

YOU MUST READ THIS POLICY DOCUMENT AND THE CERTIFICATE OF INSURANCE WHICH FORM AN INTEGRAL PART OF THE POLICY

What is NCI Pet Insurance?

NCI Pet Insurance provides cover for **veterinary treatment** costs, due to **illness** or **injury**, for the lifetime of **your pet**. However **we** do not cover any **illness** or **injury** (including **clinical sign(s)**) which happened before cover started.

Although cover is annually renewable, provided **we** offer and **you** accept **our** renewal invitation, **your pet** will benefit from continuous cover, including costs for recurring conditions. Once renewed the maximum limits for the cover selected will be available again.

It is important to note policy terms and conditions can change over time, for example in addition to any **excess amount** payable **you** will be required to contribute to the cost of treatment once **your pet** reaches 10 years of age (7 years for **selected breeds**). Additionally, premiums will increase due to factors such as **your pet's** age, claims history and our view of the future costs of providing cover.

Introduction

NCI Pet Insurance is a trading style of NCI Insurance Services Limited. NCI Pet Insurance policies are sold and administered by NCI Insurance Services Limited. Registered In England No 4741145. Registered Office: 4th Floor Clarendon House, Victoria Avenue, Harrogate, North Yorkshire HG1 1JD. NCI Insurance Services Limited is an Appointed Representative of NCI Vehicle Rescue plc, which is authorised and regulated by the Financial Conduct Authority (Firm Reference 307654).

Insurance is underwritten by Aviva Insurance Limited. Registered in Scotland No 2116. Registered Office: Pitheavlis, Perth PH2 0NH. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

These are the Terms and Conditions of **your** NCI Pet Insurance policy. **We**, Aviva Insurance Limited underwrite this policy and these Terms and Conditions give **you** details of what is covered, what is not covered and the limits and conditions that apply.

This policy is a contract between **you** and **us**.

The following elements form the contract of insurance between **you** and **us**. Please read them and keep them safe.

- The policy Terms and Conditions
- **Your** Certificate of Insurance and statement of fact
- The information contained in the 'Important Information' document which **we** provide to **you** when **you** take out or renew **your** policy,
- Any changes to this insurance policy contained in notices issued by **us** at renewal.

In return for **you** paying **your** premium, **we** will provide the cover shown on **your** Certificate of Insurance, subject to these Terms and Conditions.

Please refer to **your** Certificate of Insurance to confirm which sections of cover apply to **your pet**.

Please read Section C for conditions applying to the whole policy.

Information and changes we need to know about

You must take reasonable care to provide complete and accurate answers to the questions **we** ask when **you** take out, make changes to, and renew **your** policy. Please read any assumptions carefully and confirm if they apply to **your** circumstances.

Please tell **us** immediately if any of the information provided by **you** changes after **you** purchase **your** policy, or if there are any changes to the information set out in **your** Certificate of Insurance at **your** renewal. **You** must also tell **us** immediately if any of the following changes take place:

- **You** change address.
- **You** change **your** bank details (if **you** pay monthly premiums).
- **You** move abroad permanently.
- **You** are going to be temporarily resident outside the **UK** for more than 6 months during the period of insurance.
- **You** pet is used for security, guarding, track racing or coursing.

- **Your pet** is neutered or spayed.
- **Your pet** is micro chipped.
- **You** sell **your pet** or transfer ownership of the pet to another person.
- **Your pet** is diagnosed with a **behavioural illness**.
- **Your pet** dies.

If **you** are in any doubt, please contact **us**.

When **we** are notified of a change, **we** will tell **you** if this affects **your** insurance, for example whether **we** are able to accept the change and if so, whether the change will result in revised terms and/or premium being applied to **your** policy. If **you** do not inform **us** about a change it may affect any claim **you** make.

If the information provided by **you** is not complete and accurate **we** may:-

- Revise the premium; and/or
- Cancel **your** policy; and/or
- Refuse to pay a claim; and/or
- Exclude cover for a **pre-existing condition**.

