

# British Pet Insurance

Services



## Your Policy Wording for your Dog or Cat

### Breeder 6 Weeks Free Introductory Cover

**This booklet contains your Policy Terms and Conditions.**

Please read in conjunction with your Certificate of Insurance and Product Information Document (IPID) to understand the cover for your pet.

Version 2  
**Effective from January 2023**



## Hello and thank you for choosing **British Pet Insurance Services for your pet**

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British Pet Insurance Services is a trading name of Petcover EU Limited. We specialise in pet insurance and offer cover for pets, to ensure we really understand and cater for your needs.

British Pet Insurance Services was formed by and has brought together people with many years' experience in pet insurance to offer you a great insurance cover and has a team of people who love pets offering you the customer service you deserve.

Having a pet is rewarding, from the love they provide when being there to greet you to the challenges of the sleepless nights when they are not 100%. We are here to support you and your pet throughout all of this, whether it be with your insurance cover, claiming or just a little advice along the way.

We understand how stressful it can be when you need to make a claim. We aim to make claiming a smooth, quick and easy process so you can concentrate on your pet, so if you need anything at all please let us know.

This booklet contains the cover your policy provides. If there is anything you don't understand please let us know, or if you have any questions, problems or any feedback please contact us.

This Insurance is underwritten by Arch Insurance (UK) Limited.

This Insurance is issued by Petcover EU Limited trading as British Pet Insurance in accordance with the authorisation granted to them under the Binding Authority Agreement with Arch Insurance (UK) Limited.

Petcover EU Limited trading as British Pet Insurance Services is authorised and regulated by the Financial Conduct Authority (FCA) under reference number: 747757. Registered Office: 75 Western Road, Southall, England, UB2 5HQ. Trading Office: 4 Bridge Road Business Park, Haywards Heath, West Sussex, RH16 1TX.

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# Policy Terms and Conditions

British Pet Insurance Services does not provide advice or any personal recommendation about the insurance products offered.

## Demands and Needs – who is this product suitable for?

This product meets the demands and needs of a pet owner who wants introductory cover for six (6) weeks for the costs of veterinary treatment.

## Definitions

If **We** explain what a word means, that word has the same meaning wherever it appears in the **Policy**. For ease, **You** will see that these words appear in bold throughout.

<b>Accident</b>	means a sudden, unexpected and specific event which occurs at an identifiable time and place. All <b>Accidents</b> arising from one event or one original cause will be treated by <b>Us</b> as one <b>Accident</b> . For the sake of clarity, an <b>Accident</b> does include physical damage or trauma of a gradual nature which happens over time. This includes, but is not limited to, conditions such as luxating patella; a rupture or strain of one or both cruciate ligaments; degenerative joint disease; hip dysplasia and hyperextending hocks; Juvenile Pubis Symphysiodesis (JPS).
<b>Alternative or Complementary Treatment</b>	means the cost of any examination, consultation, advice, test and legally prescribed medication for the following procedures where they treat an <b>Illness</b> or <b>Injury</b> . This includes any <b>Veterinary Treatment</b> specifically needed to carry out the procedure: <ul style="list-style-type: none"><li>• Acupuncture or homeopathy carried out by or herbal medicine prescribed by member of a veterinary practice.</li><li>• Chiropractic manipulation carried out by a member of a veterinary practice, providing the member is a qualified animal chiropractor.</li><li>• Hydrotherapy carried out by a member of a veterinary practice providing the member is a qualified animal hydrotherapist.</li><li>• Osteopathy carried out by a member of a veterinary practice providing the member is a qualified animal osteopath.</li><li>• Physiotherapy carried out by a member of a veterinary practice providing the member is a qualified animal physiotherapist.</li><li>• <b>Treatment of a Behavioural Illness</b> carried out by a member of a veterinary practice providing the member is a certified clinical animal behaviourist.</li></ul>
<b>Behavioural Illness</b>	means any change to <b>Your Pet's</b> normal behaviour, resulting from a mental or emotional disorder diagnosed by a <b>Vet</b> .
<b>Bilateral Condition</b>	means any <b>Condition</b> affecting body parts of which the pet has at least two, including, but not limited to eyes, ears, patella's (knees), cruciate ligaments. When applying an exclusion, <b>Bilateral Conditions</b> are considered the one <b>Condition</b> .
<b>Breeder</b>	means a person who practices the vocation of breeding selected specimens of the same breed, either as a hobby or for profit, and is the <b>Breeder</b> of <b>Your Pet</b> named on the <b>Certificate of Insurance</b> .
<b>Certificate of Insurance</b>	means the current <b>Certificate of Insurance</b> <b>We</b> issue containing details of the cover provided under the <b>Policy</b> , including any exclusions and other specific insurance details that <b>We</b> have applied to <b>Your</b> cover.

