

NCI Pet Insurance

Life Plus Policy Wording Document



YOU MUST READ THIS POLICY DOCUMENT AND THE SCHEDULE WHICH FORMS AN INTEGRAL PART OF THE POLICY

Please ensure that **you** read the policy document and schedule fully as it sets out the terms of the contract of insurance between **Us** the Insurer and **You** the Policyholder and **you** need to ensure it provides the level of protection required.

As a Policyholder, **you** have the benefit of this policy which **you** have purchased through NCI Pet Insurance, and underwritten by Elite Insurance Company Limited.

Please note:

- These policy Terms and Conditions are part of **your** insurance contract. The other parts are **your** Certificate of Insurance Policy Details, Certificate of Insurance of **your pet** and **your** written, internet or telephone application or any other information supplied by the Policyholder. This policy, the certificate and any endorsement, shall be considered as one document and form the basis of the content.
- These Terms and Conditions include 10 sections of cover. Please be aware that some of the sections of cover are not available on all plans and may not be included in the cover for **your pet**. The section is only included in cover for **your pet** if it is shown on **your** Certificate of Insurance. To understand exactly what **your** insurance contract covers **you** must read **your** Certificate of Insurance, Policy Schedule and all the policy Terms and Conditions.
- If **you** pay **your** premium by Direct Debit instalment, when **your** policy is due for renewal **we** will renew it for **you** automatically, to save **you** the worry of remembering to contact **us** before the renewal date. **We** will write to **you** before the policy expires with full details of **your** premium and policy conditions for the next **policy year**. If **you** do not want to renew this policy, all **you** need to do is call us on **01423 535 057** to let **us** know.
- Please read Section D for conditions applying to the whole policy.

In the event of a claim:

To make a claim you may either:

- Telephone **01423 535 057** and request a claim form to be sent to you; or
- Download a claim form from the website at www.ncipetinsurance.com/pet/how-to-claim

You can send this in writing to: The Claims Department, NCI Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD

Unless **you** are claiming for **Veterinary fees**, **you** must let **us** know of any circumstances which are likely to lead to a claim. The claim form must be completed fully and truthfully and returned with documentation, evidence or other information that **we** may reasonably require in order to assess **your** claim.

Please ensure **you** follow the procedures set out in the relevant section under which **you** are claiming. Please make sure **your** claim form is fully completed by **you** and if **you** are claiming for **Veterinary fees**, **your vet**, as any incomplete claim forms will be returned to **you**.

If **you** wish to complain about the service **we** have provided please write to The Complaints Manager at the address shown below. **We** will take steps to remedy the position, or where **you** remain dissatisfied details of the procedure to follow will be provided as detailed below in Section E.

Our Head Office and Registered Office

Elite Insurance Company Limited is a company registered in Gibraltar with Company Registration Number: 91111, whose registered office is at Suite 913 Europort Gibraltar and whose business address in the UK is situated at Newton Chambers, Isaac Newton Way, Grantham, and Lincolnshire, NG31 9RT. Elite Insurance Company Limited is authorised and regulated by the Gibraltar Financial Services Commission.

* NCI Vehicle Rescue plc (NCI)

SECTION A: THE MEANING OF WORDS IN THIS POLICY

1. Agreed countries:

Any European Union member States and Territories which are included in the **Pet Travel Scheme (PETS)**.

2. Behaviourist:

A Certified Clinical Animal **Behaviourist** or a member of one of the following organisations, from **our** list of approved specialists:

- Association of **Pet** Behaviour Counsellors
- Canine and Feline Behaviour Association

3. Behavioural illness:

Any change(s) to **your pet's** normal behaviour that is caused by a mental or emotional disorder, **illness** or disease, but not **injury** which could not have been prevented by training.

4. Certificate for treatment against parasites:

A certificate issued under the terms of the **Pet Travel Scheme (PETS)**.

5. Clinical sign(s):

Changes in **your pet's** normal healthy state, its bodily functions or behaviour.

6. Complementary therapist:

A member of one of the following organisations, from our approved list of specialists:

- Canine Hydrotherapy Association
- McTimoney Chiropractic Association
- International Association of Animal Therapists (**UK**)

7. Complementary treatment:

The cost of any examination, consultation, advice, test and legally prescribed medication for the following procedures where they treat an **illness** or **injury**.

- Acupuncture and homeopathy carried out by, and herbal medicine prescribed by, a veterinary practice.
- Chiropractic manipulation carried out by a veterinary practice or a qualified animal chiropractor from our list of approved list of specialists who is a member of the McTimoney Chiropractic Association or the International Association of Animal Therapists (**UK**).
- Hydrotherapy carried out:
 - a) In a pool which has full Canine Hydrotherapy Association membership, or
 - b) By a veterinary practice, providing the hydrotherapy is carried out in a pool they own.
- Osteopathy carried out by a veterinary practice or a qualified animal osteopath who is a member of the International Association of Animal Therapists (**UK**) and on our list of approved specialists.

8. Elective treatment or diagnostics:

Any **treatment** or diagnostic **you** request, which the **vet** confirms or would reasonably consider as not necessary.

