

Pet Insurance for Cats & Dogs

Your Policy Terms & Conditions Certificate No: B1019 MA 000136

In return for having accepted your premium The Underwriters will, in the event of injury, illness or loss happening to Your Pet within the Period of Insurance, provide insurance as described in this Certificate and Schedule.

The information you have supplied forms part of the contract of insurance with The Underwriters. This Certificate and Schedule are evidence of that contract.

K. Drewe Insurance Brokers Ltd is authorised by The Underwriters to issue approved schedules of insurance on their behalf providing insurance in the terms below.

Please read these documents carefully and keep them in a safe place.

If, after reading these documents, you have any questions please contact K. Drewe Insurance Brokers Ltd.

Definitions

In this Policy certain words are defined and whenever they are used will have the meaning shown below:-

The Administrators, We, Us, Our	K. Drewe Insurance Brokers Ltd, The Post House, 14 Load Street, Bewdley, Worcs DY12 2AE.
The Underwriters, They, Them, Their	Certain Underwriters at Lloyd's
The Insured, You, Your	The person or persons named as The Insured in the Schedule
Certificate	This Certificate of Insurance numbered B1019 MA 000136 setting out your policy terms and conditions
Schedule	The corresponding Schedule, which includes any Endorsement that applies, to this Certificate in Your name as The Insured and giving the details of Your Pet
Period of Insurance	The Period of Insurance as described in the Schedule and for which The Underwriters have accepted the premium
Your Pet	The cat or dog named in the Schedule
Excess	The amount You are required to pay as the first part of certain claims made under the Certificate. In the event of a claim being made under more than one Section of the Certificate for the same incident You are only responsible for one Excess
Treatment	Any examination, consultation, advice, tests, x-rays, medication, surgery, nursing and care provided by a veterinary practice or a member of a professional organisation acting under their direction
Complementary Treatment	Physiotherapy, acupuncture, osteopathy, hydrotherapy and chiropractic that results from a valid claim under this insurance
Maximum Benefit	The most The Underwriters will pay out under each section of this insurance
Pre-existing Medical Condition	Any condition or complication directly resulting from that condition, that has been identified or investigated by a vet or is otherwise known to You prior to the start of this insurance
Condition	All Clinical Signs of injury, illness or disease
Clinical Signs	Changes in Your Pet's normal healthy state, its bodily functions or behaviour
Illness	Sickness or disease, or change in Your Pet's normal healthy state
Market Value	The price generally paid for a similar pet based on its age, breed and pedigree at the time You took ownership
Journey	A Journey is a trip or any period of time up to a maximum of thirty days spent by You with Your Pet when travelling within the European Union
Pet Travel Scheme (PETS)	A system that allows people in the United Kingdom to take their pets to certain countries and bring them back again without the need for quarantine

General Conditions

- To the best of **Your** knowledge and belief at the start of this insurance **Your Pet** is in good health and free from any injury or physical disability unless this has been disclosed by **You** and accepted by **The Underwriters**.
 - It is obligatory that **Your Pet** has received an annual vaccination against the following – Dogs: distemper, hepatitis, leptospirosis, parvovirus. Cats: feline infectious enteritis, feline leukaemia and cat flu. If **You** do not keep **Your Pet** vaccinated **The Underwriters** will not pay any claims that result from any **Illness** that it should have been vaccinated against.
 - During the **Period of Insurance** **You** must take care of **Your Pet** which includes arranging and paying for any **Treatment** normally recommended by **Your** vet to prevent or reduce the risk of **Illness** or injury.
 - You** must be the owner of the pet. **Your** cover will cease immediately if **Your Pet** is sold or given away.
 - If **You** have any legal rights against any other party in respect of **Your** claim, **The Underwriters** will be entitled to take legal action against them in **Your** name at **Their** expense. **You** must assist **Them** by providing any documents that **They** might reasonably request.
 - You** must not act in a fraudulent manner. If **You** or anyone acting for **You**:
 - make a claim under the **Certificate** 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** willful act or with **Your** connivance
- Then
- The Underwriters** will not pay the claim
 - The Underwriters** will not pay any other claim which has been or will be made under the **Certificate**
 - The Underwriters** may at **Their** option declare the **Certificate** void
 - The Underwriters** will be entitled to recover from **You** the amount of any claim already paid under the **Certificate** since the last renewal date
 - The Underwriters** will not make any return of premium
 - The Underwriters** may inform the police of the circumstances
- You** agree that any vet that has treated **Your Pet** has **Your** permission to release any information that **The Underwriters** might reasonably request concerning **Your** insurance. Any charge for the release of this information will be **Your** responsibility.
 - When **The Underwriters** offer a further **Period of Insurance** **They** will be entitled to change the premiums, **Excess**, conditions or to apply exclusions due to the claims history of **Your Pet**.
 - You** must send **The Underwriters** a completed claim form. If all or part of **Your** claim cannot be paid **They** will tell **You** in writing.
 - If **You** have received a microchip discount on **Your** first year's premium, **You** confirm that the microchip fitted to **Your** Pet meets ISO Standard 11784 or ISO Standard 11785, and that it has been checked and found to be functioning properly in the 12 months prior to the inception of **Your** Policy.

