



VetsMediCover

The Pet Insurance People



Pet Insurance Policy

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Please make sure that **You** read the **Policy** wording fully to ensure the cover meets **Your** needs.

Statement of demands and needs

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

This **Policy** wording is part of **Your** insurance contract. The other parts are **Your Policy Schedule** and the email confirmation. This should be read as one document.

Contract of Insurance

You have applied to **Us** for this insurance by a proposal which shall be the basis of and incorporated in this contract and in consideration will pay the **Premium** and any taxes due.

In return, **We** will provide the insurance as described in this **Policy** during the **Period of Insurance** subject to the Terms, conditions and exclusions of the **Policy**.

The Insurers

In respect of all sections of the **Policy** Cranbrook Underwriting Ltd. on behalf of QIC Europe Limited, (reference number: B087514C0DD5001), No. 7, 4th floor, Block C, 179, Marina Street, Pieta PTA 9042, Malta authorised and regulated by the Malta Financial Services Authority number C67694.

Law Applicable

English law applies to this insurance contract.

The Administrator

Sterling Pet Solutions is the administrator for claims (excluding section 7) for this insurance **Policy** and can be contacted to assist **You** on queries by telephoning 0330 134 8112.

Davies Managed Systems (DMS) is the Administrator for Section 7 - Third Party Liability claims for this insurance **Policy** and can be contacted to assist **You** on queries by telephoning 0844 856 3808.

For all other administration please contact VetsMediCover on 0121 308 8685.

Cooling off period and your rights to cancel

You have the right to cancel **Your Plan** at any time. If **You** wish to do so **You** need to contact the **Administrator**. If **You** cancel **Your Plan** within fourteen (14) days of the **First Start Date** or receipt of **Your Plan** documentation (whichever is the later date), **You** will receive a full refund of any **Premium You** have paid, provided that **You** have not made a claim in the meantime.

Payment of premiums

Your Pet is only covered under this policy if **you** pay the **Premium**.

If **You** pay the yearly premium in Direct Debit instalments, the **Premium** for the first month after the **First Start Date** is payable by the date notified to **You** by the **Administrator**. Thereafter the **Premiums** are payable by **You** monthly in advance. **You** must continue to pay **Your Premium** as it falls due in order to ensure continuous cover under this **Plan** even if **You** are in receipt of, or awaiting, any payment due to **You** from **Us** under **Your Plan**.

Premium will be collected by the **Administrator** by Direct Debit. If the first attempt to collect the **Premium** is unsuccessful the **Administrator** will attempt again to collect the **Premium**. If the second attempt to collect the **Premium** is unsuccessful **You** will be in default on **Your** monthly **Premium Instalment** and the **Termination Date** of **Your Plan** will be the date of the second attempt to collect the **Premium**.

If a claim is made on this **Plan** during the **Period of Insurance** the monthly premiums payable for the unexpired portion of the **Period of Insurance** may be deducted from the claim payment.

Definitions

Some of the words and phrases **We** use in this **Plan** have special meanings and appear in bold typeface. Except where the context otherwise requires, the masculine shall include the feminine, the singular shall include the plural and vice versa, as appropriate.

Administrator/Intermediary means

VetsMediCover, SQ2 House, 240B Lichfield Road, Four Oaks, Sutton Coldfield, West Midlands, B74 2UD

Telephone: 0121 308 8685

Email: info@vetsmedicover.co.uk

Behavioural Problems means

habitual behaviour which poses a risk of injury to the public and which could not be prevented by training or which have been referred to a specialist and undergoing treatment.

Claims Administrator means

Sterling Pet Solutions, 50 Kings Hill Avenue, Kings Hill, West Malling, Kent ME19 4JX.
Registered in England & Wales No. 09015536.

Telephone: 0330 134 8112

Davies Managed Systems (DMS), P.O Box 2801, Telecom House, Trinity Street, Stoke on Trent, ST1 5ND.

Telephone: 0844 856 3808

Clinical signs means

Changes in **Your Pet's** normal healthy state, its bodily functions or behaviour.

Co-Insurance means

An additional contribution, **You** will pay, towards each unrelated claim(s). If at the time of the claim **your Pet** is over the age of 4 years old **You** will pay an additional contribution of 10% and if **your pet** is over 6 years old **you** will pay 20% of the claims cost. Subject to the **Excess** being the minimum contribution **You** will pay.