9. Excess:

The amount shown on **your** Certificate of Insurance. This is the first part of each unrelated claim and the amount **you** have to pay. For **Veterinary fees** and **Complementary Treatment** this will either be a fixed amount only or a fixed amount and a percentage amount. If **you** claim under **Veterinary fees** and **Complementary Treatment** for the same **illness** or **injury**, **you** will pay the below amounts under each benefit.

a) A fixed amount only. The fixed amount is the amount that **you** have to pay towards each **illness** or **injury** that is not related to any other **illness** or **injury** treated during the same **policy year**. This amount will be deducted from the first claim(s) for that **injury** or **illness**. If the **treatment** dates of the **illness** or **injury** fall into two or more **policy years** **we** will deduct the fixed amount from the first claim(s) in each **policy year**.

b) A fixed amount and a percentage amount will be shown if **your pet** is 10 years old or over (7 years old or over for **Select breeds**). The fixed amount will be deducted as explained in a) above. In addition, **you** must also pay a percentage of all **treatment** costs. The percentage is shown on **your** Certificate of Insurance. This will be deducted from all claims submitted and will be calculated on the amount left after the fixed amount has been deducted.

10. Family:

Your husband, wife, civil partner, life partner, parents, grandparents, brothers, sisters, sons, daughters, grandsons and granddaughters.

11. Home:

The place in the **UK** where **you** usually live.

12. 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.

13. Illness which starts in the first 14 days of cover

- An **illness** that showed **clinical signs** in the first 14 days of **your pet's** first **policy year**, or
- An **illness** which is the same as, or has the same **diagnosis** or **clinical signs** as an **illness** that showed **clinical signs** in the first 14 days of **your pet's** first **policy year**, or
- An **illness** that is caused by, relates to, or results from, a **clinical sign** that was noticed, or an **illness** that showed **clinical signs** in the first 14 days of **your pet's** first **policy year**, no matter where the **illness** or **clinical signs** are noticed or happen in, or on, **your pet's** body.

14. Immediate family:

Your husband, wife, civil partner, life partner, parents, sons and daughters.

15. Incident:

A specifically identifiable accident, **injury** or **illness**. Recurring and/or chronic **incidents** shall be considered as one loss and/or condition. Such **incidents** being defined as:

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

16. Injury:

Physical damage or trauma caused immediately by a sudden and unforeseen accident. Not any physical damage or trauma that happens over a period of time.

17. Journey:

Travel from **your home** to any of the **agreed countries** for a maximum of 45 days for all **journeys** in the **policy year**. This includes the duration of **your** holiday or business trip and any travel in and between **agreed countries** and return **journeys to your home**.

18. 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**.

19. Maximum benefit:

The most **we** will pay during the **policy year** as shown on the Certificate of Insurance.

20. Onset Date:

The date that **you** first noticed **your pet's injury** or **illness**.

21. Pet, Your pet:

Means the dog, cat identified as insured in the Certificate of Insurance.

22. Pet passport:

A passport issued under the terms of the **Pet Travel Scheme (PETS)**.

23. Pet Travel Scheme (PETS):

A Government Scheme that allows people in the **UK** to take their **pets** abroad to specific countries and bring them back again into the United Kingdom without the need for quarantine, providing certain criteria have been met.

24. PETS Certificate:

A certificate issued under the terms of the **Pet Travel Scheme (PETS)**.

25. Physiotherapist:

A member of the following organisations and specified on our list of approved specialists:

- Association of Chartered **Physiotherapists** in Animal Therapy
- International Association of Animal Therapists (**UK**)
- National Association of Veterinary **Physiotherapists**

26. Policy year:

The time during which **we** give cover as shown on **your** Certificate of Insurance. This is normally 12 months but may be less if **your pet** has been added to, or cancelled from, **your** insurance or where a specific period of cover is granted. Cover commences at 12 midnight on the date the policy was purchased and expires at midnight on the expiry date as stated on the Certificate of Insurance.

27. Pre-existing condition:

- An **injury** that happened or an **illness** that first showed **clinical signs** before **your pet's** cover started, or
- An **injury** or **illness** that is the same as, or has the same **diagnosis** or **clinical**

signs as an **injury**, **illness** or **clinical sign your pet** had before its cover started, or

c) An **injury** or **illness** that is caused by, relates to, or results from, an **injury**, **illness** or **clinical sign your pet** had before its cover started.

No matter where the **injury**, **illness** or **clinical signs** are noticed or happen in, or on, **your pet's** body. This is in addition to any exclusion(s) stated on **your** Certificate of Insurance.

28. Select breeds:

All Mastiff breeds, Beauceron, Bernese Mountain Dog, Bulldog, Deerhound, Dogue de Bordeaux, Estrela Mountain Dog, Great Dane, Irish Wolfhound, Leonberger, Newfoundland, Old English Sheep Dog, Pyrenean Mountain Dog, Rottweiler, Shar Pei and St Bernard.

29. Treatment:

Any examination, consultation, advice, tests, x-rays, medication, surgery, hospitalisation, nursing and care provided by a veterinary practice.

30. Treatment Date:

The date that **your pet** first received **treatment** for the **illness** or **injury** being claimed.

31. UK:

The United Kingdom, the Isle of Man and the Channel Islands.

32. Vet:

Registered Veterinary Surgeon.

33. Veterinary fees:

The cost or expense of any **treatment** or amount **vets** in general or referral practices usually charge.

34. Veterinary treatment:

The cost of the following when required to treat an **illness** or **injury**:

- Any examination, consultation, advice, test, x-ray, surgery and nursing carried out by a **vet**, a veterinary nurse or another member of the veterinary practice under the supervision of a **vet**, and
- Any medication legally prescribed by a **vet**. This includes physiotherapy (not including hydrotherapy) carried out by a veterinary practice or a **physiotherapist** and **treatment** of a **behavioural illness** carried out by a veterinary practice or a **behaviourist**.

