

InsureYour Paws.co.uk



Policy Document Accident Only



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Pet Insurance Policy Summary

This **policy** summary does not contain the full details of the limits, terms, conditions or exclusions of the insurance cover. Please refer to the **policy schedule** and **policy** wording for the full details of the insurance cover.

Type of Insurance

This Pet Insurance covers the cost of **veterinary** fees for **your pet** should it be injured as a result of an **accident** including any **illness** that is the result of an **accident**. Third party liability cover is for dogs only.

Name of Insurer

This insurance **policy** is underwritten by QIC Europe Limited.

Period of Cover

This is an annual insurance **policy** which will remain in force for 12 months from the start date of the **policy**. The **policy** must be renewed in order for the cover to continue.

Significant Features and Benefits

The below table details the significant features and benefits of the **policy** cover. Further information regarding these and other benefits can be found in the **policy** wording document.

Cover Level	Accident Only
Veterinary Fees	Please refer to Policy Schedule
Policy Type	12 Month ¹
Death from injury ²	£300
Third party liability cover (dogs only)	£1 million

- Vets** fee cover is provided for each specifically identifiable **injury** caused by an **accident** including any **illness** caused by the **accident** for up to 12 months subject to the renewal of the **policy** at each anniversary and premiums paid on time.
- Cover is provided for death from **injury** only and will end **when your pet** has reached 8 years and above in the case of dogs and 10 years of age and above in the case of cats.

Significant Exclusions and Limitations

Below is a list of the main significant exclusions and limitations of the **policy** cover. Further information regarding these and other exclusions and limitations relating to the **policy** can be found in the **policy** wording document.

- There is no cover for **pre-existing conditions** with this **policy**. This includes any **illnesses** which developed before or within the first 14 days of the **policy** start date. **Injuries** which occurred before or within the first 48 hours of the **policy** start date will not be covered. See 'Veterinary Fees – What is not covered', point 4.
- You** are responsible for paying the **policy** **excesses** as detailed in **your policy schedule**. This will include either a **fixed excess** or a **fixed excess** and **percentage**

excess. The **fixed excess** is payable per **condition**, per year and if applicable, the **percentage excess** is payable on all claimed amounts once the **fixed excess** has been deducted. See 'Definitions – Excess'.

- You** must report **your** claim to **us** within 60 days of the **condition** beginning. See 'Claims Conditions – General', point 1.
- Any costs relating to routine, preventative and elective **treatments**, including routine examinations, vaccinations, spaying, grooming and costs relating to breeding, pregnancy or giving birth. See 'Veterinary Fees – What is not covered', point 8.
- Dental **treatment** except as a result of an **accident**. See 'Veterinary Fees – What is not covered', point 9.
- Death from **injury** cover will stop when **your pet** reaches 8 years and above for dogs and 10 years and above for cats. See 'Death from Injury – What is not covered', point 2.

Cancellation

Within 14 days of the receipt of **your policy** documentation **you** can decide not to continue with the **policy** cover and **you** will be refunded any monies already paid providing no claims have been made. **You** can do so by contacting **us** and returning **your policy** documentation.

If after the initial 14 day period **you** wish to cancel **your policy** **we** will refund the premium for the unused **period of cover** so long as there have been no claims made.

Claiming

If **you** need to make a claim, please contact **us** on 0330 134 8115 with **your policy** number and **we** will be able to assist **you** with **your** claim.

Complaints

We are committed to providing **you** with the highest levels of service. If **you** feel that **we** have not met **your** expectations, please contact **us** first by emailing **us** at complaints@blueinsurance.co.uk or by calling **us** on 0344 273 2777.

If **we** are unable to resolve **your** complaint or **you** are unhappy with the service that **you** have received **you** may take **your** complaint to the Financial Ombudsman Service. Full details of our complaints procedure can be found in the **policy** wording document.

Financial Services Compensation Scheme (FSCS)

If **we** or the insurer are unable to meet obligations to **our** policyholders, **you** may be entitled to claim for compensation under the Financial Services Compensation Scheme (FSCS). Further information about the scheme is available from the FSCS website at www.fscs.org.uk or by contacting **us** on 0344 308 7359.

Please make sure that **you** read this **policy** fully to ensure the cover meets **your** needs.

Statement of Demands and Needs

This product meets the demands and needs of those who wish to ensure that the **veterinary** needs of their **pet** are met throughout the duration of the **policy**.

This **policy** wording is part of **your** insurance contract. The other parts are **your policy schedule** and the email confirmation.

Definitions

Words that have special meanings throughout this **policy** document are explained below and have the same meaning throughout this **policy**.

Accident: A sudden, unexpected and unintended event which happens during the **period of insurance**, which causes bodily **injury** or death to **your pet**.

