually charge.
UK:	
Vet:	Registered Veterinary Surgeon.
Veterinary fees:	The amount vets in general or referral practices usually charge.

We, us, our:	Allianz Insurance plc.
You, your:	The owner of the pet whose details are shown on the immediate veterinary cover note .
Your pet:	The puppy, kitten or rabbit named on the immediate veterinary cover note .

General Conditions

- You** must keep to the General Conditions and Special Conditions to have the full protection of **your** policy. If **you** do not, and the condition **you** have not kept to relates to a claim, **we** may refuse the claim.
- Throughout the **period of cover** **you** must take all reasonable steps to maintain **your pet's** health and to prevent **injury, illness** or loss. If there is a disagreement between **you** and **us** as to what reasonable steps are, the details will be referred to an independent national welfare body or an independent **vet** mutually agreed upon.
- You** must arrange and pay for **your pet** to have any **treatment** normally recommended by a **vet** to prevent **injury** or **illness**. If **you** do not keep to this condition, any claims which relate to it will not be covered under the policy.
- You** must keep **your pet** vaccinated against the following:
Dogs - Distemper, hepatitis, leptospirosis and parvovirus.
Cats - Feline infectious enteritis, feline leukaemia and cat flu.
Rabbits - Myxomatosis and viral haemorrhagic disease.
If **you** do not keep **your pet** vaccinated, **we** will not pay any claims that result from any of the above illnesses.
- You** must arrange for a **vet** to examine and treat **your pet** as soon as possible after it shows **clinical signs** of an **injury** or an **illness**, and follow any advice they give. If **you** do not follow the **vet's** advice **we** will not pay any claims relating to that **injury** or **illness**.
- Your pet's** cover after this free period ends:
a) If **you** start a full policy for **your pet** before this four week cover ends, any **injury/illness** which is covered under this four week policy, will continue to be covered on **your** full policy.
b) If **you** do not start a full policy for **your pet** before this four week cover ends, once this four week cover ends all cover for **your pet** stops. This means that if **your pet** requires **treatment** for any **injury/illness** after this four week cover note ends, the costs will not be covered by this insurance regardless of whether the **injury/illness** occurred during this four week cover or not.
- We** will not guarantee on the phone if **we** will pay a claim. **You** must send **us** a claim form that has been fully completed and **we** will then write to **you** with our decision.
- When **you** claim **you** agree to give **us** any information **we** may reasonably ask for.
- We** will not make any payment for any claim that results from an incident which is 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.
- If **you** have any legal rights against another person in relation to **your** claim, **we** may take legal action against them in **your** name at our expense. **You** must give **us** all the help **you** can and provide any documents **we** ask for.
- You** agree that any **vet** or **therapist** has **your** permission to release any information **we** ask for about **your pet**. If the **vet** or **therapist** makes a charge for this, **you** must pay the charge.
- Any **injury** or **illness** which occurred before **your pet's** cover started is a **pre-existing condition** and something which will never be covered by **your** insurance.
- The Laws of England and Wales apply to this insurance contract.
- Unless **we** agree otherwise the language of the policy and all communications relating to it will be in English.
- You** and **your pet** must live in the **UK**.
- If **your** address, or the address of **your pet**, changes **you** must advise **us** as soon as possible as this may affect the insurance cover provided.
- This insurance cover cannot be transferred from the owner of the pet whose details are shown on the **immediate veterinary cover note**.
- Cancellation rights:
a) Whilst no statutory cancellation rights apply to this policy **you** can of course cancel the free cover at any time.
b) **We** may cancel **your** policy at any time if **you** have been dishonest or fraudulent in any dealings with **us** or **your vet** has advised that **you** have been negligent towards **your pet**. **We** will give **you** 7 days' notice in writing to the last address **you** have given **us**.
c) If **your** policy is cancelled or comes to an end for any reason all cover for **your pet** will stop from the date the policy is cancelled/ends and no further claims will be paid.

Cover

We will provide cover in the following sections while **your pet** is in the **UK**.
Section 1 - Veterinary Fees

What we will pay

The cost of **veterinary fees** for **treatment** **your pet** has received during the **period of cover** to treat **injury** and **illness**. When referred and endorsed by **your vet**, this section also covers the cost of **physiotherapy** to treat **injury** and **illness** and the **treatment** of a **behavioural illness**.