35. We, us, our, insurer:

Elite Insurance Company Limited, the underwriters of this policy.

36. You, your, the policyholder:

The person named on the Certificate of Insurance of Cover.

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

SECTION B: INSURED EVENTS WE WILL COVER

In return for the correct premium, **we** will provide cover for the following sections if they are shown on **your** Certificate of Insurance.

Section 1A - Veterinary fees

Cover under this section applies in the **UK** and **agreed countries** only.

What we will pay

The cost of **veterinary fees** for the **veterinary treatment your pet** has received during the **policy year** to treat an **illness** or **injury**.

What you pay

The **excess** shown on **your** Certificate of Insurance.

What we will not pay

- More than the **maximum benefit** for the combined **treatment** costs of all **illnesses** and **injuries** in the **policy year**.
- The cost of any **treatment** for a **pre-existing condition**.
- The cost of any **treatment** for an **illness which starts in the first 14 days of cover**.
- The cost of any **treatment** to prevent **injury** or **illness**.
- The cost of any **elective treatment** or **diagnostics** 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.

8. 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 for up to 6 months. The cost of this food is only covered for the first occurrence of bladder stones and crystals; **we** will not pay for the cost of this food if the bladder stones or crystals recur.

- 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.

9. The cost of pheromone products, including DAP diffusers and Feliway, unless used as part of a structured behaviour modification programme, and then limited to a maximum period of 6 months. If the **behavioural illness** recurs after these 6 months, **we** will not cover the cost of any further pheromone products for that **behavioural illness**.

10. The cost of any vaccination, other than the cost of treating any complications that arise from this procedure.

11. 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 **illness** or **injury** and is essential to treat the **illness** or **injury**, or

- The costs claimed are for the **treatment** of complications arising from this procedure.

12. The cost of any **treatment** in connection with a retained testicle(s) if **your pet** was over the age of 16 weeks when cover started.

13. The cost of any **treatment** in connection with false pregnancy if **your pet** has received **veterinary treatment** for more than 2 episodes of false pregnancy.

14. The cost of treating any **injury** or **illness** deliberately caused by **you** or anyone living with **you** or, while on **your** journey, anyone travelling with **you**.

15. The costs of having **your pet**:

- Put to sleep, including any veterinary consultations/visits or prescribed medications specifically needed to carry out the procedure, or
- Cremated, buried or disposed of.

16. The cost of a house call unless the **vet** or **physiotherapist** confirms that moving **your pet** would further damage its health, regardless of **your** personal circumstances.

17. Extra costs for treating **your pet** outside usual surgery hours, unless the **vet**, **physiotherapist** or **behaviourist** confirms an emergency consultation is essential, regardless of **your** personal circumstances.

18. The cost of hospitalisation and any associated **veterinary treatment**, unless the **vet** or **physiotherapist** confirms **your pet** must be hospitalised for essential **veterinary treatment**, regardless of **your** personal circumstances.

19. Costs resulting from an **injury** or **illness** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.

20. The cost of surgical items that can be used more than once.

21. The cost of hydrotherapy, acupuncture, homeopathy, chiropractic manipulation, osteopathy or any other **complementary** or alternative **treatment**. This includes any **veterinary treatment** specifically needed to carry out the particular **complementary** or alternative **treatment**. Please refer to Section 1B - **Complementary Treatment** where details of cover for these types of **treatment** can be found.

22. The cost of buying or hiring equipment or machinery or any form of housing, including cages.

23. The cost of bathing, grooming or de-matting **your pet** unless:

- You** have taken all reasonable steps to maintain **your pet's** health, and
- A **vet** confirms veterinary expertise is needed and therefore only a **vet** or a member of a veterinary practice can carry out these activities, regardless of **your** personal circumstances.

24. 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.

25. The cost of a post-mortem examination.

26. The cost of transplant surgery, including any pre- and post-operative care.

27. The cost of any prosthesis, including any **veterinary treatment** needed to fit the prosthesis, other than the cost of hip and/or elbow replacement(s).

28. The cost of any **treatment** if a claim has not been submitted within 12 months of **your pet** receiving **treatment**.

29. The cost of any **treatment** while on a **journey** if:

- a) A **vet** believes the **treatment** can be delayed until **your pet** returns home, or
- b) The **journey** was made to get **treatment** abroad.

Special conditions apply to this section. Please see Section 1C 'Special conditions that apply to Veterinary fees (Section 1A) and Complementary Treatment (Section 1B)'. Full details regarding how and when to claim for Veterinary fees can be found in 'How and when to claim under Section 1A - Veterinary fees and Section 1B - Complementary Treatment' on page 8.

Section 1B - Complementary Treatment

Cover under this section applies in the UK only.

What we will pay

If recommended by the **vet**, the cost of **complementary treatment your pet** has received during the **policy year** to treat an **illness** or **injury**. This section of cover is in conjunction with Section 1A – **Veterinary Fees** and a maximum of £250 can be claimed for **complementary treatment** per condition.