<b>Clinical Sign(s)</b>	means a change(s) in <b>Your Pet's</b> normal healthy state, its bodily functions or behaviour.
<b>Condition</b>	means any <b>Condition</b> that causes discomfort, dysfunction, distress, including <b>Injuries</b> , <b>Illness</b> , disabilities, disorders, <b>Clinical Sign(s)</b> , syndromes, infections, isolated symptoms, deviant behaviour, and atypical variations of structure and function and/or death to the pet afflicted.
<b>Elective Treatment</b>	means a <b>Treatment</b> that is, but not limited to, de-sexing, spaying or castration; micro-chipping; grooming and de-matting, cosmetic or aesthetic procedures or surgery, or elective surgery including but not limited to dew-claw removal, prescription diet foods, and any <b>Treatment</b> not related to an <b>Injury</b> , <b>Illness</b> , or trauma. Elective surgery or <b>Treatment</b> that is beneficial to the pet but is not essential for <b>Your Pet's</b> survival or does not form part of a <b>Treatment</b> for an <b>Injury</b> or <b>Illness</b> , or any <b>Treatment</b> , diagnostic or procedure <b>You</b> request, which the <b>Vet</b> confirms is not necessary to treat an <b>Injury</b> or <b>Illness</b> .
<b>Excess</b>	means the amount(s) shown on <b>Your Certificate of Insurance</b> that <b>You</b> must pay for each unrelated <b>Condition</b> claim made under <b>Your Policy</b> .
<b>Family</b>	means <b>Your Immediate Family</b> and, grandparents, brothers, sisters, grandsons, and/or granddaughters including <b>Family</b> of step relationships.
<b>Illness(es)</b>	means any change(s) to a normal healthy state, sickness, disease, defects and abnormalities, including defects and abnormalities <b>Your Pet</b> was born with or were passed on by its parents.
<b>Immediate Family</b>	means spouse, civil partner, life partner, partner, parents, sons and daughters, including <b>Family</b> of step relationships.
<b>Injury / Injuries / Injured</b>	means a physical <b>Injury</b> or trauma caused immediately, solely and directly from an <b>Accident</b> . This does not include any physical <b>Injury</b> or trauma that happens over a period of time or is of a gradual nature.
<b>Insurers</b>	means Arch Insurance (UK) Limited, registered office: 5th Floor 60 Great Tower Street, London, England, EC3R 5AZ. Arch Insurance (UK) Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, their Financial Services register number is 229887.
<b>Market Value</b>	means the price generally paid for an animal of the same age, breed, pedigree, sex and breeding ability at the time <b>You</b> took ownership of <b>Your Pet</b> as determined by <b>Us</b> .
<b>Maximum Benefit(s)</b>	means the most <b>We</b> will pay for the relevant level of cover <b>You</b> have chosen during the <b>Period of Insurance</b> as set out in the <b>Certificate of Insurance</b> .
<b>Our Vet</b>	means any <b>Vet</b> appointed or engaged by <b>Us</b> to carry out <b>Treatment</b> to <b>Your Pet</b> or discuss <b>Your Pet's Treatment</b> with <b>Your Vet</b> .
<b>Period of Insurance</b>	means the time during which <b>We</b> give cover as shown on <b>Your Certificate of Insurance</b> . This is normally six (6) weeks.
<b>Personal Circumstances</b>	means circumstances about <b>You</b> , <b>Your Family</b> or <b>Your Pet</b> which <b>You</b> have limited or no control over. Examples of <b>Personal Circumstances</b> are (but not limited to) a lack of transport, <b>Your Pet's</b> size or behaviour, <b>Your</b> home environment, <b>You</b> or <b>Your Family's</b> working hours, <b>Your</b> child-care arrangements, <b>Your Family's</b> other commitments etc.
<b>Policy</b>	means this document and the <b>Certificate of Insurance</b> and any other documents <b>We</b> issue to <b>You</b> which are expressed to form part of the <b>Policy</b> terms and conditions, which set out the cover <b>We</b> provide during the <b>Period of Insurance</b> .