Complementary Treatment means

Alternative and complementary treatment recommended by **Your Vet** or a veterinary practice or qualified practitioner recommended by **Your Vet** including but not limited to physiotherapy (including hydrotherapy), acupuncture, homeopathic or herbal medicines.

Condition means

All **Clinical Signs** of **Injury** or **Illness** resulting in the same diagnosis regardless of the number of incidents or the areas of the body affected.

Death Benefit means

The **Market Value**, this being the most **We** will pay in respect of Section 2 or Section 4.

Excess means

The amount for which **You** are responsible in the event of each unrelated claim during each **Period of Insurance**, this will be deducted from all claims submitted. This means that if **your pet** receives **treatment** for the same **Injury/Illness** in separate policy years, **we** will deduct a fixed **excess** from the first claim(s) paid in each policy year.

First Start Date means

The date your **policy** inception as shown on **your policy schedule**.

Health check means

- i) an annual physical check up of **Your Pet's** health carried out by a **Vet** to include a check on teeth, skin, ears, eyes, abdominal palpation and heart;
- ii) vaccinations are up to date as recommended by **Your Vet** against: distemper, hepatitis, leptospirosis and parvovirus for dogs and; cat flu, feline enteritis and feline leukaemia for cats. If **You** do not keep **Your Pet** vaccinated, **we** will not pay any claims that result from any of the above illnesses.

Illness means

Any changes to a normal healthy state, sickness, disease, or any defect or abnormality which is not caused by **Injury**.

Immediate family means

Your domestic partner, child or children and any other person permanently residing at **Your** address and not paying commercial rent.

Initial Exclusion Period means

The length of time as specified in the **Schedule** after the **First Start Date** during which there is no cover for **Your Pet**.

Injury means

Physical damage or trauma caused immediately (and not over a period of time) by an accident or a malicious act

Market Value means

The purchase price of **Your Pet** or, if **You** do not have proof of the purchase price, the price usually paid for a **Pet** of the same age, breed and pedigree at the time **Your Pet** was acquired.

Period of insurance means

12 months from the **Start Date** entered in the **Schedule** and/or the **Termination Date**.

Pet means

Any dog or cat identified as insured in the **Schedule**.

Policy/Plan means

The cover provided to **Your Pet** under the terms and conditions of this insurance contract.

Pre-Existing Condition means

A **Condition** of which **You** were aware of or which **You** could reasonably have been expected to have been aware before or on the **First Start Date**. A **Condition** will cease to be a **Pre-Existing Condition** if

- a) there have been no symptoms of the **Condition**; and
- b) **You** have not consulted any **Vet** with respect to the **Condition**; and
- c) **Your Pet** has not received any treatment for or in connection with the **Condition** for a continuous period of 24 calendar months.

Premium means

The amount **You** must pay for **Your Plan** for the **Period of Insurance**.

Premium Instalment means

The monthly amount paid towards the **Premium**

Prescription Food means

Clinical diet food that has been prescribed by **Your Vet** as part of the **Treatment** of **Your Pet** for a **Condition**. **Prescription Food** does not include food prescribed for the treatment of weight loss or dental ailments or conditions.

Previous Plan means

A **Plan** of which this **Plan** is a renewal (or subsequent renewal) with effect from the end of the **Period of Insurance** and in respect of which a **Termination Date** did not occur.

Schedule means

The document accompanying this **Plan** which confirms **Your Pet's** details, the **First Start Date**, the **Start Date**, **Excess** and limits of cover which **You** have applied for and which **We** have accepted.

Start Date means

The date this insurance commences as shown in the **Schedule**.

Termination Date means

the earliest of the following to occur:-

- a) **You** default on **Your** monthly **Premium Instalment**; or
- b) **You** do not renew **Your Plan** at the end of the **Period of Insurance**; or
- c) **You** or **We** cancel this **Plan** in accordance with **General Conditions 7**.

Territorial Limits means

Your Pet is covered whilst in the United Kingdom, Northern Ireland, Isle of Man and the Channel Islands. In accordance with the European Economic Community regulations this insurance also extends to cover **Your Pet** under the PETS Travel Scheme whilst temporarily located in any member country of the PETS Travel Scheme (Excluding non EU listed countries as defined by DEFRA), but only for a maximum stay of the period mentioned in **Your Policy schedule**.

