

Rescuemycar.com Pet Insurance

Standard Policy Wording Document



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

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

As a **Policyholder**, **you** have the benefit of this policy which **you** have purchased through Rescuemycar.com Pet Insurance.

Please note:

- These policy Terms and Conditions are part of **your** insurance contract. The other parts are **your** Certificate of Insurance for **your pet** and **your** written, internet or telephone application or any other information supplied by the **Policyholder**. This policy, the certificate and any endorsement, shall be considered as one document and form the basis of the content of **your** contract of insurance.
- These Terms and Conditions include two sections of cover. To understand exactly what **your** insurance contract covers **you** must read **your** Certificate of Insurance, together with these policy Terms and Conditions.
- If **you** pay **your** premium by Direct Debit instalment, when **your** policy is due for renewal **we** will renew it for **you** automatically, to save **you** the worry of remembering to contact **us** before the renewal date. **We** will write to **you** before the policy expires with full details of **your** premium and policy conditions for the next policy year. If **you** do not want to renew this policy, all **you** need to do is call **us** on 0845 2034700 to let **us** know.
- Please read Sections C and D for conditions applying to the whole policy.

In the event of a Claim:

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

- Telephone 0845 2034700 and request a claim form to be sent to **you**; or
- **You** can download a claim form from www.rescuemycar.com

And send the completed claim form:

- In writing to: The Claims Department, Rescuemycar.com 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, by **your vet**, as any incomplete claim forms will be returned to **you**.

If **you** wish to complain about the service **We** have provided please write to The Complaints Manager at the address shown below 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 detailed below.

Our Head Office and Registered Office

Elite Insurance Company Limited is a company registered in Gibraltar with Company Registration Number: 91111, whose registered office is at Suite 47/48 The Sails, Queensway Quay, Queensway, Gibraltar, and whose business address in the **UK** is situated at Newton Chambers, Isaac Newton Way, Grantham and Lincolnshire, NG31 9RT.

Elite Insurance Company Ltd are authorised by the Financial Services Commission and authorised and subject to limited regulation by the Financial Conduct Authority. 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 intermediary'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.

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. 12 months**
365 days calculated from and including the date an **injury** happened or the first clinical signs of an **illness** were noticed.
- 2. 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.
- 3. Clinical sign(s)**
A change(s) in **your pet's** normal healthy state, its bodily functions or behaviour.
- 4. Elective treatment or diagnostic**
Any treatment or diagnostic **you** request, which the **vet** confirms is not necessary.
- 5. Excess:**
The amount shown on **your** Certificate of Insurance. This is the first part of each unrelated claim and the amount **you** have to pay.
In respect of Veterinary Fees will either be:
 - a) A fixed amount only or
 - b) A fixed amount and a percentage amount.
 - a) A fixed amount only. The fixed amount is the amount that **you** have to pay towards each **illness** or **injury** that is not related to any other **illness** or **injury**. This amount will be deducted from the first claim(s) for that **illness** or **injury**.
 - b) A fixed amount and a percentage amount will be shown if **your pet** is 10 years old or over (7 years old or over the Select breeds). The fixed amount will be deducted as explained in a) above. In addition, **you** must also pay 10% of all treatment costs. The 10% will be deducted from all claims submitted and will be calculated on the amount left after the fixed amount has been deducted.
- 6. Family:**
Your husband, wife, civil partner, life partner, parents, grandparents, brothers, sisters, sons, daughters, grandsons and granddaughters.
- 7. Home:**
The place in the **UK** where **you** usually live.
- 8. 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.
- 9. 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 in the first 14 days of the section being added to **your** insurance, 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 in the first 14 days of the section being added to **your** insurance, 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, or in the first 14 days of the section being added to **your** insurance.No matter where the **illness** or clinical signs are noticed or happen in, or on, **your pet's** body.
- 10. Immediate family:**
Your husband, wife, civil partner, life partner, parents, sons and daughters.
- 11. Incident:**
A specifically identifiable accident, **injury** or **illness**. Recurring and/or chronic incidents shall be considered as one loss and/or condition. Such incidents being defined as:

- 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 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.

12. Injury:

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

13. Maximum benefit:

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

14. Policy year:

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

15. Pre-existing condition:

- a) An **injury** that happened or an **illness** that first showed clinical signs before **your pet's** cover started, or the section was added to **your** insurance, or
- b) 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 before the section was added to **your** insurance or
- c) An **injury** or **illness** that is caused by, relates to, or results from, an **injury, illness** or clinical sign **your pet** had before its cover started or before the section was added to **your** insurance.