Details of Your Cover

The **Underwriters** will provide **You** with the following cover in the United Kingdom, Isle of Man or Channel Islands provided that **You** have paid the correct premium and that no restrictions are shown on **Your Schedule**.

The following table shows the **Maximum Benefit** up to which **You** will be able to claim:

COVER	MAXIMUM BENEFIT
Section 1 - Veterinary fees	£4,000
- Complementary Treatment	£250
Section 2 - Third party liability (dogs only)	£2,000,000
Section 3 - Emergency boarding kennels or cattery fees	£500
Section 4 - Advertising & reward costs	£500 (Reward limit £200)
Section 5 - Theft or straying	£500
Section 6 - Accidental death	£500
Section 7 - Holiday cancellation	£500
Section 8 - Optional Overseas Travel Cover	
- Quarantine Costs	£1,500
- Emergency Repatriation Costs	£500
- Loss of Passport	£250

Section 1 – Veterinary Fees

What The Underwriters will pay

All reasonable and customary costs for **Treatment** of **Your Pet** by a vet or **Complementary Treatment** carried out under the direction of **Your** vet up to the **Maximum Benefit** for each accident or **Illness**.

What **You** must pay for in respect of each accident or **Illness**.

The amount shown in the table below:

	Rest of UK Area 1	Home Counties Area 2	London Area 3	Additional excess applicable for all claims
Pedigree Dog/Select Breed	£100	£125	£125	Plus 15% of the remainder of the cost of Treatment
Crossbreed Dog	£85	£100	£100	
Pedigree Cat	£85	£100	£100	
Domestic Cat	£85	£100	£100	

What The Underwriters will not pay

- More than the **Maximum Benefit** for each accident or **Illness**.
- Costs resulting from a **Pre-existing Medical Condition**.
- Costs resulting from any **Illness** first occurring or showing **Clinical Signs** within the first 14 days of the start of cover for **Your Pet**.
- The cost of **Treatment** **Your** vet recommends to prevent an **Illness** or **Condition**.
- The cost of dentistry that is not related to an **Illness** or injury.
- The cost of killing or controlling fleas, general health enhancers and unconventional or unlicensed **Treatment**.
- Training, behavioural or sex hormonal problems unless directly resulting from a valid claim.
- Obesity diets. Prescription diets after the first 4 weeks of a specific **Illness** or **Condition**.
- Costs resulting from vaccinations, spaying, castration, pregnancy or giving birth.
- Complementary Treatment** that is not carried out under the direction of a vet.
- Cost of house calls unless the vet confirms that moving **Your Pet** would damage its health.
- Extra costs of treating **Your Pet** outside normal surgery hours unless the vet considers an emergency consultation is necessary.
- Costs that result from an **Illness** or **Condition** specifically excluded on the **Schedule**.
- Continuation claims unless **You** have paid the premiums to keep the insurance in force.
- The cost of having **Your Pet** cremated, buried or otherwise disposed of.