Treatment means

Any consultation, examination, advice, tests, x-rays, medication, surgery, nursing care provided by **Your Vet** or a veterinary practice or qualified practitioner recommended by **Your Vet**. **Treatment** includes dental treatment.

Vet means

A Registered Veterinary Surgeon or Registered Specialist Veterinary Surgeon.

Vicious Tendencies means

A tendency or propensity of an animal to do any act which might endanger the safety of person or property in a given situation.

We/Us/Our means

In respect of all sections of the Policy, Cranbrook Underwriting Limited on behalf of QIC Europe Limited, (reference number: B087514C0DD5001), No. 7, 4th floor, Block C, 179, Marina Street, Pieta PTA 9042, Malta authorised and regulated by the Malta Financial Services Authority number C67694. Details about the extent of our authorisation and regulation by the Financial Conduct Authority are available from us on request.

Details about the extent of our and your insurance Administrator's authorisation and regulation by the Financial Conduct Authority can be checked on the Financial Conduct Authority's register by visiting the Financial Conduct Authority's website www.fca.gov.uk or by contacting the Financial Conduct Authority on 0800 111 6768.

You/Yours means

The person named in the **Schedule** as the "Planholder".

Section 1 – Vet’s fees

This Section is only operative if it is specified as included in the **Schedule**. The **Excess** applicable to this Section is as shown on **Your Policy** schedule.

Cover

We will pay for:

- a) the reasonable and customary veterinary charges raised by **Your Vet** following **Treatment** during the **Period of Insurance**; subject to the maximum amount shown within **Your Schedule**;
- b) **Complementary Treatment** recommended by **Your Vet** and administered by a qualified practitioner during the **Period of Insurance**, subject to the maximum amount shown within **Your Schedule**;
- c) the cost of **Prescription Food** prescribed during the **Period of Insurance**, subject to the maximum amount shown within **Your Schedule**.

We reserve the right to obtain a second opinion from **Our** veterinary advisor if total **Vet's** fees are in **Our** opinion unreasonable.

We will not accept liability for any claim until a detailed veterinary account, a full medical history and other information reasonably requested by the **Claims Administrator** on **Our** behalf is received.

You will need to prove that **Your Pet** has had an annual **Healthcheck** within a period of 12 months before **Your Pet** receives **Treatment**.

Exclusions

The following are not insured:

1. Costs resulting from a **Pre-Existing Condition**.
2. Costs resulting from an **Illness or Injury** within the **initial exclusion period**.
3. Costs resulting from an Accident which occurs within 5 days of the **start date**
4. Costs resulting from any transportation associated with the claim.
5. Costs for an **Injury or Illness** arising directly or indirectly from negligent mistreatment of **Your Pet** whether by act or omission.
6. Costs for cosmetic **Treatment** or preventative **Treatment** recommended by **Your Vet** to prevent **Injury or Illness** including trimming, vaccination, grooming or nail clipping, breeding, whelping, pregnancy, prophylactic dental treatment and any claims arising as a result of these procedures.
7. Any costs resulting from dental **Treatment** carried out more than 6 months after the recommendation of the **Vet**, or earlier if specified.
8. Any costs resulting from dental **Treatment** above the maximum amount shown within **Your Schedule**.
9. Cost of a post-mortem examination.
10. Costs for spaying or castration unless deemed necessary by **Your Vet** as part of the **Treatment** for an **Injury or Illness**.
11. Any costs arising from **Vicious Tendencies** or **Behavioural Problems** shown by **Your Pet**.
12. Any costs for house calls or out-of-hours calls unless **Your Vet** confirms that **Your Pet** was suffering from a life-endangering **Condition**.
13. Costs of putting **Your Pet** to sleep, unless deemed necessary by **Your Vet** or the cremation or disposal of **Your Pet**.

14. Costs not backed up by a receipt or invoice showing full details of the costs incurred.
15. Costs for **Treatment** that are not incurred during the **Period of Insurance**.
16. Costs for **Treatment of Conditions** arising from **Your Pet** being overweight, except weight gain as a result of a diagnosed **Illness**.
17. **Prescription Food** prescribed for weight loss or dental **Treatment**.
18. Costs of cosmetic surgery, including any pre-operative and post-operative care.
19. Cost of any treatment in connection with a retained testicle(s) if **Your Pet** is over 6 months old at claim date.
20. Costs of any prosthesis, for example an artificial limb, including any veterinary treatment needed to fit the prosthesis. Cost for hip, knee and/or elbow replacement(s) are covered.