Accident Only Cover: **Accident Only Cover** provides cover for **vet's** fees up to the limit shown on **your policy schedule** for each specifically identifiable **injury** caused by an **accident** including any **illness** caused by the **accident** for up to 12 months subject to the renewal of the **policy** at each anniversary and premiums paid on time.

Bilateral Disorder(s): Those that may affect body parts on both sides of the body, including but not limited to ears, eyes, elbows, shoulders, knees, hips and cruciate ligaments, are considered as one **condition**.

Cancellation Period: The first 14 days from the start of this **policy**.

Claims Administrator: All claims, with the exception of Third Party Liability claims will be handled by Sterling Client Services trading as Sterling Pet Solutions (50 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JX), registered in England and Wales No.09015536. Telephone 0330 134 8115.

Third Party Liability claims will be handled by Davies Managed Systems (DMS) P.O Box 2801, Telecom House, Trinity Street, Stoke on Trent, ST1 5ND. Telephone 0344 856 3838. Email claims@davies-group.com.

Clinical sign: Any changes in **your pet's** normal health, bodily functions or behaviour.

Complementary Medicine: Means acupuncture, behavioural therapy, chiropractic **treatment**, herbal medicine, homeopathy, hydrotherapy, physiotherapy and osteopathy recommended by **your vet**. All **complementary medicine** or **treatment** must be carried out by either a **vet**; a therapist who is a Certified Clinical Animal Behaviourist (CCAB); or registered members of the following associations and organisations:

- Association of Chartered Physiotherapists in Animal Therapy (ACPAT)

- Association of Pet Behaviour Counsellors (APBC)
- Canine and Feline Behaviour Association (CFBA)
- Canine Hydrotherapy Association (CHA)
- Institute of Registered Veterinary and Animal Physiotherapists (IRVAP)
- International Association of Animal Therapists (IAAT)
- International Vet Chiropractic Association (IVCA)
- McTimony Chiropractic Association
- National Association of Registered Canine Hydrotherapists (NARCH)
- National Association of Veterinary Physiotherapists (NAVPP)

Condition: Means any specifically identifiable **illness** or **injury** or any clinical signs of them. Recurring or on-going **conditions** shall be considered as one loss. These are defined as either:

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

Excess: Means the amount **you** are required to pay towards the cost of any **veterinary** fees, including **complementary medicine** and **prescription diet** as part of a claim made under the **policy**. The **excesses** applicable are shown on **your policy schedule** of insurance and will be deducted from the claims settlement. This will include either a **fixed excess** or a **fixed excess** and **percentage excess**:

- **Fixed excess** only. Means the amount **you** are required to pay as the first part of a claim(s) made under the **policy** and will be payable each **policy** year for each **illness** or **injury**.
- **Fixed excess** and **percentage excess**. The **fixed excess** will be deducted as described above. The **percentage excess** will be applied to all costs after the **fixed excess** has been applied. Please see an example of how to calculate the amount **you** will need to contribute in the event of a claim below.

Amount Claimed		£1,500
Less Fixed Excess	£80	£1,420
Less Percentage Excess	10% of £1,420 = £142	£1,278
Total Paid to You		£1,278
Total Paid by You	£80 + £142 = £222	

Immediate Family: **your** husband, wife, civil partner, life partner, parents, son, daughter living with **you**.

Illness: Disease, sickness or any changes to **your pet's** normal healthy state or behaviour not caused by **injury**, and defects and abnormalities (including those **your pet** was born with or were passed on by its parents),

Illness in the First 14 Days: Any **illness** that:

- First showed clinical signs; or,
- is caused by, relates to, or results from, an **illness** or clinical sign **your pet** had; or,

- has the same diagnosis or clinical signs as an **illness** or clinical sign **your pet** had; in the first 14 days after the start of **your policy**; no matter where the **illness** or clinical signs appear, are noticed or happen in, or on, **your pet's** body. Please also refer to **your policy schedule** of insurance for details of any endorsements that apply to **your policy**.

Injury: Physical damage or trauma to **your pet** that is caused by an **accident**.

Injury in the First 48 Hours: Any **injury** that:

- happened or first showed clinical signs; or,
- is caused by, relates to, or results from, an **injury** or clinical sign **your pet** had; or,
- has the same diagnosis or clinical signs as an **injury** or clinical sign **your pet** had; in the first 48 hours after the start of **your policy**; no matter where the **injury** or clinical signs appear, are noticed or happen in, or on, **your pet's** body. Please also refer to **your policy schedule** of insurance for details of any endorsements that apply to **your policy**.

Market Value: This is the price of an animal of the same age, breed, pedigree and sex at the time **you** purchased **your pet**.