How to make a claim

You should receive a claim form with **Your** documentation. If not please phone **The Underwriters** claims helpline on 0845 279 7249.

Before **Your Pet** is treated check that **Your** vet is willing to complete the claim form and supply **The Underwriters** with the supporting invoices.

The claim form and invoices must be returned to **The Underwriters** promptly. Failure to notify **Them** promptly may result in a reduced settlement being paid. Please make sure that the form is signed by both **You** and **Your** vet and that it is indicated to whom **The Underwriters** should make the payment.

If **You** ask **The Underwriters** to pay **Your** vet **You** must settle with him the part of the claim for which **You** are responsible. If **You** are unsure of the amount please call the claims helpline.

If **Your** claim involves **Complementary Treatment** the claim form and invoices must be countersigned by **Your** vet.

Section 2 - Third Party Liability

This section applies to dogs only

For the purposes of this section the definition of "**You**" and "**Your**" is extended to include any person looking after **Your** dog with **Your** permission.

What The Underwriters will pay

If someone is injured or killed or their property is damaged as a result of an incident involving **Your** dog during the **Period of Insurance** **The Underwriters** will pay:

- Compensation and costs awarded against **You** by a court in the United Kingdom under United Kingdom jurisdiction (up to the **Maximum Benefit**).
- With **The Underwriters** written agreement additional legal costs and expenses incurred in defending the claim made against **You** (up to the **Maximum Benefit**).

What You pay

The first £250 of any claim.

What The Underwriters will not pay

- Any compensation, costs or expenses if **You** are insured under any other liability policy including **Your** household insurance, unless that cover has been exhausted.
- More than the **Maximum Benefit** per incident.
- Any compensation, costs or expenses which arise only because **You** have entered into a contract which makes **You** legally liable for such compensation, costs or expenses.
- Any compensation, costs or expenses that arise due to a deliberate act by **You**, a member of **Your** family or anyone permanently living with **You**.
- Any compensation, costs or expenses in respect of property which is damaged that either belongs to **You** or any person who lives with **You** or whom **You** employ.
- Any compensation, costs or expenses if the person injured or killed lives with **You** or is employed by **You**.
- Any costs or expenses involved in defending **You** against a claim that **The Underwriters** have not agreed to beforehand in writing.
- Any compensation, costs or expenses for which **You** are deemed responsible under the laws of Canada or the United States of America.

How to Claim

Following an incident **You** must never admit responsibility or attempt to negotiate a settlement.

You should immediately call the claims helpline to give **The Underwriters** full details. **You** must always send **The Underwriters** immediately and without answering the originals of any documents **You** receive including writs, summons and other legal documents.

You must help **The Underwriters** in dealing with **Your** claim by giving any information that **They** might request.

You must allow **Them** to take over the claim in **Your** name to prosecute other parties for **Their** benefit.

Section 3 - Emergency Boarding Kennel and Cattery Fees

What The Underwriters will pay

The cost up to £100 per week and up to £500 in total of boarding **Your Pet** at a licensed premises if **You**, or anyone normally living with **You**, need to go into hospital for emergency medical treatment during the **Period of Insurance**.

What The Underwriters will not pay

1. More than the **Maximum Benefit** for any one cause per **Period of Insurance**.
2. Any hospitalisation that is either known or foreseeable before cover for **Your Pet** started.

How to Claim

Please send **The Underwriters** details from **Your** doctor or the hospital that confirms the dates and length of **Your** visit (**The Underwriters** will pay for them to provide), and receipts from the kennels or cattery showing the dates and daily cost of boarding.

Section 4 - Advertising and Reward Costs

What The Underwriters will pay

The cost of local advertising if **Your Pet** is lost or stolen during the **Period of Insurance**.

The cost of a suitable reward up to a limit of £200 to recover **Your Pet** if it is lost or stolen during the **Period of Insurance**.

What The Underwriters will not pay

1. More than the **Maximum Benefit** payable per **Period of Insurance**.
2. Any reward to a person living with **You**.

How to Claim

Please send **The Underwriters** full details of the circumstances including copies and a receipt for any advertisements that **You** have placed.