Section 2 – Death of your pet from an illness or accident

This section is only operative if it is specified as included in the **Schedule**. The **Excess** is as shown on **Your Policy** schedule.

Cover

We will pay the **Death Benefit** if **Your Pet** dies during the **Period of Insurance** because of an **Illness** or **Injury** that happened during the **Period of Insurance**. We will also cover the cost of Euthanasia if **your pet** is put to sleep (euthanased) for humane reasons.

Exclusions

The following are not insured:

1. Putting **Your Pet** to sleep (euthanased) due to law, regulation, an order of the Privy Council, a government department, a public authority or similar, or order related to a 'notifiable' disease, Vicious Tendencies or Behavioural Problems.
2. Euthanasia during or after a surgical operation or a general anesthetic unless a qualified **Vet** certifies that it was necessary because of **Injury**.
3. Any amount if **Your Pet** was put to sleep (euthanased) as a result of breeding, pregnancy, giving birth.
4. Putting **Your Pet** to sleep (euthanased) for financial reasons.
5. Death resulting from any **Illness** or **injury** for any **pet** over the ages specified on your **schedule**.

Conditions that apply to Sections 1 and 2.

If there is any **Illness** or **Injury** to, **Your Pet** **You** must immediately get a qualified **Vet** to treat **Your Pet**. **You** must allow the **Vet** to take **Your Pet** away for **Treatment** if they recommend it.

The maximum We will pay under Sections 1 and 2.

We will not pay more than the amount shown in the **Schedule** during the **Period of Insurance** in respect of veterinary charges, **Complementary Treatment**, **Prescription Food** and **Death Benefit** payable in connection with **Illness** or **Injury** of **Your Pet** during the **Period of Insurance**.

Section 3 – Emergency boarding kennel fees

This Section is only operative if it is specified as included in the **Schedule**. The **Excess** is as shown on **Your Policy** schedule

Cover

We will pay up to £200.00 during the **Period of Insurance** for the cost of boarding **Your Pet** at a licensed kennel for the duration that **you** are registered as an in-patient of a hospital provided:

1. **You** suffer any bodily injury, sickness or disease and **You** are in hospital for a continuous period of five (5) days or longer; and
2. There is no other responsible person who can care for **Your Pet**.

Specific Conditions

You must provide us with original receipts from the boarding kennel or cattery identifying the name of **your pet**, the owner's name and address, the date **your pet** was cared for by the kennel or cattery and the amounts charged for each day; and

1. **You** must also provide a medical certificate from the hospital **you** attended showing **your** name and address.
2. The **Excess** is applied for each continuous period **you** are in hospital.

Exclusions

The following are not insured:

Any claims by you for:

1. Any hospitalisation that could reasonably have been expected or foreseen when **you** took out or renewed this **policy** and any potentially recurring medical condition **you** already have.
2. Any costs resulting from **you** or **your** partner being pregnant, giving birth or any treatment that is not as a result of an injury or illness.
3. Costs as a result of any hospital stay that was not on the advice of a doctor, specialist or consultant;
4. Costs as a result of nursing-home care or convalescence care that **you** do not receive in hospital;
5. Costs as a result of **you** being hospitalised for alcoholism, drug abuse, attempted suicide or self-inflicted injuries;
6. Any amount if the boarding kennels/cattery/pet minding businesses are not licensed.

Section 4 – Loss by theft or straying

This section is only operative if it is specified as included in the **Schedule**. The **Excess** is as shown in **Your Policy** schedule.

We will pay the **Death Benefit** if **Your Pet** is not found within 10 weeks of straying or being stolen. It must have disappeared from **Your** address or **Your Vet's** address or a licensed kennel at which **Your Pet** was boarding or a minder's address, provided the minder is not prohibited from keeping **Your Pet** by law.

You must report the loss of **Your Pet** to the police or local council dog warden within 24 hours **You** discover that **Your Pet** is missing.

We reserve the right to receive reimbursement of any amount paid to **You** by **Us** in respect of this section if **Your Pet** is subsequently returned to **You**.