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.

16. Select breed(s):

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.

17. Treatment

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

18. UK:

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

19. Vet:

Registered Veterinary Surgeon.

20. Veterinary fees:

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

21. Veterinary treatment:

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

1. 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
2. Any medication legally prescribed by a **vet**.

This includes physiotherapy and treatment of a behavioural **illness** providing it is carried out by a veterinary practice.

22. We, us, our, insurer:

Elite Insurance Company Limited, the underwriters of this policy. Elite Insurance Company Ltd is authorised by the Financial Services Commission and authorised and subject to limited regulation by the Financial Conduct Authority. Details about the extent of **our** authorisation and regulation by the Financial Conduct Authority are available from **us** on request.

23. You, your, the policyholder:

The person named on the Certificate of Insurance.

24. Your pet:

The dog or cat named on the Certificate of Insurance.

SECTION B: WHAT IS COVERED

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

Section 1 - Veterinary Fees

What we will pay

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

Each incident is covered for:

- **12 months**, starting from the date during the **policy year** the **injury** happened or the **clinical signs** of the **illness** were first noticed, or
 - Until the maximum benefit is reached,
- Whichever happens first.

What you pay

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

What we will not pay

1. More than the **maximum benefit** for an **incident**.
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 your pet** receives more than **12 months** after the date the **injury** happened or the **illness** first showed **clinical signs**.
5. The cost of any **treatment** resulting from an **injury** or **illness**, if the **clinical signs** are the same as the **clinical signs** of an **injury** or **illness** where **we** have already paid the cost of **treatment** for **12 months**.
6. The cost of any medicines or materials prescribed or supplied to be used more than **12 months** after the date the **injury** happened or the **illness** first showed **clinical signs**.
7. The cost of any **treatment** to prevent **injury** or **illness**.
8. The cost of any **elective treatment** or **diagnostic** or any **treatment that you** choose to have carried out that is not directly related to an **injury** or **illness**, including any complications that arise.
9. The cost of killing and controlling fleas and the cost of improving general health.
10. 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.
 - 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.
11. The cost of pheromone products, including Adaptil™ or Feliway® products, unless used as part of a structured behaviour modification programme, and then limited to a maximum period of 6 months.
12. The cost of any vaccination, other than the cost of treating any complications that arise from this procedure.
13. The cost of any **treatment** in connection with breeding, pregnancy and giving birth.
14. The cost of spaying (including spaying following a false pregnancy) or castration, unless:
 - The procedure is carried out when **your pet** is suffering from an **illness** or **injury** and is essential to treat the **illness** or **injury**, or
 - The costs claimed are for the **treatment** of complications arising from this procedure.
15. 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.
16. The cost of treating any **injury** or **illness** deliberately caused by **you** or anyone living with **you**.
17. The costs of having **your pet**:
 - Put to sleep, including any veterinary consultations/visits or prescribed medications specifically needed to carry out the procedure, or
 - Cremated, buried or disposed of.
18. The cost of a house call unless the **vet** confirms that moving **your pet** would further damage its health, regardless of **your** personal circumstances.
19. Extra costs for treating **your pet** outside usual surgery hours, unless the **vet** confirms an emergency consultation is essential, regardless of **your** personal circumstances.
20. The cost of hospitalisation and any associated **veterinary treatment**, unless the **vet** confirms **your pet** must be hospitalised for essential **veterinary treatment**, regardless of **your** personal circumstances.
21. Costs resulting from an **injury** or **illness** specified as excluded on **your** Certificate of Insurance or generally not covered within these Terms and Conditions.
22. The cost of surgical items that can be used more than once.

23. The cost of physiotherapy and **treatment** for a **behavioural illness**, unless this is carried out by a registered veterinary practice.
24. 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**.
25. The cost of buying or hiring equipment or machinery or any form of housing, including cages.
26. 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.
27. The cost of any **treatment** received outside the **UK**.
28. The cost of treating an **illness** that **your pet** contracted while outside the **UK** that it would not normally have contracted in the **UK**.
29. 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.
30. The cost of a post-mortem examination.
31. The cost of transplant surgery, including any pre-operative and post-operative care.
32. 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).
33. The cost of any **treatment** if a claim has not been submitted within 12 months of **your pet** receiving **treatment**.