Each renewal invitation is offered using the information **we** have at the time it was issued. **We** may revise or withdraw it if, before the date **your** renewal takes effect, any event occurs that gives rise to a claim, even if **we** are notified after **your** renewal date.

We recommend that **you** keep a record (including copies of letters) of all information supplied to **us** for future.

Your cancellation rights

You have a statutory right to cancel **your** policy within 14 days from the day of purchase or renewal of the contract or the day on which **you** receive **your** policy or renewal documentation, whichever is the later.

If **you** wish to cancel during this 14 day period, **you** will be entitled to a full refund of the premium paid, providing **you** have not made a claim. If **you** have made a claim **you** will be entitled to a refund of the premium paid in respect of the cancelled cover, less a proportionate deduction for the time **we** have provided such cover.

To cancel, please contact **01423 535 057** or write to NCI at the following address:

NCI Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD

If **you** do not exercise **your** right to cancel **your** policy, it will continue in force and **you** will be required to pay the premium.

For **your** cancellation rights outside the statutory cooling-off period, please refer to the 'Cancelling this policy' section of this policy booklet.

In the event of a claim:

To make a claim **you** may either:

- Telephone **01423 535 057** or email petclaims@ncionline.co.uk and request a claim form to be sent to **you**; or
- Download a claim form from the website at www.ncionline.co.uk/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**.

Complaints:

If **you** wish to complain about the service **we** have provided please contact **us** as shown in Section E. **We** will take steps to remedy the position, or where **you** remain dissatisfied details of the procedure to follow will be provided as shown in Section E.

Regulatory Status:

We are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. **We** are registered as: Aviva Insurance Limited. Registered in Scotland, No. 2116. Registered Office: Pitheavlis, Perth PH2 0NH and **our** firm's reference number is 202153.

You may check this information and obtain further information about how the Financial Conduct Authority protects **you** by visiting www.fca.org.uk or by contacting them on 0800 111 6768.

Telephone recording and call charges

Calls to 01- and 03- prefixed numbers are charged at national call rates (charges may vary dependent on **your** network provider) and are usually included in inclusive minute plans from landlines and mobiles.

For **our** joint protection telephone calls may be recorded and/or monitored.

Our Customer Services lines are open from 9am to 8pm Monday to Friday and 9am to 5pm on Saturdays (excluding public and bank holidays).

Our Pet Claims line is open from 8am to 6pm Monday to Friday and 10am to 6pm on Saturdays (excluding public and bank holidays).

(The Pet Emergency line is open 24/7, 365 days a year).

SECTION A:

THE MEANING OF WORDS IN THIS POLICY

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

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:
 - i. In a pool which has full Canine Hydrotherapy Association membership, or
 - ii. 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 diagnostics **you** request, which the **vet** confirms or would reasonably consider as not necessary.

9. Excess amount:

The amount shown on **your** current Certificate of Insurance that **you** will have to pay in each **policy year** for each unrelated claim before we make any payment. If the claim continues into a subsequent **policy year** **we** will deduct a further **excess amount**.

Where a claim is made under both **veterinary fees** and **complementary treatment** for the same **illness** two **excess amounts** will be deducted.

For **veterinary fees** and **complementary treatment** where **your** claim is in respect of a dog or cat which is aged 10 years or over (7 years for **selected breeds**), **you** will need to pay a contribution of 15% towards each claim in addition to **your excess amounts**. The amount of **your** contribution will be calculated after the deduction of **your excess amount**.

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:

- a) An **illness** that showed clinical signs in the first 14 days of **your pet's** first **policy year**, or
- b) 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
- c) 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. Incident(s):

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:

- 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 ongoing predisposition or susceptibility or **injury** related in any way to the original claim; or
- b) Incidents which are incurable and likely to continue for the remainder of **your pet's** life.

15. 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.

16. 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**.

17. 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**.

18. Maximum benefit:

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

19. Passport:

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

20. 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.