Period of Insurance: Means the time for which **we** provide cover as set out in the **policy schedule** and for which **we** have accepted **your** premium. This is normally 12 months but may be less if **your policy** is cancelled. Each renewal is the start of a new **period of insurance**.

Pet: The dog or cat specified in the **policy schedule** of insurance.

PETS Travel Scheme (PETS): The Pet Travel Scheme (PETS) is the Government system people in the **UK** use to take their **pets** to certain countries and bring them back without the need for quarantine. (Excluding non EU listed countries as defined by DEFRA.)

Policy: Means **your policy** wording and most recent **policy schedule** of insurance.

Policy Schedule: The document issued to **you** by **us** which contains the details about **you**, **your pet** and the **policy** limits and **excesses** that apply to the cover that **you** have purchased.

Pre-existing Condition:

Any **illness** or **injury** that:

- happened or first showed clinical signs; or,
- has the same diagnosis or clinical signs as an **injury**, **illness** or clinical sign **your pet** had; or,
- is caused by, relates to, or results from, an **injury**, **illness** or clinical sign **your pet** had; before the start date of **your policy** or within the first 48 hours for **injuries** and 14 days for **illnesses**, of the start date of **your policy**; no matter where the **illness** or clinical signs appear, are noticed or happen in, or on, **your pet's** body. Please also refer to **your policy schedule** of insurance for details of any endorsements that apply to **your policy**.

Prescription Diet: A scientifically formulated **pet** food prescribed by a **vet** to assist with the **treatment** of a specific **illness** or **injury**.

Terrorism: Means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

Treatment: This must be provided by a **veterinary** practice and includes any consultations, examinations and advice; diagnostic tests, X-rays; surgical procedures; drugs and medication prescribed; nursing; and hospitalisation provided by, or under the direction of a **vet**.

Unattended: This means any occasion when **your pet** is left alone or where **you** are not in a position to control its behaviour.

UK: The United Kingdom, including England, Northern Ireland, Scotland, Wales, excluding the Channel Islands and the Isle of Man

Vet/Veterinary:

- a) For **treatment** received in the United Kingdom this must be a fully qualified **veterinary** practitioner who works in **veterinary** practice and is currently registered with the Royal College of Veterinary Surgeons, or a member of the **veterinary** practice when acting under the direction of the fully qualified **veterinary** practitioner.
- b) For **treatment** received outside the United Kingdom this must be a fully qualified **veterinary** practitioner registered in the country that the **treatment** was received in and covered by the Pet Travel Scheme (PETS).

We/Us/Our: ALL sections of this **policy** are Underwritten under facility reference B0142A162653 granted by the Insurer to Cranbrook Underwriting Ltd, (registered number 04286691, registered office 1 Minster Court, Mincing Lane, London EC3R 7AA), which is an appointed representative of Chesterfield Insurance Brokers Ltd. (registered number 03013489, registered office 1 Minster Court, Mincing Lane, London EC3R 7AA), which is authorised and regulated by the Financial Conduct Authority. The Insurer is QIC Europe Limited, (registered office: The Hedge Business Centre, Triq ir-Rampa ta San Giljan, St. Julian's STJ1062, Malta), which is authorised by the Financial Conduct Authority and authorised and regulated by the Malta Financial Services Authority (No. C67694).

You/Your/Yourself: The person named in the **policy schedule** and the owner and carer of **your pet**.

General Conditions

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

You, Your Policy and Renewal

- **You** must be a resident of the United Kingdom, the owner and keeper of the **pet** and the **pet** must be kept in the United Kingdom at the address **you** have provided.
- **You** must be over 18 years of age at the start of the **policy**.
- **Your policy** is governed by English Law.
- If there are any significant changes to **your policy** e.g. change of address, change of name, etc., **you** need to notify **us** immediately. Failure to do so may result in a delay of processing a claim. If this change affects **your** yearly premium, **we** will recalculate the premium from the date of notification.
- At the renewal of **your policy** **we** may change the amount of **your** premium, **fixed excess** or **percentage excess**; and/or make changes to the **policy** wording or cover offered.

At the end of the **period of insurance**, **your policy** will be automatically renewed, unless **you** have informed **us** that **you** do not want **your policy** to continue. **We** will advise **you** within a reasonable time prior to renewal that **your policy** will automatically renew and inform **you** of any changes to the **policy** or premium.