What you pay

You pay the below amount towards the cost of **treatment** for each **injury/illness** that is not related to any other **injury/illness** treated during the **period of cover**. This amount will be deducted from the first claim(s) for each **injury/illness**.

For dogs - £100 For cats - £85 For rabbits - £50

What we will not pay

- More than £4,000 for the combined **treatment** costs of all **illnesses** and **injuries** during the **period of cover**.
- The cost of any **treatment** for a **pre-existing condition**.
- The cost of any **treatment** to prevent **injury** or **illness**.
- The cost of any **elective treatment, diagnostic or procedure** or any **treatment** that **you** choose to have carried out that is not directly related to an **injury** or **illness**, including any complications that arise.
- The cost of killing and controlling fleas and the cost of general health improvers.

- The cost of any **treatment** in connection with breeding, pregnancy or giving birth.
- The cost of any food (including food prescribed by a **vet**) unless it is:
 - Used to dissolve existing bladder stones and crystals in urine, which is limited to a maximum of 40% of the cost of food. A diagnostic test must be carried out to confirm the presence of the stones/crystals.
 - Liquid food, used for up to 5 days while **your pet** is hospitalised at a veterinary practice, providing the **vet** confirms the use of the liquid food is essential to keep **your pet** alive.
- The cost of pheromone products, including DAP diffusers and Feliway, unless used as part of a structured **behaviour modification programme**.
- The cost of any vaccination, other than the cost of treating any complications that arise from this procedure.
- The cost of spaying or castration for the **treatment** of a **behavioural illness**.
- The cost of spaying (including spaying following a false pregnancy) or castration, unless:
 - The procedure is carried out when **your pet** is suffering from an **injury** or **illness** and is essential to treat the **injury** or **illness**, or
 - The costs claimed are for the treatment of any complications arising from this procedure.
- The cost of any treatment in connection with a retained testicle(s) if **your pet** was over the age of 12 weeks on the date of the **vet's** or nominated person's signature on the **immediate veterinary cover note**.
- The cost of trimming, burring or rasping rabbits' teeth.
- The cost of treating any **injury** or **illness** deliberately caused by **you** or anyone living with **you**.
- The costs of having **your pet**:
 - Put to sleep, including any veterinary consultation/visit or prescribed medication specifically needed to carry out the procedure, or
 - Cremated, buried or otherwise disposed of.
- The cost of any additional veterinary attention required because **you** are unable to administer medication due to **your pet's** behaviour or **your** personal circumstances.
- The cost of a house call unless the **vet** or **therapist** confirms that **your pet** is suffering from a serious **injury** or **illness** and that moving **your pet** would either endanger its life or significantly worsen the serious **injury/illness**.
- Extra costs for treating **your pet** outside usual surgery hours, unless the **vet** or **therapist** confirms an emergency consultation is essential, regardless of **your** personal circumstances.
- The cost of hospitalisation and any associated **treatment** unless the **vet** or **therapist** confirms **your pet** must be hospitalised for essential treatment, regardless of **your** personal circumstances.
- The cost of buying or hiring equipment or machinery or any form of housing, including cages.
- The cost of surgical items that can be used more than once.
- The cost of hydrotherapy, acupuncture, homeopathy, chiropractic manipulation, osteopathy or any other complementary or alternative treatment. This includes any **treatment** specifically needed to carry out the particular complementary or alternative treatment.
- The cost of grooming, de-matting or bathing **your pet**, other than bathing when a substance is being used which, according to manufacturers guidelines, can only be administered by a **member of a veterinary practice**.
- The cost of dental **treatment** unless **your pet** had a dental examination carried out by a **vet** in the 12 months before the **clinical signs** of the **injury** or **illness** were first noted.
- The cost of a post-mortem examination.
- The cost of transplant surgery, including any pre- and post-operative care.
- The cost of any prosthesis, including any **treatment** needed to fit the prosthesis.
- The cost of any **treatment** if a claim has not been submitted within 60 days of **your pet** receiving **treatment**.
- Any costs for treating any **injury** or **illness** after the last day of the **period of cover**.