Exclusions

The following are not insured:

1. Theft which does not involve forcible and violent entry to a secure area, such as a pen or **Your** home.
2. Any amount for advertising and reward if **Your Pet** is stolen and **You** do not report the theft to the Police or local council dog warden within 24 hours.

Section 5 – Advertising and reward

This section is only operative if it is specified as included in the **Schedule**. The **Excess** is as shown in **Your Policy** schedule.

If **Your Pet** is lost or stolen we will pay up to 25% of the **Death Benefit** for the cost of advertising as shown on **Your** policy **schedule**. If **Your Pet** goes missing and you decide to offer a reward which leads to getting **Your Pet** back, **You** must get **Our** written agreement before offering the reward.

Exclusions

The following are not insured:

1. Any advertising costs not accounted for
2. Any Reward paid by **You** that has not been agreed by **Us**
3. Any amount for advertising and reward if **Your Pet** is stolen and **You** do not report the theft to the Police within 24 hours.
4. A reward if **You** do not have the name and address of the person finding **Your Pet**.
5. A reward paid to someone who lives or works with **You**, is employed by **You** or is a member of **Your Immediate Family**.
6. Any amount for advertising and reward if **Your Pet** is lost or stolen within 14 days after the **start date** of **Your Plan**.

Section 6 – Overseas travel

We will cover **Your Pet** in the event that **Your Pet** requires Veterinary **Treatment** whilst temporarily located in a Member Country of the PETS Travel Scheme (Excluding non EU listed countries as defined by DEFRA). Cover under this section is for any period of time up to the limit as shown on **Your Policy** **schedule**.

Exclusions

1. The Sterling equivalent of the **Excess** as shown on **Your** Policy **schedule**;
2. The Sterling equivalent of the **Co-insurance**, (if applicable) as shown on **Your** Policy **schedule**.

The **Excess** and **Co-insurance** are applied to each specifically identifiable **Condition** or **Accident** claimed for.

3. Please refer to the 'What We will not pay for' under Section 1 – Vet's fees.
4. Any cost if **Your Pet** stayed overseas longer than 3 months.

Section 7 – Third Party Liability (Dogs only)

We will Indemnify **You** against all sums which **You** become legally liable to pay as damages and claimants costs and expenses arising out of accidental Bodily **Injury** (fatal or non-fatal) or accidental damage to property not owned by **You** or in **Your** custody or control caused by **Your** dog within the Territorial limits. **Our** maximum liability in respect of all indemnity payable under this Section in respect of or arising out of any one occurrence or all occurrences of a series consequent on or attributable to one original cause or source will not exceed the Limit of Indemnity as shown on the Table of Benefits.

Exclusions

1. The **Excess** which is £250 per incident.(The Excess applies per incident.)
2. Liability assumed by **You** under any agreement which imposes a liability on **You** which **You** would not be under in the absence of such an agreement.
3. Liability arising as a result of any deliberate act, wilful default or neglect by **You** or members of **Your Immediate Family**.
4. Liability arising as a result of any person handling **Your** dog without **Your** consent.
5. The cost of fines, penalties and punitive, exemplary, aggravated, liquidated and multiple damages.
6. Any claim or other proceedings against **You** or **Your Immediate Family** lodged in a court of law outside the United Kingdom.
7. Loss or damage to property in the ownership, custody or control, of **You** or members of **Your Immediate Family** or household or any person employed by members of **Your** household.
8. Bodily Injury to **You** or a member of **Your Immediate Family** or persons permanently residing with **You**.
9. Bodily Injury to any person who is under a contract of service or apprenticeship with **You** when such bodily Injury arises out of and in the course of employment by **You**.
10. Liability insured under any other Insurance Policy that covers the same loss, unless such insurance cover has been exhausted.
11. Any claim arising from loss or destruction of, or damage to, any property, or bodily Injury to any person, directly or indirectly caused by pollution or contamination, unless the pollution or contamination is directly caused by a sudden, identifiable, unintended and unexpected incident, which occurs in its entirety at a specific time and place during the **period of insurance** provided that:
 - All pollution or contamination which arises out of one incident shall be deemed to have occurred at the time such incident takes place.
 - **Our** liability for all damages and claimants costs and expenses payable in respect of all pollution or contamination which is deemed to have occurred during the **period of Insurance** shall not exceed in the aggregate the Limit of Indemnity stated in the **Schedule**.
12. Liability arising at **Your** work place.