21. PETS certificate:

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

22. 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

23. Policy year:

The time during which **we** give cover as shown on **your** Certificate of Insurance.

24. 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
- An **injury** or **illness** that is caused by, relates to, or results from, an **injury**, incident, **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.

25. 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.

26. Treatment:

Any examination, consultation, advice, tests, x-rays, medication, surgery, hospitalisation, nursing and care provided by either a veterinary practice or **vet** recommended **complementary therapist**.

27. UK:

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

28. Vet:

Registered Veterinary Surgeon.

29. Veterinary fees:

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

30. 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**.

31. We, Us, our, insurer:

Aviva Insurance Limited, the underwriters of this policy.

32. You, your, the policyholder:

The person named on the Certificate of Insurance of Cover.

33. Your pet:

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

SECTION B:

INSURED EVENTS WE WILL COVER

This insurance provides cover set out in the sections below.

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** up to the **maximum benefit**.

Cover for any ongoing incident will continue into a new **policy year** providing you renew **your** policy and continue to pay the premiums due.

What you pay

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

What we will not pay

- More than the **maximum benefit** for the combined **treatment** costs of all incidents, 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**, including any complications that arise.
- The cost of killing and controlling fleas and the cost of general health improvers.
- The cost of any **treatment** in connection with breeding, pregnancy or giving birth.
- The cost of any food (including food prescribed by a **vet**) unless it is:
 - Used to dissolve existing bladder stones and crystals in urine, which is limited to a maximum of 40% of the cost of food 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.
- The cost of pheromone products, including DAP diffusers including Adaptil™ and Feliway® products, 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**.
- The cost of any vaccination, other than the cost of treating any complications that arise from this procedure.
- 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**,
 - The costs claimed are for the **treatment** of complications arising from this procedure.
- The cost of any **treatment** in connection with a retained testicle(s) if **your pet** was over the age of 16 weeks when cover started.
- 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.
- 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**.
- The costs of having **your pet**:
 - Put to sleep, including any veterinary consultations/visits or prescribed medications specifically needed to carry out the procedure,
 - Cremated, buried or disposed of.
- 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.
- 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.
- 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.
- Costs resulting from an **injury** or **illness** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.
- The cost of surgical items that can be used more than once.
- The cost of hydrotherapy, acupuncture, homeopathy, chiropractic manipulation, osteopathy or any other complementary or alternative **treatment**. This includes any **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.
- The cost of buying or hiring equipment or machinery or any form of housing, including cages.
- 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.
- The cost of dental **treatment** unless **your pet** had a dental examination carried out by a **vet** in the 12 months before the clinical signs of the **injury** or **illness** were first noted.
- The cost of a post-mortem examination.
- The cost of transplant surgery, including any pre- and post-operative care.
- The cost of any prosthesis, including any **veterinary treatment** needed to fit the prosthesis, other than the cost of hip and/or elbow replacement(s).
- 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 'Special conditions that apply to Section 1A - Veterinary fees and Section 1B - Complementary Treatment'. 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'.

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**.

What you pay

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

What we will not pay

1. More than the **maximum benefit** for the combined **treatment** costs of all illnesses and injuries in the **policy year**.
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**, 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** or while on **your journey**, anyone travelling with **you**.
12. 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.
13. 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.
14. 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.
15. Costs resulting from an **injury** or **illness** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.
16. The cost of buying or hiring equipment or machinery or any form of housing, including cages.
17. The cost of bathing, grooming or de-matting **your pet** unless:
 - a) **You** have taken all reasonable steps to maintain **your pet's** health, and
 - b) 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.
18. 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.

Special conditions that apply to Section 1A - Veterinary fees and Section 1B - Complementary Treatment

1. The maximum amount **we** will pay for the cost of **treatment** or **complementary treatment** is the **maximum benefit** that applies on the date the **treatment** is carried out.
2. If the claim includes medication, these costs will be subject to the **maximum benefit** that applies on the date the medication will be used.
3. 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.
4. If **we** receive a request to pay the claim settlement directly to a veterinary practice, **we** reserve the right to decline this request.
5. If the **veterinary fees** or the fees charged for **complementary treatment** 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.