Special Conditions - applying to Veterinary Fees

- If **we** agree for a claim settlement to be paid directly to **your vet** and **you** allow this, then if the **vet**, who has treated **your pet** or is about to treat **your pet**, asks for information about **your** insurance that relates to a claim, **we** will tell the **vet** what the insurance covers, what **we** will not pay for and how the amount **we** pay is calculated.
- If **we** receive a request to pay the claim settlement directly to a veterinary practice, **we** reserve the right to decline this request.
- We** may refer **your pet's** case history to a **vet** that **we** choose and if **we** request, **you** must arrange for **your pet** to be examined by this **vet**.
- If **you** decide to take **your pet** to a different **vet** for a second opinion because **you** are unhappy with the diagnosis or **treatment** provided, **you** must tell **us** before **you** arrange an appointment with the new **vet**. If **you** do not, **we** will not pay any costs relating to the second opinion. If **we** request, **you** must use a **vet** **we** choose. If **we** decide the diagnosis or **treatment** currently being provided is correct, **we** will not cover any costs relating to the second opinion.
- It is **your** responsibility to ensure the veterinary practice is paid within the required time frame:
 - If an additional charge is added to the cost of **treatment** due to the late payment of fees, **we** will deduct this charge from the claim settlement.
 - If the veterinary practice provides a discount for paying the cost of **treatment** within a certain time frame, **you** must provide payment within this time frame. If **you** do not, **we** will deduct the discount, which would have been provided, from the claim settlement.

Section 2 - Death from Injury and Section 3 - Death from Illness

What we will pay

The price **you** paid for **your pet** if it either dies or has to be put to sleep by a **vet** during the **period of cover** due to an **injury** or an **illness**. If **you** have no formal proof of how much **you** paid, **we** will pay the **market value** or the purchase price, whichever is less. If **you** did not pay for **your pet** **we** will pay the **market value**.

What we will not pay

1. More than £250.
2. Any amount if the death results from a **pre-existing condition**.
3. Any amount unless **your vet** confirms it was not humane to keep **your pet** alive because it was suffering from an **injury** that could not be treated or an **incurable illness**.
4. Any amount if the death results from breeding, pregnancy or giving birth.
5. Any amount if the claim has not been submitted within 60 days of **your pet's** death.

Section 4 - Advertising and Reward

What we will pay

If **your pet** is stolen or goes missing during the **period of cover**, **we** will pay:

1. The cost of advertising, and
2. The reward **you** have offered and paid to get **your pet** back.

What we will not pay

1. More than £250 for all incidents during the **period of cover**.
2. More than £125 towards the cost of a reward.
3. More than £25 towards sundries to make **your** own posters and advertising materials.
4. Any reward that **we** have not agreed before **you** advertised it.
5. Any reward not supported by a signed receipt giving the full name, address and telephone number of the person who found **your pet**.
6. Any reward paid to:
 - A member of **your family** or any person living with **you** or employed by **you**.
 - The person who was caring for **your pet** when it was lost or stolen.
 - The person who stole **your pet** or any person who is in collusion with the person who stole **your pet**.
7. Any amount if a claim has not been submitted within 60 days of **your pet** going missing.

Special Conditions - applying to Advertising and Reward

1. **You** must take the following steps:
 - a) As soon as **you** discover **your dog** is stolen/missing, or that **your cat** may have been stolen, **you** must tell the appropriate authority and obtain written confirmation of **your** report. Depending on where **you** live the appropriate authority may be **your** local authority or the police.
 - b) For all missing pets, within 5 days of discovering **your pet** is missing **you** must tell at least one veterinary practice in the area where he/she was last seen.
2. **You** must obtain **our** approval before advertising a reward; if not, the cost of a reward will not be covered by this insurance.
3. **You** must provide **us** with a receipt(s) for any amount which **you** are claiming for. Any costs not supported by a receipt will not be covered by this insurance.

Section 5 - Third Party Liability

(This section only applies to dogs)

In this section 'you' and 'your' mean **you** or any person looking after or handling **your pet** with **your** permission.