<b>Pre-Existing Condition(s)</b>	means any <b>Condition(s)</b> or symptoms or signs of that <b>Condition</b> occurring or existing in any form prior to the <b>Policy</b> commencement date, or any <b>Injury</b> or <b>Illness</b> or symptoms or signs of that <b>Injury</b> or <b>Illness</b> occurring or existing in any form during the <b>Waiting Period</b> . When referring to <b>Pre-Existing Conditions</b> , and <b>Conditions</b> affecting a part of <b>Your Pet's</b> body of which it has two, will be deemed to be a <b>Bilateral Condition</b> and both will be excluded from cover.
<b>Routine or Preventative Treatment</b>	means care or <b>Treatment</b> such as check-ups and procedures that are designed to prevent future <b>Illnesses</b> from occurring rather than treating existing <b>Illnesses</b> . These include, but are not limited to annual physical examinations and check-ups, vaccinations, worm prevention medication, flea and other internal/external parasite prevention, nail/claw clipping, maintaining a healthy diet, removal of misaligned or retained deciduous teeth.
<b>Treatment</b>	means <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b> .
<b>UK</b>	means the United Kingdom, the Isle of Man and the Channel Islands.
<b>Vet(s)</b>	means a veterinarian, specialist veterinarian, veterinary practice, clinic, hospital, centre including referral hospitals, who/which in the <b>UK</b> is registered with the RCVS (Royal College of Veterinary Surgeons).
<b>Veterinary Fees</b>	means the amount <b>Vets</b> in general or referral practices usually charge.
<b>Veterinary Treatment</b>	means the cost of the following when required to treat an <b>Illness</b> or <b>Injury</b> : <ul style="list-style-type: none"> <li>• Any examination, consultation, advice, tests, X-rays, diagnostic procedure, surgery and nursing carried out by a <b>Vet</b>, a veterinary nurse or another member of a veterinary practice under the supervision of a <b>Vet</b>, and</li> <li>• any medication legally prescribed by a <b>Vet</b>.</li> </ul>
<b>Waiting Period</b>	means a period of time starting from the commencement date of the <b>Policy</b> , during which an <b>Injury</b> or <b>Illness</b> , which first occurs or shows <b>Clinical Sign(s)</b> will be excluded from cover unless otherwise stated on <b>Your Certificate of Insurance</b> . <b>Your Policy</b> has a <b>Waiting Period</b> of three (3) days for an <b>Injury</b> and seven (7) days for an <b>Illness</b> . Cover for an <b>Injury</b> will commence at 00.01 on the fourth (4th) day of cover. Cover for an <b>Illness</b> will commence at 00.01 on the eighth (8th) day of cover.
<b>We, Us, Our</b>	means British Pet Insurance Services, a trading name of Petcover EU Limited acting on behalf of <b>Insurers</b> . Petcover EU Limited is registered in England and Wales under number 10001319, and is authorised and regulated by the Financial Conduct Authority under reference number 747757.
<b>You, Your</b>	means the person(s) named as the insured on the <b>Certificate of Insurance</b> as the new owner, whose details were given to <b>Us</b> by the <b>Breeder</b> of <b>Your Pet</b> during the phone call or on the website application, to arrange insurance for <b>Your Pet</b> .
<b>Your Pet</b>	means the puppy or kitten named on the <b>Certificate of Insurance</b> , whose name, date of birth, breed and sex were given to <b>Us</b> by the <b>Breeder</b> when arranging the insurance.

# General Conditions

1. Throughout the **Period of Insurance** **You** must take all reasonable steps to maintain **Your Pet's** health and to prevent **Injury, Illness** and loss.
  - **You** must provide **Routine or Preventative Treatment** normally recommended by a **Vet** to prevent **Illness or Injury**. If there is a disagreement between **You** and **Us** as to what reasonable steps are, the details will be referred to an independent national welfare body or an independent **Vet** mutually agreed upon.
  - **You** must arrange and pay for **Your Pet** to have a yearly dental examination and to receive any oral **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. If **You** do not comply with this obligation then any claims which relate to dental **We** may refuse or reduce the amount **We** pay under the claim.
  - **You** must keep **Your Pet** vaccinated against the following:  
Dogs - Distemper, hepatitis, parvovirus, kennel cough and leptospirosis (in areas where it is prevalent and **Vets** recommend vaccination) and any other vaccination recommended to **You** by a **Vet**.  
Cats - Feline infectious enteritis, feline leukaemia and cat flu and any other vaccination recommended to **You** by a **Vet**.  
If **You** do not keep **Your Pet** vaccinated, **We** may refuse or reduce the amount **We** pay under the claim that result from any of the above **Illnesses**.
  - **You** must arrange for a **Vet** to examine and treat **Your Pet** as soon as possible after it shows **Clinical Sign(s)** of an **Injury or Illness**. **You** must follow the advice and recommendations of the treating **Vet**; so as not to prolong or aggravate the **Illness or Injury**. If **You** do not follow the **Vet's** advice **We** may refuse or reduce the amount **We** pay relating to that **Injury or Illness**. And if **We** decide, **You** must also take **Your Pet** to **Our Vet**.
2. If there is any other insurance under which **You** are entitled to make a claim **You** must report the incident to that insurance company and tell **Us** their name and address and **Your Policy** and claim number with them. To the extent permitted by law, **We** will only pay **Our** share of the claim.  
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.
3. If **You** have provided false information or make a false or exaggerated claim, or any claim involving **Your** dishonesty, **We** have the right to cancel the **Policy** following which **We** will not make any further payments.
4. If **You** submit a fraudulent claim, or solicit **Your Vet** to behave in a fraudulent manner or persuade them to falsify or change information regarding a claim, then the claim may be denied and **We** may cancel the **Policy**. **We** may also be entitled to reclaim any payments already made to **You** in respect to such claims.
5. **You** can cancel **Your Policy** at any time by contacting **Us**. Please telephone **Us** on 01444 708840 between the hours of Monday to Friday from 9am to 5pm or send written confirmation by email to [info@petcover.uk.com](mailto:info@petcover.uk.com) or by post to British Pet Insurance Services, 4 Bridge Road Business Park, Haywards Heath, West Sussex, RH16 1TX.
6. You agree that any **Vet** or therapist has **Your** permission to release any information **We** ask for about **Your Pet**. If the **Vet** or therapist makes a charge for this, **You** must pay the charge.
7. If **We** agree for a claim payment 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 **Policy** covers, what **We** will not pay for, how the amount **We** pay is calculated and if the premiums are paid to date.

