

4Paws Pet Insurance

Standard Policy Terms and Conditions



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

What is 4Paws Pet Insurance?

4Paws pet insurance Standard is a time-limited pet insurance policy that provides cover for **veterinary treatment** costs, due to **illness** or **injury**, for up to **12 months** or until the **maximum benefit** is reached, whichever happens first. However **we** do not cover any **illness** or **injury** (including **clinical sign(s)**) which happened before cover started.

Cover is annually renewable, provided **we** offer and **you** accept **our** renewal invitation. Once the **maximum benefit** or **12 months** is reached, **you** will no longer be able to claim for that condition. At the next renewal, it will be classed as a **pre-existing condition** and **your pet** will no longer be covered,

It is important to note policy terms and conditions can change over time. **Your** premiums may increase due to factors such as **your pet's** age, claims history and our view of the future costs of providing cover.

Introduction

4Paws is a brand name of NCI Insurance Services Limited. 4Paws Pet Insurance policies are sold and administered by NCI Insurance Services Limited. Registered In England & Wales No 4741145. Registered Office: 4th Floor Clarendon House, Victoria Avenue, Harrogate, North Yorkshire HG1 1JD.

NCI Insurance Services Limited is an Appointed Representative of Jigsaw Insurance Services Plc, which is authorised and regulated by the Financial Conduct Authority, number 307654.

All sections of this insurance policy are underwritten by Covéa Insurance plc apart from Section B, Sub Section 2 – Third Party Liability. Registered office: Norman Place, Reading, Berkshire, RG1 8DA, registered in England and Wales Number 613259. Covéa Insurance plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, number 202277.

Section B, Sub Section 2 – Third Party Liability is underwritten by Ageas Insurance Ltd, Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire, SO53 3YA. Registered in England and Wales No. 354568. Ageas Insurance Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, Financial Services Register No 202039.

These are the Terms and Conditions of **your** 4Paws Pet Insurance policy. These Terms and Conditions give **you** details of what is covered, what is not covered and the limits and conditions that apply.

Contract of insurance

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

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

- The Policy Terms and Conditions.
- **Your** Certificate of Insurance and Statement of Fact.
- The information contained in the 'Insurance Product Information Document'.
- Any changes to this insurance policy contained in notices issued by **us** at renewal.

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

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

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

Information and changes we need to know about

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

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

- **You** change address.
- **You** change **your** bank details (if **you** pay monthly premiums).
- **You** move abroad permanently.
- **You** and **your pet** do not live at the **home** address we hold, for at least 6 months of the year.
- **You** are going to be living outside the **UK**, Isle of Man or **Channel Islands** for more than 6 months of the policy year.
- **Your pet** is used for security, guarding, commercial breeding, track racing, coursing or for any business, trade or profession.
- **Your pet** is neutered or spayed.
- **Your pet** is microchipped.
- **You** sell **your pet** or transfer ownership of **your pet** to another person.
- **Your pet** is diagnosed with a **behavioural illness**; or if **your pet** is a dog, if there are any changes in their behaviour. For example (but not limited to) any **aggressive tendencies** shown, any **incidents** where **your** dog has caused **injury** to a person or another animal, or any health conditions which may affect how **your** dog behaves.
- **Your pet** dies.
- **Your** dog is over the age of 8 at the start of **your** policy or **your** cat is over the age of 10 at the start of **your** policy (this is not applicable for renewals).

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

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

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

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

Your pet insurance policy

4Paws – Standard is a product that is suitable for cat and dog owners and is designed to cover the cost of veterinary fees and other expenses associated with protecting **your pet**.

The benefits payable are determined by the Standard Product you have chosen and noted within **your** Certificate of Insurance and Statement of Fact.

Renewing your policy

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

Changes we can make at the renewal of your policy

- a) At renewal, **we** can change:
 - The premium
 - Excesses that **you** pay, and/or
 - Terms and conditions of **your** policy
- b) For dogs, if there has been a change in their behaviour, **we** have the right to limit or remove cover for Third Party Liability. For example (but not limited to): any **aggressive tendencies** shown, any **incidents** where **your** dog has caused **injury** to a person or another animal, or any health conditions which could affect how **your** dog behaves.

We will always tell **you** before **your** renewal date of any changes, so **you** can consider if **your** policy still meets **your** needs.