Your Pet

- **You** must keep **your pet** vaccinated against distemper, hepatitis, leptospirosis and parvovirus in the case of dogs; or against feline infectious enteritis, feline influenza and feline leukaemia in the case of cats; or as advised by **your vet**. All vaccinations must be administered under **veterinary** supervision. **We** do not accept homeopathic nosodes as vaccinations. If **your pet** is not vaccinated, **you** accept that any **illness** that **your pet** is normally protected against by such vaccinations/boosters will not be covered by this insurance **policy**.
- **You** must look after **your pet** and maintain **your pet's** health to avoid any **illness** or **injury** and death. In addition **you** must arrange and pay for **your pet** to have a yearly health check, which will include a dental examination and vaccinations.
- **You** must also arrange for any **treatment** recommended by **your vet** to be completed immediately to prevent or reduce the risk of **illness** or **injury**. If **you** do not look after **your pet** **we** may at **our** option cancel the **policy** or refuse to deal with **your** claim or reduce the amount of any claim payment.
- Under The Control of Dogs Order 1992, any dog in a public place must wear a collar with the name and address of the owner engraved or written on it, or engraved on a tag. **Your** telephone number is optional but advisable.

General Exclusions

- We** will not pay for claims arising directly or indirectly from:
- Any **pet** not named in the **schedule**.
 - Any **pet** less than 8 weeks or more than 8 years of age for dogs; or less than 8 weeks or more than 10 years of age for cats, at the start date of **your policy**. (Not applicable for renewed policies).
 - Any Incident outside the territorial limits of the United Kingdom, Northern Ireland, Isle of Man, Channel

Islands and the Member Countries of the **PETS Travel Scheme** (non EU listed countries as defined by DEFRA are excluded).

- War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, **terrorism**, insurrection or military or usurped power.
- Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel.
- The radioactive, toxic, explosive or other hazardous properties of any nuclear assembly or nuclear component of such assembly.
- Intentional slaughter, by order from any Government, Local Authority or any person having jurisdiction in the matter, except in the case of humane destruction to alleviate incurable and inhumane suffering.
- Any dog registered under The Dangerous Dogs Act 1991 and The Dangerous Dogs (Northern Ireland) order 1991 or Dangerous Dogs (amendment) Act 1997 or any subsequent amendments or a dog crossed with any of these. In addition any dog that is an American Pit Bull Terrier; Perro de Presa Canario; wolf or wolf hybrid; or a dog crossed with any of these.
- Any **pet** which has aggressive tendencies or has been trained to attack or begins to have these tendencies during the **policy period of insurance**.
- Malicious or wilful **injury** or gross negligence to the insured **pet** caused by **you**, **your** agents, employees or members of **your** family.
- Medication not being recommended by a **vet**.
- Post mortem examination.
- Any **pre-existing illness** or **injury**; **illness** within the first 14 days or **injury** within the first 48 hours. (Not applicable for renewed policies).
- The use of **your pet** for commercial security purposes, or for any form of racing, coursing or commercial breeding.
- Infringement of United Kingdom animal health and importation legislation.

Claims Conditions

General

Failure to comply with the claims conditions below may result in **us** being unable to assist with **your** claim.

- In the event of a possible claim under any section of this insurance **you** must notify **us** as soon as possible and not later than 60 days after any incident that would possibly give rise to a claim. The Claims Help Line details are as shown on **your policy schedule** (Please note that telephone calls may be monitored or recorded to assist with staff training and for quality control purpose).
- No claims will be agreed on the telephone. A Claim Form must be fully completed and supported by all relevant and original documents and sent to **us** for consideration. Incomplete claims may be returned to **you**.
- Following a claim **we** shall be entitled to take over and exercise any rights in **your** name against any other party for **our** own benefit and at **our** own expense to recover any payment **we** have made under this **policy**.
- If any liability under this **policy** is also covered by another

insurance **policy**, **we** will not pay more than **our** share of the cost of the claim's rateable proportion. At the time of **your** claim **you** must inform **us** of the name of the other insurance company and provide the **policy** number.

- If a claim is paid in error **you** agree to return any monies paid to **you** back to **us**.
- All claims documentation must be in English and any translation costs must be paid by **you**.