8. When **We** offer further **Period(s) of Insurance**, **We** may change the premium, **Excesses** and the **Policy Terms and Conditions**, and place exclusions because of **Your Pet's** claims and veterinary history.
9. **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.
10. When **You** make a claim **You** agree to give **Us** any information **We** may reasonably ask for. If **You** incur any charge for this, **You** must pay the charge.
11. If **We** consider the **Veterinary Treatment** or **Alternative or Complementary Treatment** **Your Pet** receives may not be required, may be excessive, or for an excessive cost, when compared with the **Treatment** normally recommended to treat the same **Illness** or **Injury** by general or referral practices, **We** reserve the right to request a second opinion from **Our Vet**. If **Our Vet** does not agree that the **Veterinary Treatment** or **Alternative or Complementary Treatment** provided is reasonably required, **We** may decide to pay only the cost of the **Veterinary Treatment** or **Alternative or Complementary Treatment** that was necessary to treat the **Injury** or **Illness**, as advised by **Our Vet** from whom **We** have requested the second opinion.
12. This insurance contract is subject to the laws of England and Wales and the exclusive jurisdiction of the courts of England and Wales. Unless **We** agree otherwise, the language of the Policy and all communications relating to it will be in English.
13. No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

## General Exclusions

We will not pay any benefit under the **Policy** for any costs or expenses incurred by **You** that are caused by, arise out of, or are in any way related to or connected with:

1. A **Condition, Injury or Illness** specifically excluded on **Your Certificate of Insurance**.
2. Any pet that is less than eight (8) weeks old or more than six (36) weeks old at the commencement of cover.
3. Dogs used for security, guarding, track racing or coursing.
4. Any breed of dog that is banned by any **UK** Government, Public or Local Authority or any dog that is, or is crossed with, a Pit Bull Terrier, Dogo Argentino, Perro De Presa Canario, Dogo Canario, Dingo, Japanese Tosa, Fila Brasileiro, Czechoslovakian Wolfdog, Saarloos Wolfhound / Wolfdog or any wolf hybrid.
5. Any dog declared as a dangerous dog by a Government authority.
6. Any dog that must be registered under the relevant legislation dealing with dangerous dogs or any further amendments to such legislation, or the Dangerous Dog Act 1991, the Dangerous Dog (Amendment) Act 1997, or any further amendments to this Act.
7. **Your Pet** being confiscated or destroyed by any Government or Public or Local Authority or any person or body having the jurisdiction to do so.
8. Any Government or Public or Local Authority or any person or body having the jurisdiction to do so, having put restrictions on **Your Pet**.
9. **You** breaking the **UK** laws or regulations of England and Wales, including those relating to animal health or importation regulations.
10. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
11. An act of force or violence for political, religious or ideological reasons, war, acts of terrorism, riot, revolution or any similar event, including any chemical or biological terrorism.
12. Cost of treating any **Injury or Illness** or other bodily **Injury or Illness** caused by, arising out of, or in any way connected with a malicious act, deliberate **Injury or Illness** or gross negligence caused by **You** or a member of **Your Immediate Family** or anyone living with **You** or acting with **Your** express or implied consent.
13. Any **Illness** that **Your Pet** contracted while outside the **UK**, that it would not normally have contracted in the **UK**.
14. A disease transmitted from animals to humans.
15. Any pandemic disease that causes widespread **Illness**, death or destruction affecting dogs and cats.
16. Any dog not being vaccinated against distemper, hepatitis, kennel cough, leptospirosis (in areas where it is prevalent and **Vets** recommend vaccination) and parvovirus. Any cat not being vaccinated against feline infectious enteritis, feline leukaemia and cat flu, or other disease that there is a known vaccine and **Vets** recommend vaccination.
17. **Your** failure to take all reasonable precautions to protect **Your Pet** from or by aggravating or prolonging an **Injury or Illness**.
18. Any costs from outside of the **UK**.
19. Any amount if **Your Pet** lives permanently outside of the **UK**.

# Veterinary Fees & Alternative or Complementary Treatment Cover

## What We will pay for Veterinary Fee

The cost of **Veterinary Fees** incurred by **You** during the **Period of Insurance** for the **Veterinary Treatment** Your Pet has received to treat an **Injury** and/or **Illness**, up to the **Maximum Benefit**.

## What You pay for Veterinary Fees

For each **Illness** or **Injury** that is treated during the **Period of Insurance** and is not related to any other **Illness** or **Injury** treated during the same **Period of Insurance**, **You** must pay the **Excess** shown on **Your Certificate of Insurance**.

## What We will pay for Alternative or Complementary Treatment

When referred and endorsed by **Your Vet**, **Alternative or Complementary Treatment**, **Your Pet** has received during the **Period of Insurance** to treat an **Injury** and/or **Illness**, up to the **Maximum Benefit**.

## What You pay for Alternative or Complementary Treatment

For each **Illness** or **Injury** that is treated during the **Period of Insurance** and is not related to any other **Illness** or **Injury** treated during the same **Period of Insurance**, **You** must pay the **Excess** shown on **Your Certificate of Insurance**.

