

# Petplan<sup>®</sup>

## Everything you need to know

Your **Covered For Life**  
Pet Insurance Policy Booklet



Please read in conjunction with Your Certificate  
of Insurance to understand the cover for Your Pet.

**Combined Financial Services Guide  
and Product Disclosure Statement  
(including Policy Wording)**



Every pet deserves



Dear Policyholder,

Thank You for considering insuring with Petplan, We would be delighted to have You and Your Pet as part of the Family.

We hope Your Pet is in the best of health, but rest assured, if You need Us we'll be there to help. We do all We can to make the claims process as quick and easy as possible so You can count on prompt and caring service from Our experienced staff when You need it most.

The details of the cover the Policy provides are included in this booklet as well as useful information to make claiming as straightforward as possible.

Wishing You and Your Pet a happy and healthy time ahead.

The Petplan Team

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# Part 1: Financial Services Guide (FSG)

This combined Financial Services Guide (FSG) document and the Pet Insurance Product Disclosure Statement (which includes the **Policy** Wording) (PDS) that **You** have been given, aims to help **You** make an informed decision about the financial services and products **We** can provide to **You** as a retail client and together contain important information about:

- the financial services **We** can offer **You**;  
who **We** act for in providing these services;
- how **We** and other relevant persons are paid; and
- how complaints are dealt with.

The Financial Services Guide (FSG) explains:

- **Our** products and services
- **Our** remuneration
- Other important information.

Please take the time to carefully read this FSG and keep it safely with **Your Policy** documents.

## Information About Petplan's Services

The PDS also contains information on the significant benefits and characteristics of the product and the standard terms, conditions, limits and exclusions of **Our** Pet Insurance cover to assist **You** in making an informed decision about whether to purchase it or not.

In this FSG "**We, Our and Us**" refers to **Petplan Australasia Pty Ltd** ABN 64 069 468 542 AFS Licence No. 245663 of 1-3 Smolic Court Tullamarine VIC 3043 phone 1300 738 225 which is authorised under its AFS Licence to provide advice on and deal in general insurance products, including Pet Insurance.

## Introduction

**We** aim to provide **You** with insurance products and services that protect **You** and/or enhance **Your Pet's** life. To help **Us** achieve this, it's important that **You** understand what **We** do as **Your** insurance Agent.

**Our** FSG contains important information about the products and services **Petplan Australasia Pty Ltd (Petplan)** offers. It also explains how **We**, and **Our** representatives, may be remunerated and contains details of **Our** internal and external complaints handling procedures.

By engaging **Petplan Australasia Pty Ltd** to provide insurance services, **You** are, in the absence of a formal written retainer agreement, agreeing to the delivery of **Our** services and to **Our** remuneration as described in this FSG.

If **You** are buying a Retail Product (as defined in the Corporations Act 2001), **We** will, if and when required, also give **You** a Product Disclosure Statement. This contains information on the product and its features to assist **You** in making an informed decision about whether or not to buy it.

If **We** give **You** personal advice about a Retail Product, which takes into account **Your** individual objectives, financial situations or needs, **We** will, if required, also give **You** a Statement of Advice. This contains the advice **We** have given, the basis of that advice and other information about **Our** remuneration and any relevant associations or interests which may have influenced the advice provided.

This FSG is also available on **Our** website [www.petplan.com.au](http://www.petplan.com.au).

## How You can instruct Us

**You** can give **Us** instructions by using the contact details set out in this FSG.

## Our products and services

As an insurance intermediary **We** are licensed to deal in and provide advice in relation to Pet Insurance and or General risk insurance products.

Under **Our** licence, amongst other things, **We** are able to:

- Arrange Pet Insurance and or General risk insurance products to help **You** protect against insurable risks;
- Collect information that insurers require from **You**;
- Where needed, provide **You** with information and advice about Pet Insurance and or General risk insurance products; and

- Assess and pay Pet Insurance Claims and where needed, assist **You** to make General insurance claims.

**We** will endeavour to arrange insurance that meets **Your Pet** Insurance and or **Your** General risks and needs. However, as it is **You** who best understands **Your** risks and needs **You** should always consider the appropriateness of any products **We** provide or any insurance **We** recommend to **You** before acting on **Our** recommendations. **We** also rely on **You** for the accuracy and completeness of information **You** provide to **Us**.

**Your Policy** documents (including policies and endorsements) contain the terms of **Your** cover, including the applicable limits, sub-limits and deductibles and **Your** obligations. **You** must read these documents carefully to ensure that the cover suits **Your** needs and so **You** understand and comply with **Your** obligations under **Your Policy(ies)**. Failure to do so may result in uninsured losses.

Finally, please note that **We** cannot guarantee the availability of insurance for **Your** particular risks or the solvency of insurers.

### Arranging Your insurances

While cost is always important, the quality of insurance cover offered by a **Policy** is equally important. Insurance that does not match **Your** needs is worthless, however cheap the premium.