What we will not pay

1. More than the **maximum benefit** per condition.
2. The cost of any **treatment** for a **pre-existing condition**.
3. The cost of any **treatment** for an **illness** which starts in the first 14 days of cover.
4. The cost of any **treatment** to prevent **injury** or **illness**.
5. The cost of any **elective treatment** or **diagnostics** 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.
6. The cost of killing and controlling fleas and the cost of general health improvers.
7. The cost of any **treatment** in connection with breeding, pregnancy or giving birth.
8. The cost of any food, including food prescribed by a **vet**.
9. The cost of more than 10 sessions of hydrotherapy for each **illness** or **injury**.
10. The cost of any vaccination, other than the cost of treating any complications arising from this procedure.
11. The cost of treating any **injury** or **illness** deliberately caused by **you** or anyone living with **you**.
12. The costs of having **your pet** put to sleep, cremated, buried or otherwise disposed of.
13. The cost of a house call unless the **vet** or **complementary** therapist confirms that moving **your pet** would further damage its health, regardless of **your** personal circumstances.
14. Extra costs for treating **your pet** outside usual surgery hours, unless the **vet** or **complementary therapist** confirms an emergency consultation is essential, regardless of **your** personal circumstances.
15. The cost of hospitalisation and any associated **treatment**, unless the **vet** or **complementary therapist** confirms **your pet** must be hospitalised for essential **complementary treatment**, regardless of **your** personal circumstances.
16. Costs resulting from an **injury** or **illness** specified as excluded on **your** Certificate of Insurance. or generally not covered within these Terms and Conditions.
17. The cost of buying or hiring equipment or machinery or any form of housing, including cages.
18. The cost of bathing, grooming or de-matting **your pet** unless:
 - You** have taken all reasonable steps to maintain **your pet's** health, and
 - The **vet** or **complementary therapist** confirms veterinary expertise is needed and therefore only a **vet**, a member of a veterinary practice or the **complementary therapist** can carry out these activities, regardless of **your** personal circumstances.
19. 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.
20. The cost of any **treatment** if a claim has not been submitted within 12 months of **your pet** receiving **treatment**.

Section 1C - Special conditions that apply to Veterinary fees (Section 1A) and Complementary Treatment (Section 1B) above

1. The maximum amount **we** will pay for the cost of **treatment** is the **maximum benefit** that applies on the date the **treatment** is carried out.
2. **You** must notify **us** immediately and obtain our prior authority before incurring veterinary fee(s) or total fees arising from any **incident** or the same condition where they are likely to exceed £850 by telephoning **01423 535 057**.
3. If the claim includes medication, these costs will be subject to the **maximum benefit** that applies on the date the medication will be used.
4. 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, how the amount **we** pay is calculated and if the premiums are paid to date.

5. If **we** receive a request to pay the claim settlement directly to a **veterinary** practice, **we** reserve the right to decline this request.

6. If the **veterinary fees** **you** are charged are higher than the fees usually charged by a general or referral practice, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If the **vet** **we** choose does not agree with the **veterinary fees** charged **we** may decide to pay only the **veterinary fees** usually charged by a general or referral practice in a similar area.

7. If **we** consider the **veterinary treatment** or **complementary treatment** **your pet** receives may not be required or may be excessive when compared with the **treatment** that is normally recommended to treat the same **illness** or **injury** by general or referral practices, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If the **vet** **we** choose does not agree with the **veterinary treatment** or **complementary treatment** provided, **we** may decide to pay only the cost of the **veterinary treatment** or **complementary treatment** that was necessary to treat the **injury** or **illness**, as advised by the **vet** from whom **we** have requested the second opinion.

8. **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**.

9. If **you** decide to take **your pet** to a different **vet** or **complementary therapist** 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** or **complementary therapist**. If **you** do not, **we** will not pay any costs relating to the second opinion. If **we** request, **you** must use a **vet** or **complementary therapist** **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.

10. It is **your** responsibility to ensure the **veterinary practice** or **complementary therapist** 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.

11. If the **veterinary practice** or **complementary therapist** 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.

12. It is both agreed and understood that in the event where a **veterinary practice** makes an administration charge to release any information that **we** request in order to process **your** claim; such costs will not be considered under **your** insurance policy.

How and when to claim for Section 1A - Veterinary fees and Section 1B – Complementary Treatment

Before **your pet** is treated, **you** must make sure that **your vet** is prepared to fill in **our** claim form and provide invoices. For **Complementary Treatment** claims the **complementary therapist** must provide invoices and the **vet** must complete the claim form. **You** must fill in a claim form and ask **your vet** to fill in their part.

Please send us:

1. **Your** completed claim form,
2. The invoices showing the costs involved, and
3. For **Veterinary fees** only, if the claim is for **treatment** in an **agreed country**, **you** must also provide the booking invoice for **your journey** or any other official documents which show the dates of **your journey**.

We will not pay for the cost of this information or the cost of the **vet** completing the claim form.

When to claim - **We** will not accept claims more than 12 months after the **treatment** start date. This means **you** must send **us** **your** claim within 12 months of the **treatment** start date and if **treatment** is ongoing **you** must ensure that claims are sent to us at least every 12 months.

Section 2 - Death from Injury

Cover under this section applies in the **UK** only.

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 **policy year** as a result of an **injury**. 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 the **maximum benefit**.
2. Any amount if the death results from an **injury** that happened before **your pet's** cover started.

3. Any amount if the death results from an **injury** specified as excluded on **your** Certificate of Insurance. or generally not covered within these Terms and Conditions.

4. Any amount unless the death results from an **injury** that could not be treated and **your vet** confirms it was not humane to keep **your pet** alive because it was suffering.

5. Any amount if the main cause of death results from an **illness** and a claim is made under Section 3.

6. Any amount if a claim has not been submitted within 12 months of **your pet's** death.

Full details regarding how to claim for Death from Injury can be found in 'How to claim for Section 2 - Death from Injury or Section 3 - Death from Illness'.

Section 3 - Death from Illness

Cover under this section applies in the **UK** only.