Separate **Excesses** apply for **Veterinary Fees** and **Alternative or Complementary Treatment** which means if **You** claim under both benefits for the same **Injury** or **Illness**, **You** will pay an **Excess** for each benefit.

## What We will not pay for Veterinary Fees & Alternative or Complementary Treatment

1. More than the **Maximum Benefit**.
2. To the extent permitted by law, costs of any **Treatment** for:
  - An **Injury** that happened or an **Illness** that first showed **Clinical Signs** before **Your Pet's** cover started (**Pre-Existing Condition**), or
  - an **Injury** or **Illness** that is the same as, or has the same diagnosis or **Clinical Sign(s)** as an **Injury**, **Illness** or **Clinical Sign(s)** **Your Pet** had before its cover started (**Pre-Existing Condition**); or,
  - an **Injury** or **Illness** that is caused by, relates to or results from an **Injury**, **Illness** or **Clinical Signs** **Your Pet** had before its cover started (**Pre-Existing Condition**), no matter where the **Injury**, **Illness** or **Clinical Sign(s)** occurred or happened in, or on **Your Pet's** body.
3. To the extent permitted by law, for the costs of any **Treatment** of:
  - An **Injury** that showed **Clinical Sign(s)** within three (3) days or an **Illness** that first showed **Clinical Sign(s)** within seven (7) days of **Your Pet's** cover starting (**Waiting Period**), or
  - an **Injury** which is the same as, or has the same diagnosis or **Clinical Sign(s)** as an **Injury** that first showed **Clinical Sign(s)** within three (3) days of **Your Pet's** cover starting (**Waiting Period**), or
  - an **Illness** which is the same as, or has the same diagnosis or **Clinical Sign(s)** as an **Illness** that first showed **Clinical Sign(s)** within seven (7) days of **Your Pet's** cover starting (**Waiting Period**), or
  - an **Injury** or **Illness** that is caused by, relates to or results from a **Clinical Sign(s)** that first occurred, or an **Injury** that first showed **Clinical Sign(s)** within three (3) days of **Your Pet's** cover starting (**Waiting Period**), no matter where the **Injury**, **Illness** or **Clinical Sign(s)** occurred or happened in, or on **Your Pet's** body.
  - an **Injury** or **Illness** that is caused by, relates to or results from a **Clinical Sign(s)** that first occurred, or an **Illness** that first showed **Clinical Sign(s)** within seven (7) days of **Your Pet's** cover starting (**Waiting Period**), no matter where the **Injury**, **Illness** or **Clinical Sign(s)** occurred or happened in, or on **Your Pet's** body.

4. For the cost of any **Treatment** to prevent an **Injury or Illness (Routine or Preventative Treatment)**.
5. The cost of any **Treatment**, or complications arising from **Treatment**, that **You** choose to have carried out that is not directly related to an **Injury or Illness**, including cosmetic dentistry (**Elective Treatment**).
6. The cost of periodontics, dental check-ups, Comprehensive Oral Health Assessment and Treatment (COHAT), dental x-rays, dental prophylaxis, dental scale and polish or teeth cleaning, gingival curettes, gingival hyperplasia, removal of plaque or calculus or periodontal surgery.
7. The cost of prosthodontics, the removal or repair of misaligned or retained deciduous teeth, orthodontic appliances, crowns, caps or splints, luxation, horizontal bone loss, impacted teeth or embedded teeth.
8. Any cost relating to orthodontics, malocclusion, wry bite, supernumerary teeth, reverse scissor bite, posterior cross bite, anterior crossbite, overbite, brachygnathia, open bite or level bite.
9. Any cost of **Treatment** for dental and/or dental disease, if an annual dental examination has not been undertaken within the twelve (12) months preceding the problem requiring **Treatment** a **Vet** recommended, resulting from the examination that had not been carried out. Evidence will need to be provided to **Us** if **Your Vet** has carried out an annual dental examination.
10. The cost of nasal fold surgery, skin fold surgery, stenotic nares and soft palate resections, enlarged tongue (macroglossia), everted laryngeal saccules, Brachycephalic Gastrointestinal Syndrome (BGS) and Brachycephalic Airway Obstruction (BOAS).
11. For the cost of killing and controlling fleas, general health improvers and any **Treatment** in connection with breeding, pregnancy, giving birth or false pregnancy.
12. For the cost of any vaccinations, spaying and castration other than the cost of treating any complications arising from these procedures.
13. For the cost of treating any **Injury or Illness** deliberately caused by **You** or anyone living with **You**.
14. For the costs of having **Your Pet** put to sleep, including any veterinary consultation/visit or prescribed medication specifically needed to carry out this procedure; or cremated, buried or otherwise disposed of.
15. The cost of a house call unless the **Vet** or therapist confirms that **Your Pet** is suffering from a serious **Injury or Illness** and that moving **Your Pet** would either endanger its life or significantly worsen the serious **Injury/Illness**, regardless of **Your Personal Circumstances**.
16. For the extra costs for treating **Your Pet** outside usual surgery hours, unless the **Vet** or therapist confirms an emergency consultation is essential, regardless of **Your Personal Circumstances**.
17. For the cost of hospitalisation and any associated **Treatment**, unless the **Vet** or therapist confirms **Your Pet** must be hospitalised for essential **Treatment**, regardless of **Your Personal Circumstances**.
18. For the cost of any surgical items that can be used more than once.
19. For the cost of buying or hiring equipment or machinery or any form of housing, including cages.
20. For the cost of hiring a swimming pool, hydrotherapy pool or any other pool or hydrotherapy equipment.
21. The cost of, bathing, grooming, clipping or de-matting **Your Pet**, other than bathing when a substance is being used which, according to manufacturer's guidelines, can only be administered by a member of a veterinary practice, regardless of **Your Personal Circumstances**.
22. For any costs for treating an **Illness** or **Injury** after the last day of the **Period of Insurance**, unless a further **Period of Insurance** has been entered into by **You** and **Us** in which case the costs may be paid under the new **Policy** entered into with **You**.
23. For the cost of a post mortem examination or voluntary euthanasia.
24. For the cost of any transplant surgery, or stem cell transplants, including any pre and post- operative care.
25. For the cost of any **Treatment** outside of the **UK**.