Claims for Veterinary Fees

- **We** will not accept any claims for **treatment** that has not been prescribed and accompanied with a Claim Form signed by **your vet**. **Your vet** must complete a Claim Form for all medicines prescribed including any imported medicines.
- If **you** are claiming for a medicine that **you** have purchased on the Internet, a Claim Form must be completed and the receipt and a copy of **your vet's** prescription must be sent to **us**.
- By accepting the **policy** terms **you** are giving **us** permission to obtain information relevant to **your** claim from **your vet**; any previous **vet**; specialist or third party that **we** request. If **you** are charged for this **you** will be responsible for covering the cost.
- **You** are responsible for ensuring **vets/specialists** are paid within their required time frame. If an additional charge is added to **your** bill for late payment (or a credit charge is added to **your** bill) **we** will not pay this charge.
- If **you** are a **vet** **you** may treat **your own pet** but another **vet** must countersign the Claim Form confirming the **treatment** has been provided. The same applies if **you** are a **veterinary** nurse or an employee of a **veterinary** practice; **you** cannot complete **your** own Claim Form.
- If **you** are not happy with the **treatment** **you** are getting from **your vet** and wish to go to another **vet** for a second opinion **you** must tell **us** before **you** arrange the appointment. **We** will only agree to a second opinion if **we** believe that it is in **your pet's** interest to do so based on medical grounds.
- If **you** belong to any form of **pet** health scheme with **your vet** that includes a discount or get any other form of discount this must be shown on the invoice and the discount passed onto **us**.
- In the event of any disagreement between **your vet** and **us**, an independent **vet** mutually agreed upon by both sides will be appointed and act as arbiter and whose decision will be binding on both sides.
- If the fees **you** are charged are higher than fees usually charged by a general or referral **veterinary** practice, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If that **vet** chooses not to agree with the fees charged **we** may decline **your** claim or pay only the fees charged by a **vet** in a similar area.

Your Cover

Section 1: Veterinary Fees

What is covered?

Accident Only Cover is provided for up to the limit shown on

your policy schedule for each specifically identifiable **injury** caused by an **accident** including any **illness** caused by the **accident** for up to 12 months subject to the renewal of the **policy** at each anniversary and premiums paid on time.

Cover under this section includes the following, which form part of the overall limit per each specifically identifiable **injury** for **veterinary** fees and are subject to the same **fixed excess** and **percentage excess** (if applicable):

- Fees for **complementary medicine**, which the **vet** recommends up to the limit shown on **your policy schedule**. This includes cover for up to 10 sessions per **injury** for hydrotherapy. This also includes the cost of pheromone products for a maximum of six months from the start of the recommended **treatment** of a behavioural problem.
- **Treatment** for cruciate ligament disorders up to the limit on **your policy schedule**. Please refer to **your policy** definitions for the definition of **bilateral disorders**.
- Dental **treatment** as a direct result of an **accident** up to the limit as shown on **your policy schedule**.
- CT/MRI scans and associated costs up to the limit as shown on **your policy schedule**.
- **Prescription diet** food required to dissolve urinary crystals is covered up to the limits shown on **your policy schedule**.
- The cost of euthanasia in the case of humane destruction to alleviate incurable and inhumane suffering up to the limit shown on **your policy schedule**.

What is not covered?

- The **fixed excess** as shown on **your policy schedule**.
- The **percentage excess** (if applicable) as shown on **your policy schedule**.
- The **fixed excess** and **percentage excess** are applied to each specifically identifiable **injury** claimed for.
- Any **pre-existing illness** or **injury**; **illness** within the first 14 days or **injury** within the first 48 hours. (This exclusion is not applicable for renewed policies).
- Any **illnesses** not caused by an **injury** **your pet** suffered as a result of an **accident**.
- Costs that exceed the limits shown on **your policy schedule**.
- Any **treatment** costs incurred after the **policy** has expired.
- Any costs arising from preventative and elective **treatments** including any complications or secondary procedures arising from but not limited to the following:
 - Routine examinations, vaccinations;
 - Spaying, spaying to prevent the recurrence of false pregnancy and mammary tumours, castration, castration for the removal of retained testes;
 - Claw clipping, de-matting and grooming, dew claw removal;
 - Routine anal gland expression, ear plucking;
 - Killing and controlling fleas and worms;
 - Routine blood and urine tests (including those performed routinely prior to general anaesthesia or sedation);
 - Breeding, pregnancy or giving birth.