Your cancellation rights

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

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

To cancel, please contact **01423 535 040** or write to 4Paws at the following address:

4Paws, 4th Floor, Clarendon House, Victoria Avenue, Harrogate HG1 1JD

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

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

In the event of a claim:

To make a claim under all sections apart from Section B, Sub Section 2 – Third Party Liability, **you** may either:

- Telephone **01423 535 040** or email petclaims@4Paws.co.uk and request a claim form to be sent to **you**; or
- Download a claim form from the website at www.4Paws.co.uk/claim

You can send us **your** claim by;

- Uploading **your** claim form and documentation through **our** website at 4paws.co.uk/existing-customers/ and by clicking on the tab named **Claims**,
- **You** can email us at petclaims@4Paws.co.uk or,
- **You** can post this to us at:

The Claims Department
4Paws,
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.

To make a claim under Section B, Sub Section 2 - Third Party Liability, please contact:

Phone: 0345 415 0495

Email: commercialclaims.eastleighteam@ageas.co.uk

Write: Commercial Claims Team, Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA.

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**.

Complaints:

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

Telephone recording and call charges

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

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

Our Customer Care line is open from 9am to 6pm Monday to Friday and 9am to 1pm on Saturdays (excluding public and bank holidays).

Our Sales and Renewals lines are open from 9am to 6:30pm Monday to Friday and 9am to 1pm on Saturdays (excluding public and bank holidays).

Our Pet Claims line is open from 8am to 6pm Monday to Friday and 9am to 1pm on Saturdays (excluding public and bank holidays).

(The emergency pet claims line is open 24/7, 365 days a year).

The claims line for Section B, Sub Section 2 - Third Party Liability is open Monday to Friday, 9am to 5pm.

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 the **treatment date**.
- 2. Aggressive tendencies:**
Your Dog has shown any signs of the following behaviours:
Territorial aggression, protective or guarding, fear aggression, defensive aggression, social aggression, frustrated or elicited aggression, redirected aggression, predatory aggression, dominance aggression, attempted to bite any human or animal, has bitten any human or animal, has chased any human or animal.
- 3. Behaviourist:**
A Certified Clinical Animal **behaviourist** or a member of one of the following organisations, from **our** list of approved specialists:
 - a) Association of Pet Behaviour Counsellors
 - b) Canine and Feline Behaviour Association
- 4. 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.
- 5. Channel Islands:**
Consists of the Bailiwick of Jersey and the Bailiwick of Guernsey.
- 6. Clinical sign(s):**
A change in **your pet's** normal healthy state, its bodily functions or behaviour.
- 7. Elective Treatment or diagnostics:**
Any **treatment** or diagnostics **you** request, which the **vet** confirms or would reasonably consider as not necessary.
- 8. Excess:**
The amount shown on **your** Certificate of Insurance; this is the first part of each unrelated claim and the amount **you** have to pay.

For **Veterinary fees** this will either be a fixed amount only or a fixed amount and a percentage amount. If **you** claim under **Veterinary fees** for the same **illness** or **injury**, **you** will pay the below amounts under each benefit.
 - a) A fixed amount only. The fixed amount is the amount that **you** have to pay towards each **illness** or **injury** that is not related to any other **illness** or **injury** treated. This amount will be deducted from the first claim(s) for that **injury** or **illness**.
 - b) A fixed amount and a percentage amount if **your pet** is 4 years old or over. The fixed amount will be deducted as explained in a) above. In addition, **you** must also pay a percentage of all **treatment** costs. The percentage is shown on **your** Certificate of Insurance. This will be deducted from all claims submitted and will be calculated on the amount left after the fixed amount has been deducted.
- 9. Family:**
Your husband, wife, civil partner, life partner, parents, grandparents, brothers, sisters, sons, daughters, grandsons and granddaughters.
- 10. Home:**
The place in the **UK**, Isle of Man or **Channel islands** where **you** usually live.
- 11. 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.
- 12. Illness which starts in the first 14 days of cover:**
 - o An **illness** that showed clinical signs in the first 14 days of **your pet's** first **policy year**, or
 - o An **illness** which is the same as, or has the same diagnosis or clinical signs as an **illness** that showed clinical signs in the first 14 days of **your pet's** first **policy year**, or