26. The cost of the following procedures; experimental **Treatments**, or therapies; prosthetics or orthopaedic supports or braces, open heart surgeries, cancer vaccinations, therapeutic antibody for dog and cat cancers, stem cell therapy, organ transplants, gene therapies, probiotics, dental vaccines, cold laser **Treatments**, 3D printing, Juvenile Pubic Symphysiodesis (JPS), any drugs not used in accordance with the manufacturers recommendations.
27. Any costs for **Treatment** that does not improve the health or wellbeing of **Your Pet**.
28. The cost for **Your Vet** or therapist to write a prescription or charge a dispensing fee.
29. Any medicines that have not been approved by The Veterinary Medicines Regulations (VMR) or where there is no evidence to support the usage of this medicine for this **Condition**.
30. The cost of any ongoing **Treatment** that will require more than six (6) visits, without the letter from **Your Vet** setting out a **Treatment** plan for permanent cure of the **Condition**. Any further consultations and **Treatments** will require pre authorisation by **Us**.
31. Any claim where the full medical history is not provided when requested.
32. The cost of transporting **Your Pet**, including any costs to get **Your Pet** to, or from, any veterinary practice.

#### **What We will not pay for Veterinary Fees only**

1. For 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 six (6) months. A diagnostic test must be carried out to confirm the presence of the stones/crystals.
  - Liquid food, used for up to five (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.
2. For the cost of pheromone products, including DAP diffusers and Feliway (animal behavioural / mood modification products).
3. For the cost of **Alternative or Complementary Treatment**. This includes any **Veterinary Treatment** specifically needed to carry out the particular **Alternative or Complementary Treatment**.
4. For the cost of any prosthesis, including any **Veterinary Treatment** needed to fit the prosthesis, other than hip, knee and/or elbow replacement(s).
5. Any bulk purchase of medicines that can't be used in full by the end of the current **Period of Insurance**.

#### **What We will not pay for Alternative or Complementary Treatment only**

1. The cost of any food, including food prescribed by a **Vet**.
2. For the cost of **Alternative or Complementary Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.

# Theft of Straying & Advertising and Reward Cover

## What We will pay for Theft or Straying

The price **You** paid for **Your Pet**, up to the **Maximum Benefit**, if it is stolen or goes missing during the **Period of Insurance** and is not recovered or does not return, within thirty (30) days. If **You** have no formal proof of how much **You** paid for **Your Pet**, **We** will pay the **Market Value** or purchase price, whichever is less.

## What You pay for Theft or Straying

The **Excess** shown on **Your Certificate of Insurance**.

## What We will pay for Advertising and Reward

If **Your Pet** is stolen or goes missing during the **Period of Insurance**, **We** will pay:

- The cost of advertising, and
- the reward **You** have offered and paid to get **Your Pet** back.

## What you pay for Advertising and Reward

The **Excess** shown on **Your Certificate of Insurance**.

## What We will not pay for Theft or Straying & Advertising and Reward

### 1. More than the Maximum Benefit.

## What We will not pay for Theft or Straying only

1. 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.

## What We will not pay for Advertising and Reward only

1. More than £25 towards sundries to make **Your** own posters and advertising material.
2. For any reward that **We** have not agreed to before **You** advertised it.
3. For any reward not supported by a signed receipt giving the full name, address and telephone number of the person who found **Your Pet**.
4. For any reward paid to:
  - A member of **Your Family** or any person living with **You** or employed by **You**.
  - The person who was caring for **Your Pet** when it was lost or stolen.
  - The person who stole **Your Pet** or any person who is in collusion with the person who stole **Your Pet**.