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 **policy year** as a result of an **illness**. If **you** have no formal proof of how much **you** paid, **we** will pay the **market value** or 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 the **maximum benefit**.
2. Any amount if **your pet's** death results from a **pre-existing condition**.
3. Any amount if **your pet's** death results from an **illness which starts in the first 14 days of cover**.
4. Any amount if the death results from an **illness** in any **Select breed** aged 5 years or over or any other **pet** aged 8 years or over.
5. Any amount if the death results from breeding, pregnancy or giving birth.
6. Any amount if the death results from an **illness** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.
7. Any amount unless the death results from an incurable **illness** and the **vet** confirms it was not humane to keep **your pet** alive because it was suffering.
8. Any amount if the main cause of death results from an **injury** and a claim is made under Section 2.
9. Any amount if a claim has not been submitted within 12 months of **your pet's** death.

How to claim for Section 2 - Death from Injury or Section 3 - Death from Illness.

Please send us:

1. The death certificate from **your vet**,
2. The receipt from when **you** bought **your pet**,
3. If **your pet** is a pedigree, the original pedigree certificate, and
4. **Your** completed claim form.

We will not pay for the cost of this information or the cost of the **vet** completing the claim form.

Section 4 - Theft or Straying

Cover under this section applies in the **UK** only.

What we will pay

The price **you** paid for **your pet** if it is stolen or goes missing during the **policy year** and is not recovered or does not return. 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 the **maximum benefit**.
2. Any amount if **you** or the person looking after **your pet** has freely parted with it, even if tricked into doing so, unless anyone was looking after or transporting **your pet** in return for money, goods or services.
3. Any amount if a claim has not been submitted within 12 months of **your pet** going missing or being stolen.

Special conditions apply to this section. Please see 'Special conditions that apply to Section 4 - Theft or Straying and Section 5 - Advertising and Reward'.

How to claim

Please send us:

1. The purchase receipt from when **you** bought **your pet**,
2. If **your pet** is a pedigree, the original pedigree certificate, and
3. **Your** completed claim form.

We will not pay for the cost of this information.

Section 5 - Advertising and Reward

Cover under this section applies in the **UK** and **agreed countries** only.

What we will pay

If **your pet** is stolen or goes missing during the **policy year**, we will pay:

1. The cost of advertising, and
 2. The reward **you** have offered and paid to get **your pet** back.
- If **your pet** is stolen or goes missing during **your journey**, we will also pay the cost of **your** accommodation to stay and look for **your pet** if it has not been found or returned by the scheduled last date of **your journey**.

What we will not pay

1. More than the **maximum benefit**.
2. More than 10% of the **maximum benefit** towards sundries to make **your** own posters and advertising materials.
3. Any expense incurred without **our** prior consent.
4. Any reward that **we** have not agreed before **you** advertised it.
5. More than £250 for the reward costs to recover **your pet** if it is lost or stolen.
6. Any reward not supported by a signed receipt giving the full name and address of the person who found **your pet**.
7. Any reward paid to a member of **your family**, any person living with **you** or employed by **you**, including any person travelling with **you** during **your journey**.
8. Any reward paid to the person who was caring for **your pet** when it was lost or stolen.
9. If **your pet** is stolen or goes missing during **your journey**:
 - a) More than 7 days' accommodation costs and more than £30 for each day's accommodation.
 - b) Any amount if the cost of accommodation is at a property owned by **you** or **your family**.
 - c) Any amount unless there is some official documentation to certify the theft or loss was reported to the police or the ship, aircraft, train or coach operator if the loss or theft happened while **you** were travelling with them.
10. Any amount if a claim has not been submitted within 12 months of **your pet** going missing or being stolen.

Special conditions apply to this section. Please see 'Special conditions that apply to Section 4 - Theft or Straying and Section 5 - Advertising and Reward'.

Section 4/5A - Special conditions that apply to Theft or Straying (Section 4) and Advertising and Reward (Section 5)

1. As soon as **you** discover **your pet** is missing:
 - a) If **your pet** is a dog **you** must tell the appropriate authority and ask for written confirmation of **your** report.
 - b) If **your pet** is a cat and it may have been stolen, **you** must tell the appropriate authority and ask for written confirmation of **your** report.
 - c) For Advertising and Reward only, if **your pet** was lost or stolen on a ship, aircraft, train or coach, **you** must report the loss or theft to the operator and obtain a report.
2. **You** must immediately take all reasonable steps to find or recover **your pet**. **You** must tell all **vets** and local rescue centres within a reasonable distance of the area where **your pet** was last seen within 5 days of **your pet** going missing. At least one veterinary practice must be notified.
3. For Theft or Straying only:
 - a) To submit a claim for Theft or Straying **you** must have advertised the loss of **your pet**.
 - b) If **your pet** has not been found within 30 days, please fill in a claim form and return it to us as soon as possible.
 - c) If the claim is paid the original pedigree certificate and purchase receipt will not be returned to **you**.
 - d) If **your pet** is found or returns, **you** must repay the full amount **we** have paid **you**.

How to claim

You must phone us on **01423 535 057** for the approval of any reward before **you** advertise it. Please send us:

1. **Your** completed claim form,
2. The invoices and receipts to show the costs involved, including a receipt for any reward paid, and
3. If the loss or theft happened during **your journey**, the booking invoice for **your journey** or any other official documents to show the dates of **your journey**.

Please note **we** will not pay for the cost of this information.

Section 6 - Third Party Liability

Cover under this section applies in the **UK** only.