- An **illness** that is caused by, relates to, or results from, a clinical sign that was noticed, or an **illness** that showed clinical signs in the first 14 days of **your pet's** first **policy year**, no matter where the **illness** or clinical signs are noticed or happen in, or on, **your pet's** body.
- 13. Incident(s):**
A specifically identifiable accident, **injury** or **illness**. Recurring and/or chronic incidents shall be considered as one loss and/or condition. Such **incidents** being defined as:
- Clinical manifestations resulting in the same diagnosis (regardless of the number of incidents or areas of the body affected) to which **your pet** has an ongoing predisposition or susceptibility or **injury** related in any way to the original claim; or
 - **Incidents** which are incurable and likely to continue for the remainder of **your pet's** life.
- 14. Injury:**
Physical damage or trauma caused immediately by a sudden and unforeseen accident. Not any physical damage or trauma that happens over a period of time.
- 15. Insurer(s):**
In relation to all sections apart from Section B, Sub Section 2 - Third Party Liability and Section F: Legal, Sub Section 1B, this means Covéa Insurance plc. In relation to Section B, Sub Section 2 – Third Party Liability and Section F: Legal, Sub Section 1B, this means Ageas Insurance Ltd.
- 16. Maximum benefit:**
The most **we** will pay as shown on the Certificate of Insurance for each section of cover. Once this limit has been reached, there will be no further coverage.
- 17. Physiotherapist:**
A member of the following organisations and specified on **our** list of approved specialists:
- Association of Chartered Physiotherapists in Animal Therapy
 - International Association of Animal Therapists (**UK**)
 - National Association of Veterinary Physiotherapists
- 18. Policy year:**
The time during which **we** give cover as shown on **your** Certificate of Insurance.
- 19. Pre-existing condition:**
- An **injury** that happened or an **illness** that first showed clinical signs before **your pet's** cover started, or
 - An **injury** or **illness** that is the same as, or has the same diagnosis or clinical signs as an **injury**, **illness** or clinical sign **your pet** had before its cover started, or
 - An **injury** or **illness** that is caused by, relates to, or results from, an **injury**, incident, **illness** or clinical sign **your pet** had before its cover started. No matter where the **injury**, **illness** or clinical signs are noticed or happen in, or on, **your pet's** body. This is in addition to any exclusion(s) stated on **your** Certificate of Insurance.
- 20. Prevent:**
You must take any actions recommended by a **vet** to help **prevent** or reduce the risk of **injury/illness**.
- 21. Select breeds:**
African Crested Dog, African Hairless, Akita, Alaskan Husky, American Eskimo Dog, Basset Hound, Bavarian Mountain Hound, Bernese Mountain Dog, Bloodhound, Boar Hounds, Boxer, Brittany, Bulldog (English), Bulldog (Toy), Bullmastiff, Canadian Eskimo Dog (Canadian Inuit), Catalan Sheepdog, Central Asian Shepherd Dog, Chow Chow, Cirneco Dell'Etna, Continental Landseer, Coonhound, Dachsbracke, Deerhound, Dobermann, Dogue De Bordeaux, Drentse Partridge Dog, French Bulldog, Great Dane, Greyhound, Hungarian Kuvasz, Irish Wolfhound, Japanese Akita, Korthals Griffon, Landseer, Leonberger, Maremma Sheepdog, Mastiff, Neopolitan Mastiff, Newfoundland, Northern Inuit, Norwegian Lundehund, Pointing Wired Haired Griffon, Poodle (Miniature), Portuguese Warren Hound, Pug, Pyrenean Mastiff, Pyrenean Mountain Dog, Rottweiler, Schapendoes, Siberian Husky, St. Bernard, Tibetan Mastiff, Egyptian Mau, Sphynx, Tonkinese.
- 22. Treatment:**
Any examination, consultation, advice, tests, x-rays, medication, surgery, hospitalisation, nursing and care provided by either a veterinary practice or **vet** recommended **complementary therapist**.
- 23. Treatment date:**
The date that **your pet** first received **treatment** for the **illness** or **injury** being claimed.

- 24. UK:**
Consists of England, Scotland, Northern Ireland and Wales.
- 25. Vet:**
Registered veterinary surgeon.
- 26. Veterinary fees:**
The cost or expense of any **treatment** or amount vets in general or referral practices usually charge.
- 27. Veterinary Treatment:**
The cost of the following when required to treat an **illness** or **injury**:
- Any examination, consultation, advice, test, x-ray, surgery and nursing carried out by a **vet**, a veterinary nurse or another member of the veterinary practice under the supervision of a **vet**, and
 - Any medication legally prescribed by a **vet**. This includes physiotherapy (not including hydrotherapy) carried out by a veterinary practice or a **physiotherapist** and **treatment** of a **behavioural illness** carried out by a veterinary practice or a **behaviourist**.
- 28. We, us, our:**
In relation to all sections apart from Section B, Sub Section 2 – Third Party Liability and Section F: Legal, Sub Section 1B, this means NCI Insurance Services Ltd. In relation to Section B, Sub Section 2 – Third Party Liability and Section F: Legal, Sub Section 1B, this means Ageas Insurance Ltd.
- 29. You, your, the policyholder:**
The person named on the Certificate of Insurance of Cover.
- 30. Your pet:**
Means the dog or cat named on the Certificate of Insurance.

SECTION B: INSURED EVENTS WE WILL COVER

This insurance provides cover set out in the sections below.

Section 1 - Veterinary fees

Cover under this section applies in the **UK**, the Isle of Man and the **Channel Islands**.