## Conditions applying to Theft or Straying & Advertising and Reward Cover

1. If **Your Pet** is found or returns, **You** must repay the full amount **We** have paid **You**.

### 2. You must take the following steps:

- Within twenty-four (24) hours of **You** discovering **Your Pet** is stolen or lost, **You** must tell the appropriate authority and obtain written confirmation of **Your** report. Depending on where **You** live the appropriate authority may be **Your** local Council or the police.
- Tell all the **Vets** and local rescue centres within a reasonable distance of the area where **Your Pet** was last seen, within five (5) days of **Your Pet** going missing.
- If **Your Pet** is microchipped, **You** must notify **Your** microchip provider within five (5) days of finding out **Your Pet** missing.
- If **Your Pet** has not been found within thirty (30) days, fill in a claim form and return it to **Us** as soon as possible.

# Death from Injury or Death from Illness Cover

## What We will pay for Death from Injury

The price **You** paid for **Your Pet**, up to the **Maximum Benefit**, if it either dies or has to be put to sleep by a **Vet** during the **Period of Insurance** as a result of an **Injury** caused by an **Accident**. If **You** have no formal proof of how much **You** paid for **Your Pet**, **We** will pay the **Market Value** or purchase price, whichever is less.

## What You pay for Death from Injury

The **Excess** shown on **Your Certificate of Insurance**.

## What We will pay for Death from Illness

The price **You** paid for **Your Pet**, up to the **Maximum Benefit**, if it either dies or has to be put to sleep by a **Vet** during the **Period of Insurance** as a result of an **Illness**. If **You** have no formal proof of how much **You** paid for **Your Pet**, **We** will pay the **Market Value** or purchase price, whichever is less.

## What You pay for Death from Illness

The **Excess** shown on **Your Certificate of Insurance**.

## What We will not pay for Death from Injury & Death from Illness

1. More than the **Maximum Benefit**.
2. To the extent permitted by law, if the death results from an **Injury** or **Illness** that happened prior to the **Period of Insurance (Pre-Existing Condition)**.
3. Any amount unless **Your Vet** confirms it was not humane to keep **Your Pet** alive because it was suffering from an **Injury** that could not be treated or an incurable **Illness**.

## What We will not pay for Death from Injury only

1. If **Your Pet's** death results from an **Injury** which occurred in the first three (3) days of cover (**Waiting Period**).

## What We will not pay for Death from Illness only

1. If **Your Pet's** death results from an **Illness** which starts in the first seven (7) days of cover (**Waiting Period**).
2. Any amount if the death results from obesity, breeding, pregnancy or giving birth.

## Claiming

Notify **Us** of a potential claim as soon as possible by:

1. Downloading and completing a claim form from **Our** website: [www.britishpetinsurance.co.uk/claims](http://www.britishpetinsurance.co.uk/claims); or
2. Contact **Us** by telephone if **You** would like **Us** to send **You** a claim form.
3. Claims must be submitted to **Us** no later than one (1) year after the **Treatment** date; **Your Pet** being lost, stolen, or going missing; or the date of **Your Pet's** death.
4. Claims for **Advertising and Reward**, **You** must phone **Us** on 01444 708840 and talk to **Our** claims team, for the approval of any reward before **You** advertise it.

Please send **Us** the following supporting documentation related to **Your** claim:

<b>Veterinary Fees &amp; Alternative or Complementary Treatment</b>	<p>For both <b>Veterinary Fees &amp; Alternative or Complementary Treatment</b> cover:</p> <ul style="list-style-type: none"><li>• A fully completed claim form by <b>You</b>.</li><li>• The original full itemised invoices from the veterinary practice or therapist, which shows what <b>You</b> are claiming for (Photocopies of fully itemised invoices are not acceptable).</li><li>• <b>Your Pet's</b> full clinical history. When <b>You</b> make the first claim for <b>Your Pet</b>, <b>We</b> will obtain its full clinical history. The full clinical history is a record of all visits <b>Your Pet</b> has made to a <b>Vet</b> and this information will be obtained from each veterinary practice <b>Your Pet</b> has attended.</li></ul>
<b>Theft or Straying</b>	<ul style="list-style-type: none"><li>• A fully completed claim form by <b>You</b>.</li><li>• Evidence of the advertising carried out to try and find <b>Your Pet</b>.</li><li>• Confirmation and if applicable the report of <b>You</b> advising the appropriate authority, for example <b>Your local</b> Council or the police.</li><li>• Evidence of <b>You</b> notifying <b>Your</b> microchip provider within five (5) days of finding out <b>Your Pet</b> is missing.</li><li>• The purchase receipt from when <b>You</b> bought <b>Your Pet</b>. If the claim is paid the purchase receipt will not be returned to <b>You</b>.</li><li>• If <b>Your Pet</b> is a pedigree, the original pedigree certificate. If the claim is paid the original pedigree certificate will not be returned to <b>You</b>.</li></ul>
<b>Advertising and Reward</b>	<ul style="list-style-type: none"><li>• A fully completed claim form by <b>You</b>.</li><li>• The original invoices and receipts to show the costs involved, including a receipt for any reward paid.</li><li>• Confirmation and if applicable the report of <b>You</b> advising the appropriate authority for example <b>Your local</b> Council or the police.</li><li>• Evidence of <b>You</b> notifying <b>Your</b> microchip provider within five (5) days of finding out <b>Your Pet</b> is missing.</li><li>• If applicable the police report.</li></ul>
<b>Death from Illness or Injury</b>	<ul style="list-style-type: none"><li>• A fully completed claim form by <b>You</b>.</li><li>• The death certificate from <b>Your Vet</b>.</li><li>• The purchase receipt from when <b>You</b> bought <b>Your Pet</b>. If the claim is paid the purchase receipt will not be returned to <b>You</b>.</li><li>• If <b>Your Pet</b> is a pedigree, the original pedigree certificate. If the claim is paid the original pedigree certificate will not be returned to <b>You</b>.</li></ul>

Please note:

If you are not satisfied after we have reviewed your complaint, you may refer it to the Financial Ombudsman Service within six (6) months of the date of our final response.