Special conditions that apply to this section

1. The maximum amount **we** will pay for the cost of **treatment** of each **illness** and **injury** is the maximum benefit that applies on the date the **injury** happened or the date the **clinical signs** of the **illness** were first noticed.
2. The period of **12 months** and the **maximum benefit** will always start or be calculated from the date in the **policy year**:
 - The **injury** first happened or the **clinical signs** of an **illness** were first noticed, or
 - An **illness** with the same diagnosis or **clinical signs** was first noticed,
 No matter how many times the same **injury**, **illness** or **clinical signs** are noticed or happen in or on, any part of **your pet's** body.
3. If a number of **injuries**, **illnesses** or **clinical signs** are:
 - a. Diagnosed as one **injury** or **illness**, or
 - b. Caused by, relate to, or result from, another **injury**, **illness**, or **clinical sign**,
 One period of **12 months** or one **maximum benefit** will apply to the **treatment** received for all the **injuries**, **illnesses** or **clinical signs**.
 In this case the period of **12 months** and the **maximum benefit** will start or be calculated from the first date in the **policy year**:
 - Any of the **clinical signs** or any of the **illnesses** were noticed, or
 - Any of the **injuries** happened.
4. After **we** have paid the cost of **treatment** for **12 months** or the **maximum benefit** for an **illness**, **injury** or **clinical sign(s)**, **we** will not pay the cost of any more **treatment** for:
 - The same **illness** or **injury**,
 - The same **clinical sign(s)**,
 - An **illness** or **injury** with the same diagnosis or **clinical sign(s)** as the **illness** or **clinical sign(s)** **we** have paid the limit for, or
 - An **injury** or **illness** that is caused by, relates to, or results from, an **injury**, **illness** or **clinical sign** that **we** have paid the limit for,
 No matter where the **injury**, **illness** or **clinical sign(s)** are noticed or happen in, or on, **your pet's** body.
5. If **we** agree for a claim settlement to be paid directly to **your vet** and **you** allow this, then if the **vet**, who has treated **your pet** or is about to treat **your pet**, asks for information about **your** insurance that relates to a claim, **we** will tell the **vet** what the insurance covers, what **we** will not pay for, how the amount **we** pay is calculated and if the premiums are paid to date.
5. If **we** receive a request to pay the claim settlement direct to a veterinary practice, **we** reserve the right to decline this request.
6. If the **veterinary fees** **you** are charged are higher than the fees usually charged by a general or referral practice, **we** reserve the right to request a second opinion from a **vet** that **we** choose. If the **vet** **we** choose does not agree with the **veterinary fees** charged **we** may decide to pay only the veterinary fees usually charged by a general or referral practice in a similar area.

7. If **we** consider the **veterinary treatment** **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** provided **we** may decide to pay only the cost of the **veterinary treatment** that was necessary to treat the **injury** or **illness**, as advised by the **vet** from whom **we** have requested the second opinion.
8. **We** may refer **your pet's** case history to a **vet** that **we** choose and if **we** request, **you** must arrange for **your pet** to be examined by this **vet**.
9. If **you** decide to take **your pet** to a different **vet** 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**. If **you** do not, **we** will not pay any costs relating to the second opinion. If **we** request, **you** must use a **vet** **we** choose. If **we** decide the diagnosis or **treatment** currently being provided is correct, **we** will not cover any costs relating to the second opinion.
10. It is **your** responsibility to ensure the veterinary practice 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 settlement claim.
11. If the veterinary practice 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

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

Please send us:

1. **Your** completed claim form, and
2. The invoices showing the costs involved.

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

When to claim

We will not accept claims more than 12 months after the **treatment** start date. This means **you** must send **us** **your** claim no later than 12 months after the date **your pet's treatment** started.

Section 2 – 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 we will pay

If property is damaged, or someone is killed, injured or falls ill as a result of an **incident** involving **your pet** during the **policy year** and **you** are legally responsible and held to be liable, **we** will pay:

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

What you pay

The first £250 of any compensation, costs and expenses where property has been damaged.

What we will not pay

1. More than the **maximum benefit**.
2. Any costs and expenses for defending **you** which **we** have not agreed beforehand.
3. Any compensation, costs and expenses resulting from an **incident** which involves **your** profession, occupation or business.
4. Any compensation, costs and expenses 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.
5. Any compensation, costs and expenses if **you** are legally responsible only because of a contract **you** have entered into.