What we will pay

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

Each incident is covered for:

- **12 months**, or
- Until **maximum benefit** is reached, whichever happens first, as long as **you** continue to pay the premium when due.

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

What you pay

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

What we will not pay

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** and the cost of any **treatment** as a result of an accident or **injury** in the first 24 hours of cover.
4. The cost of any **treatment your pet** receives more than **12 months** after the **treatment date**.
5. The cost of any **treatment, 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** or the **maximum benefit** has been reached
6. The cost of any **treatment to prevent injury** or **illness**.
7. The cost of any **elective treatment or diagnostics**, including any complications that arise.
8. The cost of killing or controlling any internal or external parasites, including fleas, ticks and worms.
9. The cost of any **treatment** in connection with breeding, pregnancy or giving birth.
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. The cost of this food is only covered for the first occurrence of bladder stones and crystals; **we** will not pay for the cost of this food if the bladder stones or crystals recur.

- o 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 DAP diffusers including Adaptil™ and Feliway® products, unless used as part of a structured behaviour modification programme, and then limited to a maximum period of 6 months. If the **behavioural illness** recurs after these 6 months, **we** will not cover the cost of any further pheromone products for that **behavioural illness**.
 12. The cost of any vaccination, other than the cost of treating any complications that arise from this procedure.
 13. The cost of spaying (including spaying following a false pregnancy) or castration, unless:
 - a) 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
 - b) The costs claimed are for the **treatment** of complications arising from this procedure.
 14. 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.
 15. The cost of any **treatment** in connection with false pregnancy if **your pet** has received **veterinary treatment** for more than 2 episodes of false pregnancy.
 16. The cost of treating any **injury** or **illness** deliberately caused by **you** or anyone living with **you** or, while on **your journey**, anyone travelling with **you**.
 17. The costs of having **your pet**:
 - o Put to sleep, including any veterinary consultations/visits or prescribed medications specifically needed to carry out the procedure, or
 - o Cremated, buried or disposed of.
 18. The cost of a house call unless the **vet** or **physiotherapist** confirms that moving **your pet** would further damage its health, regardless of **your** personal circumstances.
 19. Extra costs for treating **your pet** outside usual surgery hours, unless the **vet**, **physiotherapist** or **behaviourist** confirms an emergency consultation is essential, regardless of **your** personal circumstances.
 20. The cost of hospitalisation and any associated **veterinary treatment**, unless the **vet** or **physiotherapist** confirms **your pet** must be hospitalised for essential **veterinary treatment**, regardless of **your** personal circumstances.
 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 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 alternative or complementary **treatment**.
 24. The cost of buying or hiring equipment or machinery or any form of housing, including cages.
 25. The cost of bathing, grooming or de-matting **your pet** unless:
 - o **You** have taken all reasonable steps to maintain **your pet's** health, and
 - o 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.
 26. 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.
 27. The cost of a post-mortem examination.
 28. The cost of transplant surgery, including any pre- and post-operative care.
 29. The cost of prosthodontics, orthodontic appliances, crowns, caps or splints, or veneers.
 30. Any cost relating to orthodontics, malocclusion, wry bite, supernumerary teeth, reverse scissor bite, posterior cross bite, anterior cross bite, overbite, brachygnathia, open bite or level bite.
 31. 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, any drugs not used in accordance with the manufacturers recommendations or not licensed by Veterinary Medicines Regulations (VMR).
 32. The cost for **your vet** to write a prescription, charge a dispensing fee or a claims form completion fee.

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 **treatment date**.
2. The period of **12 months** and the **maximum benefit** will always start or be calculated from:
 - a) The **treatment date**, or
 - b) The date 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. Cover for any ongoing incident will continue into a new **policy year** providing **you** renew **your** policy and continue to pay the premiums due.

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**:
 - i. Any of the clinical signs or any of the illnesses were noticed, or
 - ii. 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:
 - a) The same **illness** or **injury**,
 - b) The same **clinical sign(s)**,
 - c) 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
 - d) 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.
6. If **we** receive a request to pay the claim settlement directly to a veterinary practice, **we** reserve the right to decline this request.
7. 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.
8. 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.
9. **We** may refer **your pet's** case history to another **vet** in **your** local area that **we** choose and pay for. If **we** request that **you** do so, **you** must arrange for **your pet** to be examined by this **vet**.
10. 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.
11. It is **your** responsibility to ensure the **vet** is paid within the required time frame. If an additional charge is added to the cost of **treatment** due to the late payment of fees, **we** will deduct this charge from the claim settlement.
12. If the **vet** 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 **your 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

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

Section 2 - Third Party Liability (Dogs only)

For the purposes of this section only the words "insured dog" mean the dog that **you** have bought this cover in relation to and is named on **your** Certificate of Insurance and Statement of Fact. The word

What is covered under this section of your policy

We will pay all sums **you** are legally liable for as compensation, costs and/or expenses awarded by a court in the **UK** following an incident involving **your** insured dog within the **UK**, which occurs during the **policy year**, results in bodily injury (fatal or non-fatal) to another person or accidental damage to another person's property.