Third party liability claims conditions

You shall not admit or accept liability, negotiate or make any payment or promise of payment without **Our** written consent.

You are required to provide **Us** with all the information that **We** may reasonably require. **We** will have the sole conduct and control of any claim and legal proceeding relating thereto including the right to prosecute in the name of the insured but for **Our** benefit for any claim, damages or liability.

How to make a claim

1. In the event of any **Injury** to or **Illness** of **Your Pet** that could give rise to a claim under Sections 1 to 6 **You must** contact **Claims Administrator** by phone on 0330 134 8112 within 14 days of the occurrence of the **Injury** or **Illness**.
2. In the event of any alleged claim under Section 7, Third Party Liability, **You** should contact the **Davies Managed System** by phone on 0844 856 3808 as soon as you are made aware of the potential claim.
3. The **Claims Administrator** will inform **You** what action **You** need to take which may include the provision by **You** or **Your Vet** of documentation relating to **Your Pet** or **Your Pet's** medical history, the **Treatment** (or **Complementary Treatment** or prescription of **Prescription Food**) and the **Condition**.
4. The **Claims Administrator** will inform **You** what further documentation or evidence in support of **Your** claim will be required and whether a claims form will need to be completed by **You**.
5. In most cases we will settle directly with the **Vet**. In circumstances where **Treatment** was required prior to contacting the **Claims Administrator** and you have had to pay **Your Vet**, or **Your Vet** will not accept payment from **Us**, **You** must ensure that **You** keep any receipts or invoices relating to **Your** claim in a safe place as **We** reserve the right to withhold payment until these are produced if they are required to establish the validity of **Your** claim.
6. **You** must consent to **Us** or the **Claims Administrator** corresponding with the **Vet** in regard to a claim, if **We** reasonably require to do so.

General conditions

1. **We** are liable only if **We** have received the **Premium** in accordance with "**Payment of premiums**".
2. If **You** pay your **Premium** by Direct Debit Instalment, when **Your Plan** is due for renewals we will renew it for **You** automatically. We will write to **You** before the **Plan** expires with full details of **Your Premium** and policy conditions for the next **Plan** year. If you do not want to renew this **Plan** please let us know.
3. When **We** offer further periods of insurance **We** may change the **Premium**, excesses and **Plan** Terms and Conditions.
4. When **We** settle **Your** claim, **We** will deduct from the **Claim** , any amount due to **Us**.
5. **You** must observe and fulfil all the terms, conditions and endorsements of the **Plan** otherwise **We** will not be liable under the **Plan**.

6. **You** must provide true, complete and accurate information in **Your** application for this insurance or when renewing **Your Plan** or when making a claim under **Your Plan**. If **You** do not, **We** are entitled to reject claims or pay proportionately less in settlement of claims or cancel **Your Plan**.
7. **You** may cancel **Your Plan** at any time by giving notice to the **Administrator** of **Your** wish to do so. **We** may cancel **Your Plan** by sending written Notice of Cancellation by pre-paid post to **Your** last known address. Such Notice of Cancellation will state the **Termination Date** of **Your Plan** which will not be less than thirty two (32) days from the date **We** post the Notice of Cancellation, unless the reason for cancellation is a default on **Your** monthly **Premium Instalment** or **Your** failure to provide true, complete and accurate information in which case the **Termination Date** of **Your Plan** will be immediate.
8. If any dispute arises between **You** and **Us** as to the amount to be paid under **Your Plan**, it may be referred to an arbiter to be appointed by the parties in accordance with the statutory provisions in force at the time.
9. If any dispute arises between **You** and **Us** because of different opinions of **Vets**, **We** can appoint an independent **Vet** whom **You** must also agree to. The fees for this **Vet** will be shared equally by **You** and **Us**. The independent **Vet's** decision will be binding on both of **Us**.
10. **You** agree that any **Vet** has **Your** permission to release any information we may ask for about your **Pet**. If a charge is made for this, **You** must pay the charge.
11. **We** are not liable to pay any claims (including public liability) caused by a **Pet** straying, escaping, damaging property, attacking the general public or other **Pets**, if the **Pet** has a history of doing this. However, **You** are covered if **You** told **Us** about the **Pet's** history and **We** accepted it in writing.
12. **Your Plan** does not cover use of **Your Pet** in any professional, commercial or trade activities, unless **We** have agreed in writing to cover such use.
13. **Your Pet** must be kept in a secure area. Any fences and enclosures must be capable of retaining **Your Pet** and all gates, openings and so on must be kept secure. When **Your Pet** is on a public highway, it must be on a collar and lead under control.
14. **You** must always take reasonable steps to prevent **Injury** to or **Illness** of **Your Pet** and to prevent **Your Pet** causing bodily injury, disease or damage to property and to minimise any claim under **Your Plan**.
15. You must have **Your Pet vaccinated** against kennel cough before **Your Pet** enters a boarding kennel or a show (unless the reason for **Your Pet** entering the boarding kennel is **Your** emergency hospitalisation).