6. Any compensation, costs and expenses if the person who is killed, injured or falls ill, lives with **you**, is a member of **your immediate family** or is employed by **you**.
7. Any compensation, costs and expenses if the property damaged belongs to **you**, any person who lives with **you**, a member of **your immediate family** or a person who is employed by **you**.
8. Any compensation, costs and expenses if **you**, a member of **your immediate family** or any person who lives with **you** or is employed by **you** is responsible for, or looking after, the property that is damaged.
9. Any compensation, costs and expenses that result from an **incident** if **you** have not followed instructions or advice given to **you** by previous owners or the re-homing organisation about the behaviour of **your pet**.
10. Any compensation, costs and expenses if **you** are deemed responsible under the laws of any country, other than members of the European Union.
11. Any compensation, costs and expenses if **you** are responsible for air, water or soil pollution, unless it can be proven that the pollution took place immediately after and as a result of an accident involving **your pet**.
12. Any compensation, costs and expenses resulting from an **incident** that happens where **you** work.
13. Any compensation, costs and expenses if **your pet** is kept or lives on premises which sell alcohol, unless there is no access from the residential premises to the business premises.
14. Any compensation, costs and expenses if **you** are found not to be liable for the incident and or recover costs and expenses from the opponent.
15. Any compensation, costs and expenses that result from an **incident** that happens outside the **UK**.
16. 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 provide **us** with any information connected with the claim **we** reasonably ask for including details of **your pet's** history.
3. **You** agree to tell **us** or help **us** find out all the circumstances of an incident that results in a claim, provide written statements and go to court if needed.
4. **You** must allow **us** to take charge of **your** claim and allow **us** to prosecute in **your** name for **our** benefit.
5. **You** must immediately send **us** any writ, summons or legal documents **you** receive and **you** must never send 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.

We will not pay for the cost of this information.

SECTION C: CONDITIONS WHICH APPLY TO THE WHOLE POLICY

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

1. **You** must notify **us** immediately and obtain **our** prior authority before incurring veterinary fee(s) or total fees arising from any **incident** or the same condition where they are likely to exceed £850 by telephoning 0845 2034700.
2. Throughout the **policy year** **you** must take all reasonable steps to maintain **your pet's** health and to prevent **injury, illness** and loss.
3. **You** must arrange and pay for **your pet** to have a yearly dental examination and any **treatment** normally recommended by a **vet** to prevent **illness** or **injury**. Any **treatment** recommended as a result of the dental examination must be carried out as soon as possible.
4. **You** must keep **your pet** vaccinated against the following: Dogs - Distemper, hepatitis, leptospirosis, parainfluenza and parvovirus. Cats - Feline infectious enteritis, feline leukaemia and cat flu. If **you** do not keep **your pet** vaccinated, **we** will not pay any claims that result from any of the above **illnesses**.
5. **You** must arrange for a **vet** to examine and treat **your pet** as soon as possible after it shows **clinical signs** of **injury** or **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 **illness** or **injury**.

6. **You** and **your pet** must live in the **UK**.
7. If there is any other insurance under which **you** are entitled to make a claim, if the claim is payable **we** will only pay **our** share of the claim. **You** must tell **us** the name and address of the insurance company and **your** policy number with them and provide any other information **we** may require.
8. If **you** have any legal rights against another person in relation to **your** claim, **we** may take legal action against them in **your** name at **our** expense. **You** must give **us** all the help **you** can and provide any documents **we** ask for.
9. **Your pet** is only covered under this policy if **you** pay the premium.
 - If **you** pay the yearly premium in instalments and **you** miss an instalment **you** must pay the outstanding amount within 10 days of the date the instalment was due to be paid. If **we** do not receive **your** payment within 10 days of the date the premium was due, **your** insurance will automatically stop and **we** will make no further claim payments.
 - 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.
10. When **we** settle **your** claim, **we** will deduct from the claim any amount due to **us**.
11. If **your pet** has died, has been stolen, or goes missing and **you** make a claim for this, **we** reserve the right to cancel the policy and deduct the full outstanding balance of the premium from **your** claim.
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. If **we** offer further periods of insurance **we** may change the premium, Terms and Conditions and place exclusions because of **your pet's** claims and veterinary history. **We** also have the right not to invite renewal and **we** will notify **you** in writing of any such action.
14. If, after **we** have offered a further period of insurance, **you** make a claim that relates to a period of insurance before the one **we** have offered, **we** may, based on the details of the claim, place exclusions backdated to the start of the further period of insurance.
15. **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.
16. When **you** make a claim **you** agree to give **us** any information **we** may reasonably ask for.
17. English law applies to this contract of insurance.
18. The language of the policy and all communications relating to it will be in English, unless **we** otherwise agree in writing.
19. **You** agree to pay translation costs for any documentation not written in English.