6. 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.
7. **We** may refer **your pet's** case history to another **vet** in **your** local area that **we** choose and pay for. If **we** request that **you** do so, **you** must arrange for **your pet** to be examined by this **vet**.
8. 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.
9. 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.
10. 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.

How 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

It is important **you** register **your** claim as soon as possible after the **treatment** date.

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.

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.

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.

Please note **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.

Please note **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:

- The cost of advertising up to the **maximum benefit** and no more than 10% of the **maximum benefit** towards sundries to make **your** own posters and advertising materials, and
- The reward which **we** have agreed to and what **you** have offered and paid to get **your pet** back, up to the **maximum benefit**.

If **your pet** is stolen or goes missing during **your journey**, **we** will also pay the cost of **your** accommodation and additional travel costs, 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. Any expense incurred without **our** prior consent.
2. Any reward that **we** have not agreed before **you** advertised it.
3. More than £250 for the reward costs to recover **your pet** if it is lost or stolen.
4. Any reward not supported by a signed receipt giving the full name and address of the person who found **your pet**.
5. Any reward paid to a member of **your family**, any person living with **you** or employed by **you**, and/ or any person travelling with **you** during **your journey**
6. Any reward paid to the person who was caring for **your pet** when it was lost or stolen.
7. If **your pet** is stolen or goes missing during **your journey**:
 - a) More than 7 days' accommodation costs or costs over the **maximum benefit**.
 - 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.

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

Special conditions that apply to Section 4 – Theft or Straying and Section 5 - Advertising and Reward

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) 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

- This section only applies to dogs.
- Cover under this section applies in the **UK** only.
- In this section, '**you**' and '**your**' mean **you** or any person looking after or handling **your pet** with **your** permission.

What you pay

The **excess amount** shown on **your** certificate of insurance.

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:

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

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:
 - a) Resulting from an incident which involves **your** profession, occupation or business.
 - b) Resulting from an incident which involves the profession, occupation or business of anyone who is employed by **you** or anyone who works for **you** in any way.
 - c) If **you** are legally responsible only because of a contract **you** have entered into.
 - d) If the person who is killed, injured or falls ill, lives with **you**, is a member of **your family** or is employed by **you**.
 - e) If the property damaged belongs to **you**, any person who lives with **you**, a member of **your family** or a person who is employed by **you**.
 - f) If **you**, a member of **your family** or any person who lives with **you** or is employed by **you** is responsible for, or looking after, the property that is damaged.
 - g) Resulting 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**.
 - h) If **you** are deemed responsible under the laws of any country, other than members of the European Union.
 - i) 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**.
 - j) Resulting from an incident that happens where **you** work.
 - k) 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.
 - l) If **you** are found not to be liable for the incident and/or recover costs and expenses from the opponent.
 - m) Resulting from an incident that happens outside the **UK**.
 - n) If **your pet** is with someone being paid to look after them.
4. Costs resulting from any incident specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.

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 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.
3. **You** must allow **us** to take charge of **your** claim and allow **us** to prosecute in **your** name for **our** benefit.
4. **You** must immediately send **us** any writ, summons or legal documents **you** receive and **you** must never send a reply to any of 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.

Please note **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 £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.

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 or cattery, and
2. An invoice from the kennel or cattery, or written confirmation from the person looking after **your pet**.

Please note **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 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**, 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 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 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.

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.

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

Section 9 - Emergency Repatriation

Cover under this section applies to **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 additional accommodation for **you** to stay after **your** scheduled date of travel **home** until **your pet** is well enough to travel and additional travel costs to get **home** if **you** are unable to use **your** return ticket, 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 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.

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.

Please note **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:
 - a) The cost to keep **your pet** in quarantine,
 - b) The cost of getting a duplicate **pets certificate, certificate for treatment against parasites** or pet **passport**,
 - c) The cost of temporary accommodation while getting the duplicate **pets certificate, certificate for treatment against parasites** or Pet **passport**, and

Any additional travel costs to get 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 and you are unable to use your return ticket.