- Dental **treatment** except as a result of an **accident**.
- Fees for **complementary medicine** not listed, including but not limited to the following:
 - Matrix energy field therapy;
 - Pulsed magnetic field therapy;
 - Shock wave therapy;
 - Myotherapy (including Galen therapy);
 - The Bowen technique;
 - Reiki massage;
 - Faith healing.
- Any **complementary medicine** not carried out by either a **vet**, a member of a **veterinary practice** or a registered qualified person affiliated with one of the **complementary medicine** organisations as shown in the **policy** definitions.
- The cost of behavioural therapy unless the behavioural problem is caused as a direct result of an insured **condition** occurring during the **period of insurance**.
- The cost of training classes, and normal puppy training and socialisation.
- The cost of **your pet's** daily feeding requirements, or any claim for **prescription diet** food unless **your vet** has specifically prescribed a **prescription diet** food to dissolve urinary crystals.
- Any extra costs for **your vet** treating **your pet** outside of normal working hours unless **your vet** confirms in writing that the emergency consultation was essential to **your pet's** health, regardless of **your** personal circumstances.
- The cost of non-essential hospitalisation.
- House calls, regardless of **your** personal circumstances, unless **your vet** confirms in writing that moving **your pet** would endanger its life.
- Ambulance/taxi fees unless **your pet** is on a nasal/IV drip and is being transferred between a referral practice/emergency **vet** and **your** normal **vet**, and **we** will only pay for a maximum of one journey.
- Claims arising from **illnesses** or complications arising from **illnesses** that would not have occurred had **your pet** been vaccinated.
- Organ transplant and prosthetic limbs.
- Any charges in respect of euthanasia except in the case of humane destruction to alleviate incurable and inhumane suffering.
- Any charges for the disposal, cremation or burial of **your pet**.
- The cost of hiring or buying machinery or equipment, including but not limited to: cages; carts; Elizabethan collars, Buster collars, inflatable collars; surgical T-shirts; slings; harnesses, and sharps containers.
- Surgical items that can be used more than once.
- Any cost for a **vet** to complete a claim form; postage and packaging; courier fees or other administration work. The cost of blood bank donations.
- The cost of **your vet's** travel expenses.
- A claim for the cost of any form of housing, or bedding needed for the **treatment** or general well-being of **your pet**.
- Any claim as a result of a 'notifiable' disease, e.g. Rabies, Avian influenza.

How to claim:

- Upon commencement of **treatment** you should contact **us** on the Claims Help Line as shown on **your policy schedule** and report the possible claim not later than 60 days after any incident.
- **You** will then be sent a Claim Form for completion by **you** and **your vet**. Once **treatment** has been completed the Claim Form should be returned along with all supporting documents as requested on the Claim Form. If **your pet** requires on-going **treatment**, continuation claims can be submitted at regular intervals; please ask **us** for a 'Continuation Claim Form'.
- For convenience, **your** settlement can be made directly to the **vet** (with their agreement) after deduction of the **fixed excess** and **percentage excess** (if applicable).
- **We** have the right to request further information either directly from **your vet**, from **your** previous **vet(s)** or from **you** to confirm the validity of the claim at **your** expense.
- Please refer to the claims conditions on page 6.

Section 2: Death from Injury

(Cover applies in the UK only)

What is covered?

In the event **your pet** dies from **injury** or due to humane destruction following an **injury**, **we** will pay the purchase price **you** paid up to the limit as shown on **your policy schedule**. If **you** cannot locate **your** purchase receipt or obtain a copy, **we** will pay the **market value** at the time of **your pets** purchase up to the limit as shown on **your policy schedule**.

What is not covered?

- Any amount if the death of **your pet** results from a **pre-existing accident, illness** or **injury, illness** within the first 14 days or **injury** within the first 48 hours. (This exclusion is not applicable to renewed policies).
- Any amount if the death of **your pet** results from **injury** where **your pet** has reached 8 years of age and above in the case of dogs, and 10 years of age and above in the case of cats.
- Any amount if the death of **your pet** results from an **illness** not developed as a result of an **accident**.
- Any amount if **your pet** was put to sleep (euthanasia) as a result of breeding, pregnancy, giving birth or aggression.
- Any amount if **your pet** was put to sleep (euthanasia) except in the case of humane destruction to alleviate incurable and inhumane suffering.

How to claim:

- **You** must notify **us** as soon as possible and not later than 60 days after **your pet's** death. The Claims Help Line details are as shown on **your policy schedule**.
- **You** must obtain a death certificate from **your vet** at **your** own expense stating the date and cause of death.
- **You** must provide the purchase receipt from when **you** bought **your pet** and if **your pet** is a pedigree, the original pedigree certificate.
- In the event that **your pet** is put to sleep (euthanasia) **you** must obtain a **veterinary** certificate stating that this was necessary for humane reasons to terminate incurable suffering.
- Please refer to the claims conditions on page 6.

Section 3: Third Party Liability Cover

(Cover applies to dogs only)

What is covered?

We will pay up to the limit as shown on **your policy schedule** if **you** become legally liable to pay a compensation for accidental bodily **injury** (fatal or non-fatal) or accidental damage to property not owned by **you** or in the custody or control of **you** caused by **your** dog whilst in the **UK** (as defined on page 5). **We** will pay up to limit shown on **your policy schedule**, which includes costs and expenses agreed by **us** in writing for any one claim or series of claims arising from anyone event or source or original cause.

What is not covered?

The **Third Party Excess**, which is per incident and detailed in **your policy schedule**. The **excess** applies to Incidents that occur within the **UK** and excludes any incident outside of the **UK**.