We will also, with **our** agreement, pay for legal costs and expenses incurred in defending the claim made against **you**.

The most **we** will pay is up to the **maximum benefit** per incident for Third Party Liability.

What is not covered under this section of your policy

1. **We** will not pay the **excess** per **incident**.
2. **We** will not pay any claim if **your** insured dog has previously shown **aggressive tendencies** or if it has ever acted aggressively towards another person or animal, or damaged another person's property.
3. **We** will not pay any claim where **you** are held legally liable solely because of a contract or agreement **you** have entered in to.
4. **We** will not pay for any claim arising as a result of any deliberate act, wilful default or neglect by **you** or members of **your** immediate **family**.
5. **We** will not pay for any claim arising as a result of any person handling **your** dog without **your** consent.
6. **We** will not pay any fines or penalties imposed on **you** from criminal proceedings including any amount a court requires **you** to pay to punish **you** or to try to stop the same circumstances that led to the **incident** happening again or because **you** have caused someone distress, embarrassment or humiliation
7. **We** will not pay for any claim or other proceedings against **you** or **your** immediate **family** in a court of law outside the **UK** or where the **incident** which resulted in the claim occurred outside the **UK**.
8. **We** will not pay for any bodily **injury** to, or 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 **you** or members of **your** household, or who were looking after **your** insured dog with **your** permission.
9. **We** will not pay for any claim for damage to property or bodily **injury** (fatal or non-fatal) to any person who has contact with **your** insured dog for professional purposes, such as a **vet**, or any person employed in a veterinary practice, a dog walker or trainer, a dog-sitter or kennels employee or a person employed by or working in a grooming parlour.
10. **We** will not pay any claim which is in any way connected to **your**, or **your** immediate **family's** work, employment or profession, or place of work.
11. **We** will not pay any claim which occurs in a place which is licensed to sell alcohol if this is where **your** dog normally lives or is kept.
12. **We** will not pay any claim which is insured under another insurance policy, such as **your** household insurance policy, which covers the same loss unless that insurance cover has been exhausted.
13. **We** will not pay for any claim whilst **your pet** is competing in any type of competition, including but not limited to field trials, dog shows and/or breeders' competitions.
14. If **your** insured dog is an assistance dog **we** are unable to provide cover under this section unless they have been trained, or are in the process of being trained, in strict accordance with the guidance of a member organisation of Assistance Dogs UK and **you** can provide evidence of this upon **our** request.

Your policy conditions

1. **You** must notify **us** as soon as possible after an event has arisen that may give rise to a claim or **you** become aware there is a claim against **you**.
2. **You** must not admit or accept liability, negotiate or make a payment or promise of payment to any person without **our** written consent. Do not respond to any letters from people who are looking to claim against **you** or people acting on their behalf, **you** should forward them unanswered to **our** claims team.
3. **You** are required to provide **us** with any information which **we** may reasonably require in order to assess or defend the claim against **you**.
4. **We** will have the sole conduct and control of any claim and the associated legal proceedings including the right to prosecute in **your** name for **our** benefit, for any claim, damages or liability.
5. Do not incur any legal costs relating to a claim under this section - where appropriate **we** will arrange for legal representation.

How to claim

You must notify **us** as soon as possible after an event has arisen that may give rise to a claim or **you** become aware there is a claim against **you**.

Please contact:

Phone: 0345 415 0495

Email: commercialclaims.eastleighteam@ageas.co.uk

Write: Commercial Claims Team, Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA.

You must not admit or accept liability, negotiate or make a payment or promise of payment to any person without **our** written consent. Do not respond to any letters from people who are looking to claim against **you** or people acting on their behalf, **you** should forward them unanswered to Ageas Insurance Limited.