General exclusions

We will not make any payment under **Your Plan** in respect of the following:

1. Any claim for a **Pet** less than 8 weeks of age.
2. Any claim for any **Pet** over 8 years old on the **First Start Date** of **Your** policy.
3. Any claim for distemper, hepatitis, leptospirosis or parvovirus for a dog or feline enteritis, cat flu or feline leukaemia for a cat unless **You** can prove that **Your Pet** is vaccinated against these diseases as recommended by **Your Vet**.
4. Any claim arising directly or indirectly from negligent mistreatment of **Your Pet** whether by act or omission.
5. Any loss arising as a result of an epidemic or pandemic outbreak or any notifiable disease (whether actual or perceived).

6. Any costs caused because the Department for Environment, Food and Rural Affairs (DEFRA) have put restrictions on **Your Pet**.
7. The **Treatment** (or **Complementary Treatment** or prescription of **Prescription Food**) of any **Pre-Existing Condition**.
8. Any claim within the **Initial Exclusion Period** relating directly or indirectly to **Illness of Your Pet**.
9. Any claim for **Injury** which occurred within the first five days from the policy **start date**.
10. Any claim involving **You** or anyone on **Your** behalf using fraudulent means to obtain any benefit under **Your Plan**.
11. The death of **Your Pet** or **Injury** to or **Illness of Your Pet** or bodily injury, disease or damage to property brought about by or contributed to by **Your** breaking the United Kingdom regulations on animal health and importing animals.
12. Any costs, expenses, other disbursements incurred by **You** or anyone else except as specifically provided for in **Your Plan**.
13. The death of **Your Pet** or **Injury** to or **Illness of Your Pet** as a result of **Your Pet** undergoing organ transplants.
14. 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.
15. Any amount caused by radiation, nuclear explosion and/or fallout or contamination by radioactivity.
16. Any amount resulting from a disease transmitted from animals to humans.
17. Any loss occurring outside the Territorial Limits.
18. Any cover for any **Pet** listed or crossed with a breed listed under the Dangerous Dogs Act 1991, the Dangerous Dogs (Amendment) Act 1997 or any further amendments to this Act.
19. Any claims for dogs which are used for guarding, track racing or coursing.

Complaint procedure

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

Stage one – initiating your complaint

You should first contact **us** at VetsMediCover by calling the following telephone number 0121 308 8685 also shown on **your policy schedule**. **We** will confirm to **you** the receipt of your complaint within five working days and do our best to resolve the problem within four weeks. If **we** cannot **we** will let **you** know when an answer may be expected. **We** expect that the majority of complaints will be quickly and satisfactorily resolved at this stage, but if **you** are not satisfied, **you** can take the issue further.

Please quote **Your** Policy reference number in all communications.

We will try to resolve your complaint by the end of the next working day. If **we** are unable to do this, **we** will write to **you** within five working days to either:

- Tell **you** what **we** have done to resolve the problem; or
- Acknowledge **your** complaint and let **you** know when **you** can expect a full response.

We will also let **you** know who is dealing with the matter. **We** will always aim to resolve **your** complaint within four weeks of receipt. If **we** are unable to do this **we** will give **you** the reasons for the delay and indicate when **we** will be able to provide a final response.

If We are still unable to satisfy your complaint please write to:

Cranbrook Underwriting Limited
148 Leadenhall Street
London EC3V 4QT

Or call: 0203 713 2103

QIC Europe Limited is committed to provide **you** with the highest level of service however if **you** are not satisfied with **our** services please refer the matter to **our** Complaints Officer at:-

QIC Europe Limited
No. 7, 4th Floor, Block C
179, Marina Street
Pieta PTA 9042
Malta

Tel: 00356–21227278
Email: Andrew.Ross@qic.com.qa

Your complaint will be acknowledged by the Complaints Officer and a response will be sent to **you** within a maximum time period of ten working days.