- Any claims arising prior to or within the first 14 days of the start date of **policy** (This exclusion is not applicable to renewed policies).
- Any agreement which imposes a liability on **you** which **you** would not be under in the absence of such an agreement.
- Deliberate acts by **you** or members of **your immediate family**.
- Loss or damage to property in the ownership, custody or control of **you** or members of **your immediate family** or household or any person employed by members of **your** household.
- Accidental bodily **injury** to or disease contracted by **you** or a member of **your immediate family** or persons permanently residing with **you**.
- Any compensation, costs or expenses which arise from an incident which occurs whilst **your pet** is at **your** place of business or employment.
- Any compensation, costs or expenses which arise from an incident which occurs when **your pet** is in the care of a business or person **you** are paying, such as a groomer, dog walker or **pet minder**.
- Accidental bodily **injury** or disease contracted by any person who is under a contract of service or apprenticeship with **you** when such **injury** or disease arises out of and in the course of employment by **you**.
- Any compensation, costs or expenses if **you** are insured under any other Liability **policy** including **your** household insurance unless that cover has been exhausted. At the time of **your** claim **you** must inform **us** of the name of the other insurance company and provide the **policy** number.
- Any claim arising from loss or destruction of, or damage to, any property, or death of or bodily **injury** to any person, directly or indirectly caused by pollution or contamination, unless the pollution or contamination is directly caused by a sudden, identifiable, unintended and unexpected incident, which occurs in its entirety at a specific time and place during the **period of insurance**. All pollution or contamination which arises out of one incident shall be deemed to have occurred at the time such incident takes place.
- Any claim resulting from an incident outside the **UK**.

How to claim:

- **You** should immediately contact the Claims Helpline as shown on **your policy schedule** and advise **us** of any possible claim. **You** will then be given instructions on what to do with any letter, claim, writ or summons.
- **You** shall not admit or accept liability, negotiate or make any payment or promise of payment without **our** written consent.
- **You** are required to provide **us** with all the information that **we** may reasonably require.
- **We** will have the sole conduct and control of any claim and legal proceeding relating thereto including the right to prosecute in the name of the insured but for **our** benefit for any claim, damages or liability.

Cancellation

Statutory Cancellation Rights

You may cancel this **policy** within 14 days from the start of this **policy** (New **policy**) or from the renewal date by emailing or calling **us**, please refer to **your policy schedule** for details, during the **cancellation period**.

Cancellation by **You**

You may cancel this **policy** at any time by emailing or calling **us** with the details shown on **your policy schedule** during the **period of insurance** **you** have been on cover.

c) If **you** had no claims and paid **your** premium in full **we** will retain an amount of premium in monthly proportion to the time **you** have been on cover and return the balance to **you**.

d) If **you** had no claims and **you** are paying **your** premium monthly **we** will not take any further monthly payments and **your** cover will end after the last day covered by **your** previous payment.

FOR EXAMPLE:

- **Your** premium is collected on 1st January.
- **You** send a cancellation request on 20th January.
- **Your** cover would continue until the 30th January, when **your** cover would end and no further premiums would be taken.

If another premium is taken e.g. **you** notify **us** of intent to cancel in the **period of insurance** but **we** cannot stop a further Direct Debit being taken, **we** will refund this premium.

e) However if **you** have incurred eligible claims (except any eligible claims where **your pet** has died or is lost or stolen) **we** will not be able to return **your** premium if **you** have paid in full, or **you** will either have to continue with the instalment payments until the **policy** renewal date or **we** may, at **our** discretion, deduct the outstanding instalments due from any claim payment made.

Cancellation by **Us**

We reserve the right to cancel this **policy** immediately on 7 days written notice if there are serious grounds to do so:

a) In the event of non-payment of the premium or default if **you** are paying monthly. Cover will end from the start of **your policy** if no payment was made or **your** cover will

- end after the last day covered by **your** previous payment. (Please refer to the example above).
- b) If **you** have been neglectful or failed to provide care for **your pet**.
- c) If **you** have been fraudulent or dishonest at any time or **you** have used threatening or abusive language to **our** staff.

Territorial Limits

Your pet is covered whilst in the **UK** (as defined on page 5). In accordance with the European Economic Community regulations this insurance also extends to cover **your pet** under the **PETS Travel Scheme** whilst temporarily located in any member country of the **PETS Travel Scheme** (Excluding non EU listed countries as defined by DEFRA), but only for a maximum stay of the period mentioned in **your policy schedule**.

Fraud

You must not act in a fraudulent manner. If **you** or anyone acting for **you** make a claim under the **policy** knowing the claim to be false or fraudulently exaggerated in any respect or make a statement in support of a claim knowing the statement to be false in any respect or submit a document in support of a claim knowing the document to be forged or false in any respect or make a claim in respect of any loss or damage caused by **your** wilful act or with **your** involvement.