If **You** are claiming for the recovery of a reward **The Underwriters** will also need a receipt giving **Them** the full name and address of the person who found **Your Pet**.

Section 5 - Theft or Straying

What The Underwriters will pay

The purchase price of **Your Pet** if it is stolen or goes missing during the **Period of Insurance**.

If **You** did not pay for **Your Pet** or cannot provide evidence of the purchase price **The Underwriters** will pay the **Market Value** instead.

What The Underwriters will not pay

1. More than the **Maximum Benefit**.
2. Any amount until **Your Pet** has been missing for 90 days.
3. Any amount if a claim has not been submitted within 6 months of **Your Pet** going missing.

How to Claim

If **You** have lost a dog **You** must report this to the police within 24 hours of becoming aware that the dog is missing. In the case of cats **You** must make enquiries with local rescue centres.

Please call the claims helpline to advise **The Underwriters** of the loss and obtain a claim form.

Please send **Them** any pedigree certificate and receipt for the original purchase of **Your Pet**.

If **Your Pet** is eventually found or returns **You** must repay the full amount that **The Underwriters** have paid under this section of **Your Certificate**.

Section 6 - Accidental Death

What The Underwriters will pay

The purchase price of **Your Pet** if it dies or has to be put to sleep by a vet following an accident during the **Period of Insurance**.

If **You** did not pay for **Your Pet** or cannot provide evidence of the purchase price **The Underwriters** will pay the **Market Value** instead.

What The Underwriters will not pay

1. More than the **Maximum Benefit**.
2. Death caused by an **Illness**.
3. Any amount after 6 months from the date of the loss.

How to Claim

Please send **The Underwriters** a death certificate from **Your** vet (**They** do not pay for this) or if not available a statement from an independent witness, together with any pedigree certificate and receipt for the original purchase of **Your Pet**.

Section 7 - Holiday Cancellation

What The Underwriters will pay

Any travel and accommodation expenses that **You** cannot recover if **You** have to cancel or cut short **Your** holiday during the **Period of Insurance** because **Your Pet** has:

1. Gone missing while **You** are away; or
2. Is injured or shows the first **Clinical Signs** of any **Illness** while **You** are away or up to 7 days before **You** are due to leave and needs immediate life saving surgery.

What You Pay

The first £50 of any claim.

What The Underwriters will not pay

1. More than the **Maximum Benefit** payable per **Period of Insurance**.
2. Any costs relating to a holiday booked within 28 days of departure.
3. Any costs relating to a **Condition** or **Illness** that is excluded.

How to Claim

Please send **The Underwriters** confirmation of the treatment signed by **Your** vet. **They** will also require cancellation invoices from **Your** travel agent, tour operator or other holiday sales organisation.

The invoices must show the dates and total cost of **Your** holiday, the date **You** decided to cancel or return home and any expenses that **You** cannot recover.

Section 8 – Optional Overseas Travel Cover

This section only applies if specified on the Schedule

The cover provided under this **Certificate** is extended to include any **Journey** made by **You** with **Your Pet** within the European Union.

It is a condition of this section that no more than three Journeys are made by You and Your Pet in any one Period of Insurance and that each Journey does not exceed thirty days.

Quarantine Costs

What The Underwriters will pay

Any quarantine kennelling and costs:

1. In getting a new passport for **Your Pet** should **Your Pet's** microchip of ISO Standard 11784 or ISO Standard 11785 fail.
2. Should **Your Pet** have to go into quarantine due to **Illness** despite **Your** compliance with all the requirements of the **Pet Travel Scheme**.

What The Underwriters will not pay

1. More than the **Maximum Benefit** payable per **Period of Insurance**.
2. Any costs if the microchip was not checked and found to be functioning properly within fourteen days prior to **Your** departure on the **Journey**.
3. Any costs arising from any **Condition** of which **You** were aware before the start of **Your Journey**.
4. Costs resulting from a **Pre-existing Medical Condition**.