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.

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
5. Where applicable, the police or operator's report.

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

SECTION C:

GENERAL CONDITIONS WHICH APPLY TO THE WHOLE POLICY

The following conditions apply to all the whole policy in addition to the conditions specified under each relevant Section of Cover.

1. If **treatment** for any incident is ongoing at the renewal date, cover for that incident will continue into the new **policy year** providing **you** renew the policy and continue to pay the premium when due.
2. In the event that **you** choose not to renew **your pet** insurance policy, all cover and benefits will cease on the date **your** policy lapsed and no claim will be paid in respect of **treatment** after this date.
3. Throughout the **policy year** **you** must take all reasonable steps to maintain **your pet's** health and to prevent **injury, illness** and loss.
4. **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.
5. **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.
6. **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**.
7. **You** and **your pet** must live in **UK**.
8. In order for **us** to be able to assess **your** claim, **we** reserve the right to request additional relevant information or records from **your** current or any other **vet** that has treated **your pet**. **We** will only ask for information which is relevant to the details and circumstances of the claim and previous medical history. If the **vet** charges **you** for this information **you** will have to pay.
9. 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.
10. 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.
11. **Your pet** is only covered under this policy if **you** pay the premium. When **we** settle **your** claim, **we** will deduct any unpaid premiums from the claim or any other amount due to **us**.
12. **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.
13. When **we** offer further periods of insurance **we** may change the premium and the policy Terms and Conditions.
14. **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.
15. When **you** claim **you** agree to give **us** any information **we** may reasonably ask for in support of **your** claim.
16. The law of England and Wales will apply to this contract unless:
 - a) **You** and the **insurer** agree otherwise; or
 - b) At the date of the contract **you** are a resident of Scotland, Northern Ireland, Channel Island or the Isle of Man, in which case (in the absence of agreement to the contrary) the law of that country will apply.
17. The language of the policy and all communications relating to it will be in English, unless **we** otherwise agree in writing.
18. 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 (PETS)** can be found on the Defra website www.defra.gov.uk or **you** can call the Defra **Pet Travel Scheme (PETS)** Helpline on 0370 241 1710.
19. **You** agree to pay translation costs for any claim documentation not written in English.

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 cancel the policy immediately and backdate the cancellation to the date of the fraud or when **you** provided **us** with incomplete or inaccurate information, which may result in **your** policy being cancelled from the date **you** originally took it out. If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount.

Monthly Payments

If **you** are paying the premium using a monthly credit facility, **you** must make the regular monthly payments as required in the credit agreement. If **you** do not do this **we** may cancel this insurance as set in the 'Cancelling this policy' section of this policy booklet.

Cancelling this policy

Your right to cancel

Following the expiry of **your** 14 day statutory cooling off period **you** continue to have the right to cancel **your** policy at any time during its term.

If **you** do so, **you** will be entitled to a refund of the premium paid in respect of the cancelled cover, less a proportionate deduction for the time **we** have provided such cover.

To cancel please contact **01423 535 057** or write to **us** at the following address:

NCI Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate, HG1 1JD

Our right to cancel

We (or any agent **we** appoint and who acts with **our** specific authority) may cancel this policy where there is a valid reason for doing so, by sending at least 7 days' written notice to **your** last known postal and/or e-mail address setting out the reason for cancellation.

Valid reasons include but are not limited to the following:

- Non-payment of premium (including non-payment of instalments under a monthly credit facility). If premiums are not paid when due, **we** will initially contact **you**, advising that **your** policy premiums have fallen into arrears. **We** will then write to **you**, requesting payment by a specific date. If **we** receive payment by the date set out in the letter **we** will take no further action. If **we** do not receive payment by this date **we** will cancel the policy from the cancellation date shown on the letter. If **you** miss an instalment payment, **you** must pay the outstanding amount within 14 days of the date detailed on the letter. If **we** do not receive **your** payment within 14 days from this date, **your** insurance will automatically stop and **we** will make no further claim payments.
- Where **we** reasonably suspect fraud.
- Where **you** have not taken reasonable care to provide complete and accurate answers to the questions **we** ask. See the 'Information and changes **we** need to know about' section in this policy booklet.