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 **policy year** and **you** are legally responsible and held to be liable, **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 the **maximum benefit**.
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 if **you** are legally responsible only because of a contract **you** have entered into.
5. 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**.
6. Any compensation, costs and expenses if the property damaged belongs to **you**, any person who lives with **you**, a member of **your immediate family** or a person who is employed by **you**.
7. 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.
8. Any compensation, costs and expenses that result from an **incident** if **you** have not followed instructions or advice given to **you** by previous owners or the rehoming organisation about the behaviour of **your pet**.
9. Any compensation costs and expenses if **you** are deemed responsible under the laws of any country, other than members of the European Union.
10. 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**.
11. Any compensation costs and expenses if **you** are found not to be liable for the **incident** and/or recover costs and expenses from the opponent.
12. Any compensation, costs and expenses resulting from an **incident** that happens where **you** work.
13. 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.
14. Costs resulting from any **incident** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.

Section 6A - Special conditions that apply to this section

1. **You** must not admit responsibility, agree to pay any claim or negotiate with any person following an **incident**.
2. **You** agree to provide us with any information connected with the claim **we** reasonably ask for including details of **your pet's** history.
3. **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.
4. **You** must allow **us** to take charge of **your** claim and allow **us** to prosecute in **your** name for **our** benefit.

5. **You** must immediately send **us** any writ, summons or legal documents **you** receive and **you** must never send any replies to these documents.

How to claim

Please send **us**:

1. **Your** completed claim form, and
2. All correspondence, writs, summons or any other legal documents. **You** must not have answered any of these documents. **We** will not pay for the cost of this information.

Section 7 - Boarding Fees

Cover under this section applies in the **UK** only.

In this section, “**you**” means **you** or **your** husband, wife, civil partner or life partner.

What we will pay

The cost of boarding **your pet** at a licensed kennel or cattery or up to £5 a day towards the cost of someone, who does not live with **you**, looking after **your pet** while **you** are in hospital during the **policy year**.

What we will not pay

1. More than the **maximum benefit**.
2. Any amount if **you** are in hospital for less than 4 consecutive days during each hospital stay.
3. 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.
4. Any costs resulting from **you** being pregnant, giving birth or any **treatment** that is not related to an **injury** or **illness**.
5. 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**.
6. Any costs resulting from care in a nursing **home** or from convalescence care that **you** do not receive in a hospital.
7. Any costs if a claim has not been submitted within 12 months of the stay in hospital.

How to claim

Please send **us**:

1. **Your** completed claim form, filled in by **your** doctor or consultant and where applicable the owner of the boarding kennel, cattery and
2. An invoice from the kennel, cattery or written confirmation from the person looking after **your pet**. **We** will not pay for the cost of this information

Section 8 - Holiday Cancellation

Cover under this section applies in the **UK** and **agreed countries** only.

What we will pay

1. Any travel and accommodation expenses for **you** and **your immediate family** that **you** cannot recover if **you** have to cancel **your journey** during the **policy year** because **your pet**:

- a) Is injured, or
- b) Shows the first **clinical signs** of an **illness**,
- c) Up to 7 days before **you** leave and needs immediate lifesaving **veterinary treatment**.

2. If **your pet** is staying in the **UK** during **your journey**, any travel and accommodation expenses for **you** and **your immediate family** that **you** cannot recover if **you** have to cut short **your journey** during the **policy year** because **your pet**:

- a) Goes missing, or
- b) Is injured or shows the first **clinical signs** of an **illness** while **you** are away and needs immediate life-saving **veterinary treatment**.

3. If **your pet** goes with **you** on the **journey** and is injured or shows the first **clinical signs** of an **illness** during the **journey** and has to return **home** for **treatment**, which means **you** have to cut short **your journey**, **we** will pay:

- a) The value of any unused travel and accommodation expenses for **you** and **your immediate family**, and
- b) Any extra travel expenses to return **your pet home**.

What we will not pay

1. More than the **maximum benefit**.
2. Any amount or expense resulting from a **pre-existing condition**.
3. Any amount or expense resulting from an **illness which starts in the first 14 days of cover**.
4. Any amount unless a **vet** has certified **your pet** is too ill to travel or has to return **home** for **treatment**.

5. Any amount if the **journey** was made to get **treatment** abroad.

6. Any amount **you** can claim back from anywhere else.

7. The cost of food.

8. Any amount that results from an **injury** or **illness we** have specified as excluded on **your** Certificate of Insurance. or generally not covered by these Terms and Conditions.

9. Any amount if a claim has not been submitted within 12 months of **your journey** being cancelled.

How to claim

Please send **us**:

1. **Your** completed claim form,
2. The booking invoice and cancellation invoice from the travel agent, tour operator or other holiday sales organisation, and
3. If **you** are claiming for extra travel costs, the receipts for **your** expenses.

The invoices must show the date of the booking, the dates of the **journey**, the total cost of the holiday, the date **you** decided to cancel or return **home** and any expenses **you** cannot recover. **We** will not pay for the cost of this information.

Section 9 - Emergency Repatriation

Cover under this section applies in the **agreed countries** only.

What we will pay

If **your pet** is injured or shows the first **clinical signs** of an **illness** during **your journey** and cannot travel **home** the same way it travelled abroad **we** will pay:

1. Any extra costs to get **your pet home**,
2. The cost of accommodation for **you** to stay after **your** scheduled date of travel home until **your pet** is well enough to travel, and
3. The cost of returning **your pet's** body **home** or the cost of disposal in an agreed country if **your pet** dies.