In the event that **your** complaint remains unresolved, **you** may also write to the Consumer Complaints Manager at the Malta Financial Services Authority.

Malta Financial Services Authority
Notabile Road
BKR3000
Attard
MALTA
Telephone: 00356 2144 1155
Fax: 00356 2144 1188

This will not prejudice any rights **you** may have at law including any right to institute legal proceedings. Nothing herein shall prejudice or restrict any rights of recourse or complaint which may exist to an Ombudsman or another Regulator or other mechanism for addressing customer complaints.

Stage Two - Financial Ombudsman Service

If **we** cannot resolve the differences between **us**, you may refer **your** complaint to the Financial Ombudsman Service. **You** can ask the Financial Ombudsman Service to review **your** complaint if for any reason **you** are still dissatisfied with **our** final response, or if **we** have not issued **our** final response within eight weeks from **you** first raising the complaint. **You** can contact the Financial Ombudsman Service at the address below, however they will only consider **your** complaint once you've tried to resolve it with **us**.

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Using this complaints procedure will not affect **your** legal rights.

Please note that **you** have six months from the date of the final response in which to refer **your** complaint to the Financial Ombudsman Service (FOS). The Financial Ombudsman Service is an independent body that arbitrates on complaints about general insurance products.

Regulation

QIC Europe Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. **You** can check the Financial Conduct Authority website at www.fca.org.uk, which includes a register of all the firms they regulate. Or **You** can phone them on 0800 111 6768.

Financial Services Compensation Scheme

QIC Europe Limited is covered by the Financial Services Compensation Scheme (FSCS). If **We** fail to carry out our responsibilities under this **Plan**, **You** may be entitled to compensation from the Financial Services Compensation Scheme. Information about the scheme is available at www.fscs.org.uk or by phone on 0800 678 1100 or 020 7741 4100.

Personal data

Your details will be stored on **Our** computer system to administer **your** policy but will not be kept longer than necessary. **You** have the right to request a copy of the personal data that **We** hold about **You**. A small charge may apply.

We are only able to discuss **Your** personal details with you. Please advise the administrators if **You** would like someone else to act on **Your** behalf.

To help **Us** prevent fraud and money laundering, **We** may share **Your** details with other insurance companies, fraud prevention agencies or other Government Agencies. Law enforcement agencies may access and use this information.

Your personal details may be transferred to countries outside the EEA but they will be held securely at all times and in accordance with the principles of UK law.

We may pass **Your** information to veterinary advisors and/or specialist claims personnel for the purpose of administering **Your** claim.

Unless **You** advise otherwise, **We** may use your personal data for customer surveys and the development of **Our** business. If **You** do not want **Us** to do this, please advise the **Administrators**.

Recording of telephone calls

All telephone calls between **You** and **Us** may be recorded and monitored and **We** reserve the right to use any of the recordings made.

Disclosure

QIC Europe Limited, No. 7, 4th Floor, Block C 179, Marina Street, Pieta, PTA 9042, Malta. QIC Europe Limited are authorised and regulated by the Malta Financial Services Authority, Notabile Road, BKR3000, Attard, MALTA. As an Insurance Company authorised within the European Union, QIC is permitted to conduct business within the United Kingdom and is authorised by the Financial Services Authority. Their UK FCA authorisation number is 659521. Details about the extent of **our** authorisation and regulation by the Financial Conduct Authority are available from **us** on request.

Details about the extent of **our** and **your** insurance **Administrators** authorisation and regulation by the Financial Conduct Authority can be checked on the Financial Conduct Authority's register by visiting the Financial Conduct Authority's website www.fca.gov.uk or by contacting the Financial Conduct Authority on 0800 111 6768.

VetsMediCover is a trading name of One Pet One Price Limited who are authorised and regulated by the Financial Conduct Authority, registration number 578612.

Details of Financial Conduct Authority registration can be checked on the Financial Conduct Authority's register by visiting the Financial Conduct Authority's website www.fsa.gov.uk/register or by contacting the Financial Conduct Authority on 0845 606 1234.