As one of Australia's leading Pet Insurance providers, **We** have many clients with similar Pets, businesses and situations with similar risks and needs. For these, **We** design and develop **Petplan** products which combine good pricing and quality cover from reputable insurers.

**We** understand that Pet Insurance can be a complex area and not something that pet owners deal with every day. That is why **Our** employees who are involved in the sale of insurance products and services are Tier 2 qualified based on FSR requirements. This enables them to provide **You** with meaningful advice and assistance when **You** need it.

### Who do We act for?

As an Agent acting under a Binder from the Insurer, **We** act to arrange to enter into insurance products on their behalf. Under **Our** Binder Agreement **We** also agree to handle and settle claims on an insurers behalf. For General Insurance Products provided as an Insurance Intermediary **We** will act on your behalf. **We** will tell **You** before or at the time if **We** are not acting for **You** in providing any part of our service.

Any advice given to **You** about Pet insurance will be of a general nature only and will not take into account **Your** personal objectives, financial situation or needs. **You** need to determine whether this product meets **Your Pet's** needs.

### The people who provide Our services

**We** provide **Our** services using **Petplan** employees.

However, in some cases **We** may use "Authorised Representatives" or "Mere Referrers". "Authorised Representatives" are third parties who **We** have authorised to provide **You** and **Your Pet's** information to allow **Us** to be able to provide **You** with Pet Insurance.

"Mere Referrers" are other third parties who **We** have authorised to provide **You** and **Your Pet's** information to **Us** to be able to provide **You** with Pet Insurance. They will only provide factual information and are not authorised to provide any advice.

**Our** Authorised Representatives and Mere Referrers are not employees and do not receive a salary. Instead they may be paid a percentage of the commission and/or other part of **Our** remuneration for the financial services they provide. This percentage may be up to 10% of **Petplan's** remuneration.

The Authorised Representative or Mere Referrer's employees may receive salaries, bonuses and/ or company dividends in their own business depending on the nature of their employment. Bonuses may be linked to general overall performance, including sales performance and may include all or part of the commission received by the Authorised Representative or Mere Referrer.

The Authorised Representative or Mere Referrer, and/or its associates, may also receive other financial and non-financial incentives from **Petplan** for arranging **Your Pet** insurance **Policy**. Such incentives may be dependent on a number of performance related or other factors and may include, for example,

sponsorship of training events and conferences, marketing promotions and competitions.

## Information on Remuneration

### Our remuneration

Unless **We** have advised otherwise, **Our** remuneration will comprise the following:

- A commission paid to **Us** by the Insurer;

**We** receive commission from the Insurer HDI Global Specialty SE -Australia (ABN 58 129 395 544, AFS License number 458776), each time **You** buy a **Policy**. It is calculated as a percentage of the Insurer's base premium (this is the premium less stamp duty, GST and other government taxes, charges and levies).

Commission paid to **Us** by the Insurer are rates of commission up to 30% of the premium (before taxes and statutory charges) for Pet Insurance. Commissions depend on the type of insurance. Different insurers may pay different rates of commission.

In addition, **We** may also receive the following:

- A service charge for **Policy** invoicing, premium collection and remittance and for issuing policies and other insurance administration work. This charge will appear on Your invoice and may vary depending on the work involved and the commission **We** receive;
- **We** may charge an additional administration fee for any change to the **Policy** that necessitates **Us** producing a further statement or invoice or a **Certificate of Insurance**. **We** may retain this fee from any premium refund arising in connection with the **Policy** change.

Please note that **We** treat **Our** remuneration as fully earned when **We** issue **You** with a tax invoice, unless **We** have a written agreement with **You** that varies this statement.

**You** agree that **We** may retain all **Our** commission, fees and other remuneration in full in the event of any mid-term cancellation of a **Policy** or future downward adjustment of premium. **You** also agree that the Insurer and **Petplan** may offset such remuneration from any premium refund **You** are entitled to.

**We** want to be entirely transparent about **Our** remuneration so please ask **Us** if **You** want more information or have any questions.

Where **You** have been referred to **Us** by a third party, **We** pay them a fee, a proportion of **Our** commission or other appropriate merchandise. This does not increase the premium **You** pay to **Us**.

**We** pay **Our** staff and representatives an annual salary for their services and they may also receive bonuses or other incentives and rewards based on their performance relating to sales of products and other business criteria.

If **You** require further details about any of the above remuneration received, please ask **Us** within a reasonable time after receiving this document and before **We** provide **You** with advice on or **We** issue **You** with Pet Insurance.

## Do We receive any other remuneration for Our service?

### Interest

The law requires **Us** to pay **Your** premiums (and certain moneys paid to **Us** by insurers for **Your** account) into a trust account pending payment to the Insurer. **We** are entitled to earn and retain interest on these monies. **Our** standard credit terms for premium payments are fourteen (14) days. **We** pay Insurers within the period dictated by the law or earlier if the insurer requires.

**Petplan** and its staff may also receive non-monetary benefits from insurers such as sponsorships of **Petplan** client functions and meals and entertainment. **Petplan** has and monitors compliance with a **Policy** that ensures that these do not create a conflict with **Your** interests.