What you pay

The **excess** shown on **your** Certificate of Insurance.

What we will not pay

1. More than the **maximum benefit**.
2. Any costs resulting from a **pre-existing condition**.
3. Any costs resulting from an **illness which starts in the first 14 days of cover**.
4. Any costs that result from an **injury** that happens or an **illness** first showing **clinical signs** before the start of **your journey**.
5. Any costs unless a **vet** has certified **your pet** is too ill to travel **home** the same way it travelled abroad.
6. Any costs if the **journey** was made to get **treatment** abroad.
7. Any costs that can be reclaimed from anywhere else.
8. More than 14 days' accommodation costs.
9. Any costs that result from an **illness** or **injury** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.
10. The cost of a coffin, casket or any other container for **your pet's** remains.
11. The cost of food.
12. Any costs if a claim has not been submitted within 12 months of the date **your pet** returns **home**.

How to claim

Please send **us**:

1. **Your** completed claim form,
2. **Your** booking invoice or any other official documents showing the dates of **your journey**, and
3. The receipts for any extra travel or accommodation costs and the expenses to get **your pet home** or dispose of its body. **We** will not pay for the cost of this information.

Section 10 - Quarantine Expenses and Loss of Documents

Cover under this section applies in the **agreed countries** only.

What we will pay

If **your pet** is either unable to return to the **UK** or must be quarantined on return to the **UK** because of:

1. An **illness** first showing **clinical signs** during the **journey**,
2. The failure of the microchip, or
3. The **PETS Certificate**, **Certificate for treatment against parasites** or **Pet passport** being lost or stolen, **we** will pay:

- The cost to keep **your pet** in quarantine,
- The cost of getting a duplicate **PETS Certificate, Certificate for treatment against parasites or Pet passport**, and
- The cost of temporary accommodation while getting the duplicate **PETS Certificate, Certificate for treatment against parasites or Pet passport**, and
- Any extra costs to travel **home** if the time in getting a duplicate **PETS Certificate, Certificate for treatment against parasites or Pet passport** has caused **you** to miss **your** scheduled travel arrangements back to **your home**.

What you pay

The **excess** stated on **your** Certificate of Insurance.

What we will not pay

1. More than the **maximum benefit**.
2. Any costs resulting from a **pre-existing condition**.
3. Any costs resulting from an **illness which starts in the first 14 days of cover**.
4. Any costs that result from an **injury** that happens or an **illness** first showing **clinical signs** before the start of **your journey**.
5. Any costs that can be reclaimed from anywhere else.
6. Any costs that result from an **illness** or **injury** shown as excluded on **your** Certificate of Insurance or generally not covered in these Terms and Conditions.
7. Any costs that result from the failure of any microchip that does not meet the standards ISO 11784 or ISO 11785.
8. Any costs that result from a microchip reader failing to read a microchip.
9. Any costs unless there is some official documentation to certify the theft or loss of the **PETS Certificate, Certificate for treatment against parasites or Pet passport** was reported to the police or the ship, aircraft, train or coach operator if the loss or theft happened while **you** were travelling with them.
10. Any costs that result from the **PETS Certificate, Certificate for treatment against parasites or Pet passport** being lost or stolen while left unattended unless they are in **your** accommodation or the locked boot, covered luggage area or glove compartment of a locked vehicle.
11. More than 7 days' temporary accommodation costs.
12. Any costs if a claim has not been submitted within 12 months of the date **your pet** returns **home**.

Special conditions that apply to this section

1. **You** must take all reasonable steps to make sure the **PETS Certificate, Certificate for treatment against parasites and Pet passport** are not lost or stolen.
2. **You** must report the loss or theft of the **PETS Certificate, Certificate for treatment against parasites and Pet passport** within 24 hours of discovering it missing to the police and obtain a police report. If the loss or theft occurred on a ship, aircraft, train or coach **you** must report the loss to the operator and obtain a report.
3. **You** must take all reasonable steps to find or recover the missing **PETS Certificate, Certificate for treatment against parasites and Pet passport**.

How to claim

Please send us:

1. **Your** completed claim form,
2. The invoices and receipts to show the costs involved,
3. **Your** booking invoice or other official documents to show the dates of **your journey**, and
4. Where applicable, the police or operator's report.

We will not pay for the cost of this information.

SECTION C: MATTERS NOT COVERED BY THIS POLICY

The following exclusions apply to all sections of the policy in addition to the exclusions, limitations and conditions detailed under each relevant Section of Cover:

1. Any amount or expense resulting from a **pre-existing condition** to include where before the start of the commencement date in **our** reasonable opinion the insured was aware, or should have been aware, that a claim was likely to be made;
2. Costs arising from preventative and **elective treatment**, routine examinations, vaccination, spaying, castration, pregnancy or giving birth.
3. Any **pet** less than 6 weeks old.
4. Dogs used for security, guarding, track racing or coursing.
5. 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.
6. Any amount if **you** break the United Kingdom laws or regulations, including those relating to animal health or importation.

7. 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.

8. Any costs caused because the Department for Environment, Food and Rural Affairs (DEFRA) have put restrictions on **your pet**.

9. 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.

10. 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.

11. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.

12. Any amount resulting from a disease transmitted from animals to humans.

13. Any amount **you** recover from any other insurance or amounts that can be recovered from anywhere else.

14. Any amount not supported with receipts or other proof of payment requested by **us**.

The following exclusions only apply when your pet is on a journey in an agreed country:

15. Any amount if **you** do not follow the conditions of the **Pet Travel Scheme (PETS)**.
16. Any **journey you** take **your pet** on against a **vet's** advice.
17. Any animal less than 12 weeks old.
18. Any costs caused because any foreign government or public authority has put restrictions on **your pet**.