Emergency Repatriation Costs

What The Underwriters will pay

1. Reasonable expenses and costs for additional accommodation and repatriation for **You** and **Your Pet** if:
 - **Your Pet** needs emergency **Treatment** and as a result of this **You** miss **Your** scheduled departure to the United Kingdom provided such **Treatment** is covered under Section 1 Veterinary Fees.
 - **Your** scheduled departure to the United Kingdom is missed as a direct result of the loss of **Your Pet's** passport provided that the loss is covered under Section 8 Loss of Passport.
2. Reasonable additional travel and accommodation costs and expenses (up to a maximum of fourteen days) if **Your Pet** becomes lost during a **Journey**, whilst **You** try to find **Your Pet** before **Your** scheduled return date to the United Kingdom.

What The Underwriters will not pay

1. More than the **Maximum Benefit** payable per **Period of Insurance**.
2. Costs resulting from a **Pre-existing Medical Condition**.
3. Any costs arising from any **Condition** of which **You** were aware before the start of **Your Journey**.

Loss of Passport

What The Underwriters will pay

1. Costs of replacing **Your Pet's** passport should the original become lost, stolen or destroyed during a **Journey**.
2. Any quarantine costs incurred directly through the loss of **Your Pet's** passport will be included in the costs.

What The Underwriters will not pay

1. Any loss, theft or destruction that occurs prior to the commencement of a **Journey**.
2. Any claim unless **You** report the loss, theft or destruction of **Your Pet's** passport to the vet who issued it within 24 hours of discovering the loss.
3. More than the **Maximum Benefit** payable per **Period of Insurance**.

How to Claim

Please send **The Underwriters** full details of the circumstances including invoices and receipts to support **Your** claim.

Special General Conditions and Exclusions applicable to Section 8

1. General Exclusion 3 in this **Certificate** is extended to include the European Union for the purposes of this section.
2. All other General Exclusions and General Conditions as stated in this **Certificate** will remain applicable.

General Exclusions

1. Any claim arising directly or indirectly as a result of war, hostilities (whether war be declared or not), terrorist activity, revolution, military or usurped power, civil commotion or any similar event.
2. Any liability that arises from radioactive contamination, nuclear fallout or other similar event.
3. Any incident occurring outside the United Kingdom, Isle of Man or the Channel Islands.
4. Claims under any section excluded on the **Schedule**.
5. Any pet under 8 weeks old.
6. Any pet 8 years old or over at inception.
7. We are unable to insure the following: Shar-pei, Pit Bull Terrier, American Pit Bull, Dogo Argentino, Japanese Tosa or a dog crossed with these breeds, Wolves or Wolf Hybrids. Any dog registered under The Dangerous Dogs Act 1991, The Dangerous Dogs (Amendment) Act 1997 or The Dangerous Dogs (Northern Ireland) Order 1991 and any subsequent amendments.
8. Any claim associated with Rabies or Avian Influenza.
9. Dogs used for guarding, track racing, coursing or working dogs of any kind.
10. Any loss, injury, damage, **Illness**, death or legal liability, directly or indirectly, caused by, happening through, in consequence of or contributed to by:
 - Avian Influenza or any derivation or variant thereof;
 - arising from any fear or threat (whether actual or perceived) of such Avian Influenza;
 - any action taking in controlling, preventing, suppressing or in any way relating to any outbreak of such Avian Influenza.If **The Underwriters** allege that, by reason of this exclusion, any claim is not covered by this insurance the burden of proving the contrary shall be upon **You**.
11. Any claim which is covered under any other policy, unless the cover provided by that policy or policies has been exhausted.

Cancellation - Your Right to Cancel

You are free to cancel this policy at anytime by contacting either **Your** insurance broker who **You** arranged this insurance with or **The Administrators**.

If, within 14 days of either receiving **Your** policy documentation, or the start of the **Period of Insurance**, **You** find that it does not meet **Your** requirements **You** may cancel **Your** policy by returning the documentation along with written instruction to **Your** insurance broker who **You** arranged this insurance with. **We** will refund the premium paid in full provided that no claim has been submitted nor any incident likely to give rise to a claim has occurred.