What we will pay

If property is damaged, or someone is killed, injured or falls ill as a result of an incident involving **your pet** during the **period of cover** and **you** are legally responsible, **we** will pay:

1. Compensation and claimant's costs and expenses, and
2. Legal costs and expenses for defending a claim against **you**.

What you pay

The first £250 of any compensation, costs and expenses where property has been damaged.

What we will not pay

1. More than £1 million for each incident. If **you** have more than one dog insured under this policy please refer to 'Special Conditions - applying to Third Party Liability' point 7.
2. Any costs and expenses for defending **you** which **we** have not agreed beforehand.
3. Any compensation, costs and expenses for an incident which involves **your** profession, occupation or business.
4. Any compensation, costs and expenses resulting from an incident which involves the profession, occupation or business of anyone who is employed by **you** or anyone who works for **you** in any way.
5. Any compensation, costs and expenses for an incident which takes place when **your pet** is in the care of a business or a professional and **you** are paying for their services. For example, but not limited to, when **your pet** is in the care of a dog minder, a dog sitter or at the grooming parlour.
6. Any compensation, costs and expenses if **you** are legally responsible only because of a contract **you** have entered into.
7. Any compensation, costs and expenses if the person who is killed, injured or falls ill lives with **you**, is a member of **your immediate family** or is employed by **you**.
8. Any compensation, costs and expenses if the property damaged is **your** responsibility or it belongs to **you**, any person who lives with **you**, a member of **your immediate family** or a person who is employed by **you**.
9. Any compensation, costs and expenses if **you**, a member of **your immediate family** or any person who lives with **you** or is employed by **you** is responsible for, or looking after, the property that is damaged.
10. Any compensation, costs or expenses that result from an incident if **you** have not followed instructions or advice given to **you** by the previous owners, the rehoming organisation or a qualified behaviourist about the behaviour of **your pet**.
11. Any compensation, costs and expenses if the incident happens in an area or place where dogs are specifically prohibited, unless **your pet** escapes and enters the area outside of **your** control.
12. Any compensation, costs and expenses if **you** are deemed responsible under the laws of any country, other than members of the European Union.
13. Any compensation, costs and expenses if **you** are responsible for air, water or soil pollution, unless it can be proven that the pollution took place immediately after and as a result of an accident involving **your pet**.
14. Any compensation, costs and expenses resulting from an incident that happens where **you** work.
15. Any compensation, costs and expenses if **your pet** is kept or lives on premises which sell alcohol, unless there is no access from the residential premises to the business premises.
16. Any compensation, costs and expenses if **your pet** has aggressive tendencies.

Special Conditions - applying to Third Party Liability

1. **You** must not admit responsibility, agree to pay any claim or negotiate with any person following an incident.
2. **You** must notify **us** immediately:
 - a) If an incident occurs which could lead to a claim under this section. **You** must notify **us** of an incident even if **you** don't believe that a claim is being made against **you** at this time.
 - b) Upon being advised of any prosecution, inquest or enquiry which could lead to a claim under this section.To notify an incident please call 01483 218 783 for incidents involving an injury to a person and 01483 218 782 for injury to another animal or damage to property. **We** are available Monday to Friday, 9am to 5pm, excluding Bank Holidays. Outside these times please contact **us** on 0845 071 8000.
3. **You** must immediately send **us** any writ, summons or legal documents **you** receive and **you** or any other person must not respond to any of these documents.
4. **You** agree to provide **us** with any information connected with the claim **we** reasonably ask for including details of **your pet's** history.
5. **You** agree to tell **us** or help **us** find out all the circumstances of an incident that results in a claim, provide written statements and go to court if needed.
6. **You** must allow **us** to take charge of **your** claim and allow **us** to prosecute in **your** name for **our** benefit.
7. If more than one of the dogs insured under this policy are involved in, or contribute towards, an incident **we** will pay no more than £1 million for the incident for all of the dogs.
8. If a business or a professional is being paid to care for **your pet** in any way (for example, but not limited to a dog minder, a dog walker or a groomer) it is **your** responsibility to:
 - a) Make sure the business/person has the appropriate third party liability insurance cover, and
 - b) Tell them if **your pet** has any behavioural problems or requires any special handling so they are able to handle **your pet** in an appropriate manner.