SECTION C:

GENERAL CONDITIONS WHICH APPLY TO THE WHOLE POLICY

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

1. If **treatment** for any incident is ongoing at the renewal date, cover for that incident will continue into the new **policy year** providing **you** renew the policy and continue to pay the premium when due.
2. In the event that **you** choose not to renew **your pet** insurance policy, all cover and benefits will cease on the date **your** policy lapsed and no claim will be paid in respect of **treatment** after this date.
3. Throughout the **policy year** **you** must take all reasonable steps to maintain **your pet's** health and to **prevent injury, illness** and loss.
4. **You** must arrange and pay for **your pet** to have a yearly dental examination and any **treatment** normally recommended by a **vet** to **prevent illness** or **injury**. Any **treatment** recommended as a result of the dental examination must be carried out as soon as possible.
5. **You** must keep **your pet** vaccinated against the following: Dogs - Distemper, hepatitis, leptospirosis, parainfluenza and parvovirus. Cats - Feline infectious enteritis, feline leukaemia and cat flu. If **you** do not keep **your pet** vaccinated, **we** will not pay any claims that result from any of the above illnesses. Homeopathic vaccines are not acceptable.
6. **You** must arrange for a **vet** to examine and treat **your pet** as soon as possible after it shows **clinical signs** of an **injury** or an **illness**, and follow any advice they give. If **you** do not follow the **vet's** advice **we** will not pay any claims relating to that **injury** or **illness**.
7. **You** and **your pet** must permanently live together in the **UK**.
8. In order for **us** to be able to assess **your** claim, **we** reserve the right to request additional relevant information or records from **your** current or any other **vet** that has treated **your pet**. **We** will only ask for information which is relevant to the details and circumstances of the claim and previous medical history. If the **vet** charges **you** for this information, **you** will have to pay for this.
9. If there is any other insurance under which **you** are entitled to make a claim, if the claim is payable **we** will only pay **our** share of the claim. **You** must tell **us** the name and address of the other insurance company and **your** policy number with them and any other information **we** may require.
10. If **you** have any legal rights against another person in relation to **your** claim, **we** may take legal action against them in **your** name at **our** expense. **You** must give **us** all the help **you** can and provide any documents **we** ask for.
11. **Your pet** is only covered under this policy if **you** pay the premium. When **we** settle **your** claim, **we** will deduct any unpaid premiums from the claim or any other amount due to **us**.
12. **You** agree that any **vet** has **your** permission to release any information **we** ask for about **your pet**. If the **vet** makes a charge for this, **you** must pay the charge.
13. When **we** offer further periods of insurance **we** may change the premium and the policy Terms and Conditions.
14. **We** will not guarantee on the phone if **we** will pay a claim. **You** must send **us** a claim form that has been fully completed and **we** will then write to **you** with **our** decision.
15. When **you** make a claim, **you** agree to give **us** any information **we** may reasonably ask for in support of **your** claim.
16. The law of England and Wales will apply to this contract unless:
 - a) **You** and the **insurer** agree otherwise; or
 - b) At the date of the contract **you** are a resident of Scotland, Northern Ireland, **Channel Islands** or the Isle of Man, in which case (in the absence of agreement to the contrary) the law of that country will apply.
17. The language of the policy and all communications relating to it will be in English, unless **we** otherwise agree in writing.
18. **You** agree to pay translation costs for any claim documentation not written in English.

Cancelling this policy

Your right to cancel

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

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

To cancel please contact **01423 535 040** or write to 4Paws at the following address:

4Paws, 4th Floor, Clarendon House, Victoria Avenue, Harrogate, HG1 1JD

Our right to cancel

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

Valid reasons include but are not limited to the following:

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

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

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

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

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

Customers with disabilities

This policy and other associated documentation are also available in large print, please contact our Customer Care team on **01423 535 040** (between 9am and 6pm weekdays and 9am and 1pm on Saturdays, excluding public and bank holidays) or alternatively write to: 4Paws Pet Insurance, 4th Floor, Clarendon House, Victoria Avenue, Harrogate, HG1 1JD.

SECTION D:

GENERAL EXCLUSIONS

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

1. Any amount or expense resulting from a **pre-existing condition** where before the start of this insurance, in **our** reasonable opinion, the insured was aware, or should have been aware, that a claim was likely to be made.
2. Costs arising from preventative and **elective treatment or diagnostics**, routine examinations, vaccination, spaying, castration, pregnancy or giving birth.
3. At the start of **your** policy; any pet under 6 weeks old, any dog over the age of 8 and any cat over the age of 10. (This is not applicable for renewals).
4. Dogs used for security, guarding, track racing or coursing.