Then:

- **We** shall not pay the claim.
- **We** shall not pay any other claim, which has been or will be made under the **policy**.
- **We** may at **our** discretion declare the **policy** void.
- **We** shall be entitled to recover from **you** the amount of any claim already paid under the **policy** since the last renewal date.
- **We** shall not make any return of the premium.
- **We** have the right to inform the police and other appropriate authorities or share this information with the Insurance Fraud Investigators Group (IFIG) or other Fraud authorities.

In order to prevent fraud, **we** may share **your** information with credit reference agencies and other insurance companies either directly or through anti-fraud databases which they may have access to.

Law Applicable

English law applies to this insurance contract.

Complaints Procedure

We are committed to giving **you** a first class service at all times and will make every effort to meet the high standards **we** have set. If **you** feel **we** have not attained the standard of service **you** would expect or **you** are dissatisfied in any other way, then this is the procedure that **you** should follow:

Initiating your complaint

You should contact **us** at Insure Your Paws by emailing complaints@blueinsurance.co.uk, by calling **us** on 0377 273 2777 or in writing to: Insure Your Paws, 1 Neptune Court, Vanguard Way, Cardiff, CF24 5PJ.

If **your** complaint is about a claim please contact Sterling Pet Solutions by calling 0330 134 8112 or writing to: 50 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JX.

If **your** complaint is about a third party liability claim please call Davies Managed Systems (DMS) on 0344 856 3808 or by writing to: P.O Box 2801, Telecom House, Trinity Street, Stoke on Trent, ST1 5ND.

We will confirm receipt of **your** complaint by telephone or email by the next working day, and do **our** best to resolve the problem within 3 working days from the date **we** receive **your** complaint.

If **we** are unable to resolve **your** complaint within 3 working days, **we** will send **you** a communication, either verbally, by email or in the post (depending on the method of communication **you** prefer) explaining why **we** have been unable to resolve **your** complaint, and the steps **we** intend to take to resolve the issue as rapidly as possible.

We aim to conclude **our** enquiries and provide a Final Response Letter to **you** within 8 weeks from the date **your** complaint was received. **We** will keep **you** regularly informed of **our** progress towards resolving **your** complaint, and may need to contact **you** during this time to request or verify information relating to **your** complaint.

Financial Ombudsman Service (FOS)

If the differences between **us** remain unresolved, or **you** have not received a Final Response Letter from **us** within 8 weeks from the date **your** complaint was received, **you** may refer **your** complaint to the FOS. **You** can ask the FOS to review **your** complaint if for any reason **you** are still dissatisfied with **our** Final Response, or if a Final Response Letter has not been issued within 8 weeks from the date of **your** complaint.

Details for contacting the FOS are:

The Financial Ombudsman Service
Exchange Tower
Harbour Exchange Square
London E14 9SR
Tel: 0800 023 4567 from a landline or 0300 123 9123 from a mobile
Email: complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk
If **you** purchased **your policy** online, **you** can submit a complaint through the EC On-line Dispute Resolution (ODR) platform at <http://ec.europa.eu/consumers/odr/> who will notify the Financial Ombudsman Service on **your** behalf.

Please note that **you** have six months from the date **you** receive our Final Response Letter in which to refer **your** complaint to the FOS. The FOS is an independent body that arbitrates on complaints about general insurance products.

The FOS will only consider complaints after **we** have issued a Final Response, or if a Final Response Letter has not been issued to **you** within 8 weeks from the date of **your** complaint. Following this procedure will not affect **your** legal rights.

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

Financial Ombudsman Service UK - Eligible Complainant
You can use the FOS as a recourse in the event of dissatisfaction if **you** are:

- A private individual acting outside **your** trade, business or profession
- "Micro-enterprises", i.e. smaller business that have a turnover or annual balance sheet of not more than EUR 2m and fewer than 10 people employed
- A charity with less than GBP 1m annual income
- A trustee of a trust with net asset value of less than GBP 1m

Insure Your Paws Vet Helpline

The Insure Your Paws Vet Helpline, gives policyholders access to our national network of RCVS (Royal College of Veterinary Surgeons) registered veterinary nurses, 24 hours a day, 365 days a year.

Our nurses are available, any time to answer any concerns **you** may have regarding **your pet's** health or general wellbeing.

We can help offer peace of mind and help with what to do next when **your pet** is unwell. Although our service is not intended to replace a consultation with **your vet**, by calling **us** first, **we** may be able to help prevent an unnecessary trip to the **vet**, which can be time consuming and traumatic for **your pet**.

Tel: 0333 332 7926

How to Contact Us

Customer Service and Renewals:

Tel: 0344 273 2777

Claims:

Tel: 0330 134 8115

Insure Your Paws Vet Helpline:

Tel: 0333 332 7926

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