Section 6 - Boarding Fees

In this section 'you' means **you** or **your** husband, wife, civil partner or partner.

What we will pay

The cost of boarding **your pet** at a licensed boarding establishment or £5 a day towards the cost of someone looking after **your pet** while **you** are in hospital during the **period of cover**.

What we will not pay

1. More than £250 for all hospitalisation during the **period of cover**.
2. Any amount if **you** are in hospital for less than 4 consecutive days during each hospital stay.
3. Any amount if the person looking after **your pet** lives with **you** or is a member of **your family**.
4. Any costs resulting from **you** going into a hospital because of an injury or illness first occurring or showing symptoms before **your pet** was covered.
5. Any costs resulting from **you** being pregnant, giving birth or any treatment that is not related to an injury or illness.
6. Any costs resulting from **you** going into a hospital for the treatment of alcoholism, drug abuse, drug addiction, attempted suicide or a self-inflicted injury.
7. Any costs resulting from care in a nursing home or from convalescence care that **you** do not receive in a hospital.
8. Any costs if a claim has not been submitted within 60 days of the stay in hospital.

General Exclusions

The following exclusions apply to all sections of the policy:

1. Any pet that is less than 6 weeks old on the date of the **vet's** or nominated person's signature on the **immediate veterinary cover note**.
2. Any pet that is over the age of 1 year on the date of the **vet's** or nominated person's signature on the **immediate veterinary cover note**.
3. Any pet which has another Petplan insurance on the date of the **vet's** or nominated person's signature on the **immediate veterinary cover note**.
4. Any pet that is part of a litter awaiting sale.
5. Dogs used for security, guarding, track racing or coursing.
6. Any dog that is, or is crossed with, a Pit Bull Terrier, Dogo Argentino, Perro De Presa Canario, Dogo Canario, Japanese Tosa, Fila Brasileiro, Czechoslovakian WolfDog, Saarloos Wolfhound/Wolfdog or any wolf hybrid.
7. Any dog that must be registered under the Dangerous Dogs Act 1991, the Dangerous Dogs (Amendment) Act 1997 or any further amendments to this Act.
8. Any amount if **you** break the laws or regulations of England and Wales, including those relating to animal health and importation.
9. Any amount if **your pet** is confiscated or destroyed by government or public authorities or under the Animals Act 1971 United Kingdom because it was worrying livestock. This includes any further amendments to this Act.
10. Any costs caused because the Department for Environment, Food and Rural Affairs (DEFRA), has put restrictions on **your pet**.
11. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
12. Any loss as a result of an act of force or violence for political, religious or ideological reasons, war, riot, revolution or any similar event, including any chemical or biological terrorism.
13. Any amount caused by radiation, nuclear explosion, nuclear fallout or contamination by radioactivity.
14. Any amount resulting from a disease transmitted from animals to humans.
15. Any amount resulting from an **illness** that **your pet** contracted while outside the **UK** that it would not normally have contracted in the **UK**.

Claiming

Send **us** **your** completed claim form along with the supporting documentation detailed in this section. **Your** claim form must be fully completed by both **you**, and if applicable, **your vet**. **Your** insurance does not cover any charges made for the completion of claim forms or the cost of any supporting documentation.

Under Veterinary Fees claims must be sent to **us** no later than 60 days after the treatment start date. For Third Party Liability **you** must let **us** know of any incident that happens even if **you**

don't believe a claim will be made against **you** at this time. Details of what **you** need to do if an incident happens can be found in 'Special Conditions - applying to Third Party Liability - point 2.'

Veterinary Fees:

- Please send **us** the invoices from the veterinary practice or therapist which show what **you** are claiming for.
- The first claim submitted for **your pet** must include his/her full clinical history. This is a record of all visits **your pet** has made to a **vet** and can be obtained from each veterinary practice **your pet** has attended. **We** may also require this for claims for certain conditions but will let **you** know if this is needed once **we** have received **your** claim form.

Death from Injury or Death from Illness:

Please send **us** the death certificate from **your vet**.

Advertising and Reward:

- **You** must phone **us** on 0845 074 4406 for the approval of any reward before **you** advertise it.
- Please send **us** the invoices and receipts to show the costs involved, including a receipt for any reward paid.