5. We will not provide any cover for any dog that is, is crossed or mixed with an African Wild Dog, American Bulldog, American Pit Bull Terrier, American Staffordshire Terrier, Bandog, Boerboel, Bully Kutta, Canary Dog, Cane Corso, Chinese Shar-Pei, Czechoslovakian Wolfdog, Dingo, Dogo Argentino, Dogue Brasileiro, Fila Brasileiro, Gull Dong, Irish Staffordshire Bull Terrier, Native American Indian Dog, Pit Bull Terrier, Saarloos Wolfhound, Shar-Pei, Tosa, Tosa Inu, Wolf Hybrid or Wolf dog.
6. Third Party Liability cover will not apply to the following breeds - African Wild Dog, American Bulldog, American Indian Dog, American Pit Bull Terrier, American Staffordshire Terrier, Bandog, Boerboel, Bully Kutta, Canary Dog, Cane Corso, Chinese Shar-Pei, Czechoslovakian Wolfdog, Dingo, Dogo Argentino, Dogue Brasileiro, Fila Brasileiro, Gull Dong, Husky Wolf Hybrid, Irish Staffordshire Blue Bull Terrier, Irish Staffordshire Bull Terrier, Japanese Tosa, Pit Bull Terrier, Saarloos Wolfhound, Tosa, Tosa Inu, Wolf Hybrid, Wolfdog, or any dog crossbred or mixed with any of these breeds.
7. Any amount if **you** break the **UK**, Isle of Man or **Channel Islands** laws or regulations, including those relating to animal health or importation.
8. Any amount if **your pet** is confiscated or destroyed by government or public authorities or under the Animals Act 1971 United Kingdom because it was worrying livestock. This includes any further amendments to this Act.
9. Any costs caused because the Department for Environment, Food and Rural Affairs (DEFRA) have put restrictions on **your pet**.
10. 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.
11. Any dog that must be registered under the Dangerous Dogs Act 1991, the Dangerous Dogs (Amendment) Act 1997, Dogs (Muzzling) regulations (Northern Ireland) 1991, Dangerous Dogs (Northern Ireland) Order 1991 or any further amendments to this Act.
12. Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
13. Any amount resulting from a disease transmitted from animals to humans.
14. Any claim as a result of an epidemic/ pandemic; this includes providing cover for any **treatment** costs or taking any remedial action to control, **prevent** or suppress **clinical signs** or symptoms.
15. Any amount **you** recover from any other insurance or amounts that can be recovered from anywhere else.
16. Any amount not supported with receipts or other proof of payment requested by **us**.

SECTION E: IN THE EVENT OF A COMPLAINT

Complaints procedure

Our promise of service

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

What will happen if you complain?

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

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

What to do if you are unhappy

If **you** are unhappy with any aspect of the handling of **your** insurance (except for Section B, Sub Section 2 – Third Party Liability) **we** would encourage **you** to seek resolution. **You** should first phone our Customer Care team on **01423 535 040**.

Or write to:

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

Email: complaints@4Paws.co.uk

If you are unhappy about a claim under Section B, Sub Section 2 - Third Party Liability, please phone 0345 415 0495, or Write to: Commercial Claims Team, Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA
Email: commercialclaims.eastleighteam@ageas.co.uk

What to do if you are still not satisfied

If **you** are still not satisfied then **you** may be able to refer your complaint and if you reside in the **UK**:

You must approach the Financial Ombudsman Service within six months of the final response to **your** complaint or **you** can contact them after 8 weeks if **you** have not received a final response at:

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: 0800 023 4567 (free from **UK** mobiles and landlines) or 0300 123 9123.

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

If you reside in the Isle of Man or the **Channel Islands**, please contact your local Financial Ombudsman Services.

Alternatively, you can use the Online Dispute Resolution platform (ODR) by visiting the page:

<http://ec.europa.eu/consumers/odr>

However this service will refer your complaint onto the relevant Financial Ombudsman Service, so you may wish to contact them directly.

SECTION F: LEGAL

Section 1A – Data Privacy

The following Data Privacy applies to all sections for the policy except Third Party Liability (Dogs only).

NCI Insurance Services Ltd is a data controller in relation to the data that is processed for the purpose of the arrangement of this policy, including the sale and the initial capture of the personal details necessary for the policy.

Your data is only kept by **us** for as long as **we** need it, and it is securely destroyed when it is no longer required. **You** can expect **us** to keep **your** data for a period of 10 years following the end of your policy unless there is a requirement for to keep the data for longer. **We** keep data for these periods as it plays an important part in fraud detection and prevention activities and it allows **us** to deal with any queries or complaints that may arise regarding the arrangement of the policy and allows **us** to carry out research and analysis to help **us** improve **our** products and services.

You can contact **our** Data Protection Officer by writing to:

Data Protection Officer
4Paws Pet Insurance
4th Floor
Clarendon House
Victoria Avenue
Harrogate
HG1 1JD

Email: dpo@4Paws.co.uk

Covéa Insurance plc will also be a data controller in respect of any data it processes in relation to the underwriting of the policy. Full details of how Covéa Insurance plc will process data and your data protection rights is available at www.coveainsurance.co.uk/dataprotection.

You can contact the Data Protection Officer at Covéa Insurance plc by writing to Data Protection Officer, Covéa Insurance plc, Norman Place, Reading, Berkshire RG1 8DA or email: dataprotection@coveainsurance.co.uk.