For cancellation occurring after the first 14 days of receiving **Your** policy documentation, if there has been no claim or incident likely to give rise to a claim during the current **Period of Insurance** **We** will calculate the appropriate premium for the period **You** have been insured and refund any balance due.

If a claim has been submitted or there has been any incident likely to give rise to a claim during the current **Period of Insurance** no premium refund will be given.

If the premium is paid under a monthly instalment plan and a claim has been settled during the current **Period of Insurance** **You** must continue with the instalment payments.

No refund of premium will be made under a monthly instalment plan.

We reserve the right to cancel this policy immediately in the event of non-payment of the premium or default by **You** under a monthly instalment plan.

We may also cancel the policy by sending 7 days notice by recorded delivery to **You** at **Your** last known address.

If **You** cancel after the first 14 days we will calculate the appropriate premium based on the calculations below and refund any balance due.

Cancellation Charges

For clients that have been insured under the policy for less than one year.

Up to 1 Month 20% Charge
Up to 3 Months 40% Charge
Up to 6 months 60 % Charge
Up to 8 months 80 % Charge
After 8 Months no refund due at all.

For clients that have been insured under this policy for more than one year.

We will calculate the appropriate premium for the period **You** have been insured and refund any balance due. If a claim has been submitted or there has been any incident likely to give rise to a claim during the current **Period of Insurance** no premium refund will be given.

Claims Procedure

If **You** are claiming for veterinary fees please follow the guidance in Details of Your Cover Section 1 – Veterinary Fees.

In circumstances involving a possible claim under any other section of this insurance **You** should call **The Underwriters** claims helpline on 0845 279 7249.

This is available 9am – 5pm Monday to Friday, outside these hours **You** can leave **The Underwriters** a message and **They** will give it priority treatment.

Alternatively write to Pet Insurance Claims Department, Ground Floor, Southgate House, Southgate Street, Gloucester GL1 1UB.

Our Service Commitment to You

Our aim is to ensure that all aspects of **Your** insurance are dealt with promptly, efficiently and fairly. At all times **We** are committed to providing **You** with the highest standard of service.

If **You** have any questions or concerns about **Your** policy or the handling of a claim **You** should, in the first instance, contact either **Your** insurance broker who **You** arranged this insurance with or;

The Administrators

K. Drewe Insurance Brokers Ltd., The Post House, 14 Load Street, Bewdley, Worcs, DY12 2AE
Tel: 0845 33 03 012 Fax: 0845 408 5926 Email: mail@kdib.co.uk

In the event that **You** remain dissatisfied and wish to make a complaint, **You** can do so at any time by referring the matter to Policyholder and Market Assistance at Lloyd's. Their address is:-

Policyholder and Market Assistance

Lloyd's Market Services., G6/86, One Lime Street, London EC3M 7HA
Tel: 020 7327 5693 Fax: 020 7327 5225 Email: complaints@lloyds.com

Complaints that cannot be resolved by Policyholder and Market Assistance at Lloyd's may be referred to the Financial Ombudsman Service. Further details will be provided at the appropriate stage of the complaint process. Referral to the Financial Ombudsman will not affect **Your** right to take legal action.

Financial Services Compensation Scheme (FSCS)

Lloyd's Underwriters are covered by the Financial Services Compensation Scheme. **You** may be entitled to compensation from the Scheme if a Lloyd's Underwriter is unable to meet its obligations to **You** under this contract. If **You** were entitled to compensation under the Scheme, the level and extent of the compensation would depend on the nature of the contract. Further information about the Scheme is available from the Financial Services Compensation Scheme, 7th Floor, Lloyds Chambers, Portsoken Street, London E1 8BN, by telephoning 020 7892 7300 and on their website www.fscs.org.uk

Law Applicable to Contract

The parties are free to choose the law applicable to this contract but in the absence of agreement to the contrary the contract shall be subject to the law of the country in which **You** reside at the date of the contract (or in the case of a business, the law of the country in which the registered office or principal place of business is situated will apply).

If **You** are not resident (or in the case of a business, the registered office or principal place of business is not situated) in England or Wales, Scotland or Northern Ireland, Channel Islands or the Isle of Man the law which will apply is the law of England and Wales.