Claims Procedure

Unless **you** are claiming for Veterinary Fees, **you** must let **us** know of any circumstances which are likely to lead to a claim. For a claim form please contact **us** on 0845 2034700 or write to Rescuemycar.com Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD

You can download a claim form from www.rescuemycar.com or by calling **us** on 0845 2034700. **You** must follow the procedures set out in the 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** and this will delay **your** claim.

Fraud

Fraud increases **your** premium and the premiums of all policyholders. If **you**:

- Provide **us** with false information,
- Make a false or exaggerated claim with **us**, or
- Make any claim with **us** which involves **your** dishonesty,

We will not pay **your** claim and **we** may void **your** policy and inform the authorities. If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount.

How we use your data

- Please be aware that telephone calls may be monitored and recorded.
- **Your** details will be stored on **our** computer system to administer **your** policy but will not be kept longer than necessary.
- **We** can only discuss **your** personal details with **you**. If **you** would like

anyone else to act on **your** behalf please let **us** know.

- Unless **you** advise otherwise, **we** may use **your** details to support the development of **our** business by including them in customer surveys.
- **We** may share **your** details with other insurance companies, directly or through a number of databases. **We** may pass **your** details to the Police or other government agencies. This allows **us** to check information **you** give **us** and also helps **us** prevent fraud.
- **Your** personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with all principles of **UK** law.
- **We** may pass **your** information to selected third party advisors or suppliers for the purpose of administering **your** claim to include Rescuemycar.com Pet Insurance.

Cancellation Rights

If, after receiving **your** Certificate of Insurance and full policy Terms and Conditions, **you** are not happy **you** have 14 days during which **you** can cancel the policy. In this case **we** will cancel **your** policy and **you** will receive a full refund of any premiums paid. Simply call Rescuemycar.com Pet Insurance on 0845 2034700 or send written confirmation to:

Rescuemycar.com Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD.

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

You may cancel **your** policy at any time by calling or writing to **us** and **we** may give **you** a refund of the money **you** have paid for the period of cover after the cancellation date.

If **we** have paid a claim **you** may not receive a full return of **your** premium.

We may cancel **your** policy at any time by giving **you** 7 days' notice in writing to the last address **you** have given **us**. **We** will give **you** a refund of the money **you** have paid for the **policy year** after the cancellation date.

It is important to note that 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.

Customer Service

If **you** have any question about **your** insurance policy please call the Customer Centre on 0845 2034700. Alternatively write to: Rescuemycar.com Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD.

SECTION D: MATTERS NOT COVERED BY THIS POLICY

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

1. Any **pet** less than 6 weeks old.
2. Dogs used for security, guarding, track racing or coursing.
3. 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.
4. Any amount if **you** break United Kingdom laws or regulations, including those relating to animal health or importation.
5. Any amount if **your pet** is confiscated or destroyed by any 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.
6. Any costs incurred because the Department for Environment, Food and Rural Affairs (DEFRA) has put restrictions on **your pet**.
7. 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.
8. 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.
9. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
10. Any amount resulting from a disease transmitted from animals to humans.
11. Any amount **you** recover from any other insurance or amounts that can be recovered from anywhere else.
12. Any amount not supported with receipts or other proof of payment **we** may request

SECTION E: IN THE EVENT OF A COMPLAINT

Complaints

We aim to get things right at all times. If **we** make a mistake **we** will try to put it right as soon as **we** can. **We** will acknowledge receipt of **your** complaint within five working days and do **our** best to resolve the problem within four weeks. If **we** cannot **we** will let **you** know when an answer may be expected. If **we** have not resolved the situation within eight weeks **we** will provide **you** with information about the Financial Ombudsman Service.

Please contact us at:

Rescuemycar.com Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD.

Phone 0845 2034700

Using **our** complaints procedure or referral to the Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London E14 9SR, does not affect **your** legal rights.

In all communications, please quote **your** policy reference number.

Disputes

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

Financial Services Compensation Scheme

If either Elite or Rescuemycar.com Pet Insurance is unable to meet its liabilities **you** may be entitled to compensation under the Financial Services Compensation Scheme (FSCS). Further information about compensation scheme arrangements is available at www.fscs.org.uk, by emailing enquiries@fscs.org.uk or by phoning the FSCS on 0207 892 7300.