SECTION D: CONDITIONS WHICH APPLY TO THE WHOLE POLICY

General Conditions

1. **You** must notify **us** immediately and obtain our prior authority before incurring **veterinary fee(s)** or total fees arising from one **incident** or the same condition where they are likely to exceed £850 by telephoning **01423 535 037**.
2. Throughout the **policy year you** must take all reasonable steps to maintain **your pet's** health and to prevent **injury, illness** and loss.
3. **You** must arrange and pay for **your pet** to have a yearly dental examination and any **treatment** normally recommended by a **vet** to prevent **illness** or **injury**. Any **treatment** recommended as a result of the dental examination must be carried out as soon as possible.
4. **You** must keep **your pet** vaccinated against the following: Dogs - Distemper, hepatitis, leptospirosis, parainfluenza and parvovirus. Cats - Feline infectious enteritis, feline leukaemia and cat flu. If **you** do not keep **your pet** vaccinated, **we** will not pay any claims that result from any of the above **illnesses**.
5. **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**.
6. **You** and **your pet** must live in **UK**.
7. If there is any other insurance under which **you** are entitled to make a claim, if the claim is payable **we** will only pay our share of the claim. **You** must tell us the name and address of the other insurance company and **your** policy number with them and any other information **we** may require.
8. 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.
9. **Your pet** is only covered under this policy if **you** pay the premium. If **you** pay the yearly premium in Direct Debit instalments and **you** miss an instalment, **you** must pay the outstanding amount within 10 days of the date the instalment was due to be paid. If **we** do not receive **your** payment within 10 days of the date the premium was due, **your** insurance will automatically stop and **we** will make no further claim payments.
10. When **we** settle **your** claim, **we** will deduct from the claim, any amount due to **us**.
11. **You** agree that any **vet** has **your** permission to release any information **we** ask for about **your pet**. If the **vet** makes a charge for this, **you** must pay the charge.
12. When **we** offer further periods of insurance **we** may change the premium and the policy Terms and Conditions.
13. **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.
14. When **you** claim **you** agree to give us any information **we** may reasonably ask for.
15. **You** are free to choose the law to apply to this insurance contract. **We** are also free to choose the law to apply.

16. Unless there is an agreement between **you** and us to use a particular law, English law will apply.
17. Unless **we** agree otherwise the language of the policy and all communications relating to it will be in English.
18. Some sections of **your** policy provide travel cover. The travel cover is limited to the **agreed countries** for a maximum of 45 days in each **policy year**. While **your pet** is outside the **UK you** must follow the conditions of the **Pet Travel Scheme (PETS)**. Full details of the **Pet Travel Scheme** can be found on the Defra website www.defra.gov.uk or **you** can call the Defra **Pet Travel Scheme (PETS)** Helpline on 0870 241 1710.
19. **You** agree to pay translation costs for any claim documentation not written in English.
20. It is both agreed and understood that in the event where **you** are looking to make a claim under **your** policy of insurance, **we** are able to discuss any and all aspects of **your** policy with the veterinary practices concerned.

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 authorities. If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount.

How we use your data

Please be aware that telephone calls may be monitored and recorded.

- **Your** details will be stored on our computer system to administer **your** policy but will not be kept longer than necessary.
- **We** can only discuss **your** personal details with **you**. If **you** would like anyone else to act on **your** behalf please let **us** know.
- **We** may use **your** details to support the development of our business by including them in customer surveys.
- **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 all principles of **UK** law.
- **We** may pass **your** information to selected third party advisors or suppliers outside for the purpose of administering **your** claim.

Cancellation Rights

If, after receiving **your** Certificates of Insurance and full policy Terms and Conditions, **you** are not happy **you** have 14 days during which **you** can cancel the policy. In this case **we** will cancel **your** policy and **you** will receive a full refund of any premiums paid. Simply call the Customer Centre on **01423 535 057** or send written confirmation to: NCI Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD

If **you** cancel outside the 14-day cancellation period and the premium becomes due **you** may not receive a refund of **your** premium.

You may cancel **your** policy at any time by calling or writing to us and **we** may give **you** a refund of the money **you** have paid for the period of cover after the cancellation date. If **we** have paid a claim **you** may not receive a full return of **your** premium.

We reserve the right to cancel this policy on 7 days' written notice if **you** do not abide by the terms of these conditions; this includes acting dishonestly or fraudulently.

SECTION E: IN THE EVENT OF A COMPLAINT

Complaints

We aim to get things right at all times. If **we** make a mistake **we** will try to put it right as soon as **we** can. **We** will acknowledge 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.

Please contact us at:

The Complaints Manager
NCI Pet Insurance
4th Floor
Clarendon House
Victoria Avenue
Harrogate
HG1 1JD

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

Disputes

If there is a disagreement about the way **we** handle a claim that is not resolved through **our** internal complaints procedure in the first instance, **we** and the Insured Person can choose a suitably qualified person to arbitrate. **We** and the Insured Person must both agree to the choice of this person in writing. Failing this **we** will ask the president of a national association relevant to the arbitration to choose a suitably qualified person. All costs of resolving the matter must be paid by the party whose argument is rejected. If the decision is not clearly made against either party, the arbitrator will decide how the costs are shared.

Financial Services Compensation Scheme

If Elite is unable to meet its 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 0207 892 7300.