Section 1B – Ageas Insurance Limited Data Privacy

The following Data Privacy applies to Third Party Liability (Dogs only).

Ageas Insurance Limited is part of the Ageas group of companies. The following information is a summary of how **we** collect, use, share, transfer and store **your** information. But if you'd like to read **our** full Privacy Notice please visit **our** website www.ageas.co.uk or contact **our** Data Protection Officer at: Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA or by emailing: thedpo@ageas.co.uk.

NCI Insurance Services Ltd and Covéa Insurance plc will have their own uses for **your** personal data and this is detailed within Section F: Legal, Sub Section 1A – Data Privacy of these Policy Terms and Conditions.

Collecting your information

We ask **you** to share a variety of personal information, such as **your** name, address, contact details, date of birth, credit history, criminal offences, claims information, financial details such as bank account and card details and IP address if accessing our website (which is a unique number identifying **your** computer). **We** may also collect special categories of personal information (which was previously known as sensitive personal information) such as details regarding **your** health.

We also collect information from a number of different sources for example: publically available sources such as social media and networking sites; third party databases available to the insurance industry; firms, loss adjustors and/or suppliers appointed in the process of handling a claim.

Using your information

We collect **your** personal and/or special categories of personal information because **we** need it to provide **you** with an appropriate insurance quotation, policy and price as well as manage **your** policy such as handling a claim or issuing documentation to **you**. **Our** assessment of **your** insurance application may involve an automated process. If **you** object to this being done, then **we** will not be able to provide **you** with insurance.

We will also use **your** information where **we** feel there is a justifiable reason for doing so, for example: to prevent and detect fraud and financial crime (which may include processes which profile **you**); collecting information regarding **your** past policies; carrying out research and analysis (including profiling); and recording and monitoring calls.

Please note if **you** have given **us** information about someone else, **you** must have their permission to do so.

Sharing your information

We share **your** information with a number of different organisations. This may include, but is not limited to: other insurers; regulatory bodies; carefully selected third parties providing a service to **us** or on **our** behalf or where **we** provide services in partnership with them; fraud prevention and credit reference agencies and other companies, for example, when **we** are trialling their products and services which **we** think may improve **our** service to **you** or **our** business processes.

Unless required to by law, **we** would never share **your** personal information without the appropriate care and necessary safeguards being in place.

Keeping your information

We will only keep **your** information for as long as is necessary in providing **our** products and services to **you** and/or to fulfil **our** legal, regulatory, tax and accounting obligations. **We** also keep **your** information for several years after the expiry of **your** policy in order to respond to any queries or concerns that may be raised at a later date with respect to the policy or handling of a claim. Please refer to **our** full Privacy Notice for more information.

Use and storage of your information overseas

Your personal information may be transferred to, stored and processed outside of the United Kingdom (**UK**). **We** or our service providers may use cloud based computer systems (i.e. network of remote servers hosted on the internet which process and store your information) to which foreign law enforcement agencies may have the power to access. However, **we** will not transfer **your** information outside the **UK** unless it is to a country which is considered to have sound data protection laws or **we** have taken all reasonable steps to ensure the third party has suitable standards in place to protect your information

Your rights

You have a number of rights in relation to the information **we** hold about **you**, including: asking for access to and a copy of **your** personal information; objecting to the use of **your** personal information or to an automated decision including profiling; asking **us** to correct, delete or restrict the use of **your** personal information; withdrawing any previously provided permission for the use of **your** personal information and complaining to the Information Commissioner's Office at any time if **you** object to the way **we** use **your** personal information. Please refer to **our** full Privacy Policy for more information.

There may be times when **we** will not be able to delete **your** personal information. This may be as a result of fulfilling **our** legal and regulatory obligations or where there is a minimum statutory period of time for which **we** have to keep **your** information. If **we** are unable to fulfil a request **we** will always let **you** know **our** reasons.

Fraud

If **you** give false or inaccurate information and we suspect fraud, **we** will record this and the information will be available to other organisations that have access to the database(s). **We** can supply details of the databases we access or contribute to, on request.

If **you** (including any agent acting on **your** behalf) deliberately or recklessly provide inaccurate information **we** may cancel **your** policy and refuse to pay the benefit. In these circumstances **we** may not refund any premiums **you** have paid.

If **you** (including any agent acting on **your** behalf) carelessly provide inaccurate information, **we** shall be entitled to amend **your** policy to reflect the terms that **we** would have offered had the accurate information been provided during the application process.

Financial Services Compensation Scheme

The **insurers** are members of the Financial Services Compensation Scheme (FSCS). **You** may be entitled to compensation from this scheme, if you reside in the **UK**, if they cannot meet their obligations, depending on the type of insurance and the circumstances of **your** claim.

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