Third Party Liability:

- **You** must let **us** know of any incident that happens even if **you** don't believe a claim will be made against **you** at this time. Call **us** on 01483 218 783 for incidents involving an **injury** to a person and 01483 218 782 for **injury** to another animal or damage to property (Monday to Friday, 9am to 5pm, excluding Bank Holidays, outside these times please contact **us** on 0845 071 8000).
- Please send **us** all correspondence, writs, summons or any other legal documents as soon as **you** receive them. **You** or any other person must not respond to any of these documents.

Boarding Fees:

- **Your** doctor/consultant and the owner of the boarding establishment (if one has been used) must complete the relevant section(s) of the claim form.
- Please send **us** the invoice from the boarding establishment or written confirmation from the person looking after **your pet**.

Fraud

Fraud increases **your** premium and the premiums of all policyholders. If **you**:

- Provide **us** with false information,
- Make a false or exaggerated claim with **us**, or
- Make any claim with **us** which involves **your** dishonesty,

We will not pay **your** claim and **we** may void **your** policy and inform the relevant authorities. If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount. 'Void **your** policy' means **we** will cancel **your** policy from the date the fraud occurred. If **we** take this action **you** must tell any other insurer that **we** have void **your** policy and failure to do this could invalidate any future insurance policy.

How we use your data

- Please be aware telephone calls may be recorded for **your** and **our** protection, and for monitoring and training purposes.
- **Your** details will be stored on **our** computer system to administer **your** policy but will not be kept longer than necessary.
- **You** have the right to request a copy of the personal data **we** hold about **you**. A small charge may apply.
- **We** can only discuss **your** personal details with **you**. If **you** would like anyone else to act on **your** behalf please let **us** know.
- Unless **you** advise otherwise, **we** may use **your** details to support the development of **our** business by including them in customer surveys. If **you** do not want this to happen please just let **us** know.
- **We** may share **your** details with other insurance companies, directly or through a number of databases. This allows **us** to check information **you** give **us** and also helps **us** prevent fraud.
- **Your** personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with The Laws of England and Wales.
- **We** may pass **your** information to **our** veterinary advisors and/or to loss adjusters outside the Allianz Group for the purpose of administering **your** claim and/or underwriting **your** policy.

Making a complaint

Our aim is to get it right, first time, every time. If **we** make a mistake **we** will try to put it right promptly. **We** will always confirm to **you** the receipt of **your** complaint within five working days and do **our** best to resolve the problem within four weeks. If **we** cannot, **we** will let **you** know when an answer may be expected. If **we** have not sorted out the situation within eight weeks **we** will provide **you** with information about the Financial Ombudsman Service. If **you** have a complaint please contact **our** Customer Satisfaction Manager at

Petplan, Great West House (GW2), Great West Road, Brentford, Middlesex TW8 9DX, United Kingdom.

Email petplan.csm@allianz.co.uk Phone 0845 026 1985

Using **our** complaints procedure or referral to the Financial Ombudsman Service does not affect **your** legal rights.

Financial Services Compensation Scheme

If **we** are unable to meet **our** liabilities **you** may be entitled to compensation under the Financial Services Compensation Scheme (FSCS). Further information about compensation scheme arrangements is available at www.fscs.org.uk, by emailing enquiries@fscs.org.uk or by phoning the FSCS on 0800 678 1100 or 0207 741 4100.

How to contact us

BY TELEPHONE 0845 071 8000 **BY EMAIL** info@petplan.co.uk
IN WRITING Petplan Customer Centre, Great West House (GW2), Great West Road, Brentford, Middlesex TW8 9DX, United Kingdom.

Petplan is a trading name of Pet Plan Limited who provide and administer the cover and Allianz Insurance plc who underwrite the cover. Pet Plan Limited (Registered in England No. 1282939) is a subsidiary of Allianz Insurance plc (Registered in England No. 84638). Registered office address: 57 Ladymead, Guildford, Surrey, GU1 1DB.

Pet Plan Limited is authorised and regulated by the Financial Conduct Authority. Financial Services Register No. 311969. Allianz Insurance plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Financial Services Register No. 121849.

Please contact us if you require a copy of these Terms and Conditions in large print or Braille