If **we** cancel the policy under this section, **you** will be entitled to a refund of the premium paid in respect of the cancelled cover, less a proportionate deduction for the time **we** have provided such cover, unless the reason for cancellation is fraud and/or **we** are legally entitled to keep the premium under the Consumer Insurance (Disclosure and Representations) Act 2012.

Important Note: The Consumer Insurance (Disclosure and Representations) Act 2012 sets out situations where failure by a policyholder to provide complete and accurate information requested by an **insurer** allows the **insurer** to cancel the policy, sometimes back to its start date and to keep any premiums paid.

Where **our** investigations provide evidence of fraud or a serious non-disclosure may cancel the policy immediately and backdate the cancellation to the date of the fraud or when **you** provided **us** with incomplete or inaccurate information, which may result in **your** policy being cancelled from the date **you** originally took it out.

If **your** policy is cancelled or comes to an end for any other reason all cover for **your** pet will stop on the date the policy is cancelled/ends and no further claims will be paid.

Customers with disabilities

This policy and other associated documentation are also available in large print, audio and Braille. If **you** require any of these formats please contact Customer service on **01423 535 057** (between 9am and 8pm weekdays and 9am and 5pm

on Saturdays, excluding public and bank holidays) or alternatively write to: NCI Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate, HG1 1JD.

SECTION D: GENERAL EXCLUSIONS

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** where before the start 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, **elective treatment or diagnostics**, routine examinations, vaccination, spaying, castration, pregnancy or giving birth.
3. Any pet at the policy inception date which is less than 6 weeks old, or aged 9 years or more (7 years or more for **selected breeds**).
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 **UK** 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. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
11. Any amount resulting from a disease transmitted from animals to humans.
12. Any amount **you** recover from any other insurance or amounts that can be recovered from anywhere else.
13. 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:

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

SECTION E: IN THE EVENT OF A COMPLAINT

Complaints procedure

Our promise of service

Our goal is to give excellent service to all customers but **we** realise that things do go wrong occasionally. **We** take all complaints very seriously and aim to resolve all **our** customer's problems promptly. To ensure the kind of service **you** expect **we** welcome **your** feedback. **We** will record and analyse **your** comments to make sure **we** continually improve the service **we** offer.

What will happen if **you** complain?

- **We** will acknowledge **your** complaint promptly.
- **We** aim to resolve all complaints as quickly as possible.

Most customers' concerns can be resolved quickly but occasionally more detailed enquiries are needed. If this is likely, **we** will contact **you** with an update within 10 working days of receipt and give **you** an expected date of response.

What to do if you are unhappy

If **you** are unhappy with any aspect of the handling of **your** insurance **we** would encourage **you** to seek resolution. **You** should first phone Customer Services on **01423 535 057**.

Or write to:

The Complaints Manager

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

Email: complaints@ncionline.co.uk

If **you** are unhappy with the outcome of **your** complaint **you** may refer the matter to the Financial Ombudsman Service at:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: 0800 023 4567 (free from landlines) or 0300 123 9123

Or simply log on to their website at www.financial-ombudsman.org.uk. Whilst **we** are bound by the decision of the Financial Ombudsman Service, **you** are not. Following the complaints procedure does not affect **your** right to take legal action.

Financial Services Compensation Scheme

We are members of the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from this scheme if **we** cannot meet **our** obligations, depending on the type of insurance and the circumstances of **your** claim.

Further information about the is available from the FSCS website www.fscs.org.uk, or write to the Financial Services Compensation Scheme, 10th Floor, Beaufort House, 15 St Botolph Street, London, EC3A 7QU