The FOS is an independent service in the UK for settling disputes between consumers and businesses providing financial services. You can find more information on the FOS at: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk).

## Compensation

Arch Insurance (UK) Limited are covered by the Financial Services Compensation Scheme. You may be entitled to compensation from the scheme if Arch Insurance (UK) Limited is unable to meet its obligations to you under this insurance.

If you were entitled to compensation under the scheme, the level and extent of the compensation would depend on the nature of this insurance. Further Information about the scheme is available from the Financial Services Compensation Scheme (PO Box 300, Mitcheldean, GL17 1DY) and on their website: [www.fscs.org.uk](http://www.fscs.org.uk).

## Pet Bereavement & Pet Loss Support Service

Blue Cross offers an invaluable service to support pet owners after a loss of their much-loved companions. They aid owners not only through a time of grief due to bereavement, but also in the stressful event of their pet's going missing or being stolen.

Blue Cross can be reached every day on 0800 096 6606 from 8.30am - 8.30pm to offer their assistance to those who are suffering a loss. Access is also possible via Webchat from 8:30am – 8:30pm every day at [www.bluecross.org.uk/about-pbss](http://www.bluecross.org.uk/about-pbss). Alternatively, they can be contacted via email: [pbss@bluecross.org.uk](mailto:pbss@bluecross.org.uk), where a trained volunteer will respond within 48 hours.

Please do not hesitate to reach out to Blue Cross if you need someone to talk to; it is important to get the help you need during challenging times.

## Data Privacy Notice – Petcover EU Limited

Your information has been, or will be, collected or received by Petcover EU Limited. We will manage personal data in accordance with data protection law and data protection principles. We require personal data in order to provide good-quality insurance and ancillary services and will collect the personal data required to do this. This may be personal information such as name, address, contact details, identification details, financial information and risk details.

The full Data Privacy Notice can be found at [www.britishpetinsurance.co.uk](http://www.britishpetinsurance.co.uk).

A paper copy of the Data Privacy Notice can be obtained by contacting us by email ([info@petcover.uk.com](mailto:info@petcover.uk.com)) or at this address:

### Petcover EU Limited

4 Bridge Road Business Park, Haywards Heath, West Sussex, RH16 1TX.

## **Data Privacy Notice – Arch Insurance (UK) Limited**

The insurer are a data controller(s) (as defined by the UK Data Protection Act 2018 and all applicable laws which replace or amend it, including the General Data Protection Regulation) who may collect and process your personal information.

For full details of what data the insurer collects about you, how they use it, who they share it with, how long they keep it and your rights relating to Your personal data, please refer to the insurer

Privacy Notice which will be available on the Insurer website [archcapgroup.com/privacy-policy](http://archcapgroup.com/privacy-policy).

### **In summary:**

The insurer may, as part of their agreement with you under this contract, collect personal information about you, including:

- Name, address, contact details, date of birth and cover required
- Financial information such as bank details
- Details of any claim

The insurer collects and processes Your personal information for the purpose of insurance and claims administration.

All phone calls may be monitored and recorded and the recordings used for fraud prevention and detection, training and quality control purposes.

Your personal information may be shared with third parties which supply services to the insurer or which process information on behalf of the insurer (for example, premium collection and claims validation, or for communication purposes related to your cover). The insurer will ensure that they keep your information secure and do not use it for purposes other than those that are specified in the Privacy Notice.

Some third parties that process your data on behalf of the insurer may do so outside of the European Economic Area ("EEA"). This transfer and processing are protected by EU Model Contracts which aim to provide the equivalent level of data protection to that found in the EU.

The insurer will keep your personal information only for as long as they believe is necessary to fulfil the purposes for which the personal information was collected (including for the purpose of meeting any legal obligations).

The insurer will share your information if they are required to by law. The insurer may share your information with enforcement authorities if they asked to do so, or with a third party in the context of actual or threatened legal proceedings, provided they can do so without breaching data protection laws.

If you have any concerns about how your personal data is being collected and processed, or wish to exercise any of your rights detailed in the Privacy Notice, please contact:

### **Data Protection Officer**

Arch Insurance (UK) Limited

5th Floor

60 Great Tower Street

London

EC3R 5AZ UK

Email [DPO@archinsurance.co.uk](mailto:DPO@archinsurance.co.uk)



# British Pet Insurance

Services

**01444 708840**

**info@petcover.uk.com**

**britishpetinsurance.co.uk**



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