Should **You** require further information regarding any of the above forms of indirect remuneration or benefits, please contact **Your** **Petplan** Client Relationship Manager.

## Conflicts of interest

Conflicts of interest may arise in circumstances where some or all of **Your** interests as **Our** client are, or may be, inconsistent with some or all of **Our** interests.

**We** have a conflicts of interest policy and procedure, including training and monitoring, to ensure **We** are aware of and manage any conflicts of interest. **Our** company, staff and **Our** representatives must comply with this policy and procedure.

Where a conflict is unavoidable, **We** will consult with **You** and manage the conflict in such a way as to avoid prejudice to any party.

## Relationships and Associations

**We** often work closely with a trade or industry association in developing and distributing certain insurance products. Sometimes these associations endorse the insurance product **We** offer to their members. **We** may pay part of **Our** remuneration or an agreed referral fee to an association for their assistance or endorsement.

**We** also have relationships with various Animal related businesses which, when they consider it appropriate, will recommend **Petplan** and **Our** Pet Insurance to their clients. **We** may pay part of **Our** remuneration or an agreed referral fee to these referrers in recognition of this introduction.

# Other important information

## Compensation Arrangements

### Professional Indemnity Insurance

**Petplan** have professional indemnity insurance which covers its products and services and the services provided by its representatives. In accordance with the requirements of the Corporations Act, **Petplan** Australasia Pty Ltd maintains adequate Professional Indemnity Insurance. This insurance cover extends to claims in relation to **Our** conduct as an Australian Financial Services licence holder and **Our** employees and representatives both past and present, to compensate clients or their beneficiaries for loss or damage suffered if **We** provide negligent advice.

This insurance meets the requirements for compensation arrangements under s912B of the Corporations Act 2001 (Cth).

### Premium and Invoice Calculations

**We** adopt industry practice in calculating local statutory charges. All amounts referred to in **Our** invoices, unless stated otherwise, are to be treated as inclusive of GST.

### Privacy Notice

In this Privacy Notice, '**We**', '**Our**', '**Us**' means **Petplan** Australasia Pty Ltd and HDI Global Specialty SE -Australia.

### Privacy

**We** value the privacy of personal information and are bound by the Privacy Act 1988 when **We** collect, use, disclose or handle personal information. **We** collect personal information to offer, provide, manage and administer the many financial services and products **We** and **Our** group of companies are involved in (including those outlined in this FSG). Further information about **Our** privacy practices can be found in **Our** Privacy Policy that can be viewed on the **Petplan** website at **Petplan** [www.petplan.com.au](http://www.petplan.com.au), or HDI Global Specialty SE -Australia website at [www.hdi-specialty.com/int/en/legals/privacy](http://www.hdi-specialty.com/int/en/legals/privacy) or alternatively, a copy can be sent to **You** on request. Please contact **Petplan** office or visit **Our** website at [www.petplan.com.au](http://www.petplan.com.au) if **You** wish to seek access to, or to correct, the personal information **We** collect or disclose about **You**.

### International Transfers

In providing **You** with insurance services, **We** may transfer **Your** personal and/or sensitive personal information outside of Australia including UK, Germany and India. If this happens **We** will ensure that appropriate measures are taken to safeguard **Your** personal and/or sensitive personal information.



### Information We process

**You** should understand that information **You** provide, have provided and may provide in future will be processed by **Us** and the insurer, in compliance with the Privacy Act 1988 and its National Privacy Principles for the purpose of providing insurance, handling claims and/or responding to complaints.

### Information containing personal and sensitive personal information

Information **We** process may be defined as personal and/or sensitive personal information. Personal information is information that can be used to identify a living individual e.g. name, address, driving licence or national insurance number. Personal information is also information that can identify an individual through a work function or their title.

In addition, personal information may contain sensitive personal information; this can be information about **Your** health and/or any criminal convictions.

**We** will not use personal and/or sensitive personal information except for the specific purpose for which **You** provide it and to carry out the services as set out within this notice.

### Collecting electronic information

If **You** contact **Us** via an electronic method, **We** may record **Your** Internet electronic identifier i.e. **Your** internet protocol (IP) address. **Your** telephone company may also provide **Us** with **Your** telephone number.

### How We use Your information?

**Your** personal and/or sensitive personal information may be used by **Us** in a number of ways, including to:

- arrange and administer an application for insurance;
- manage and administer the insurance;
- investigate, process and manage claims; and/or
- prevent fraud.

### Who We share Your information with?

**We** may pass **Your** personal and/or sensitive personal information to industry related third parties, including authorised agents; service providers; reinsurers; other insurers; legal advisers; loss adjusters and claims handlers.

**We** may also share **Your** personal and/or sensitive personal information with law enforcement, fraud detection, credit reference and debt collection agencies and within the Talanx Group of companies to:

- assess financial and insurance risks;
- recover debt;
- to prevent and detect crime; and/or
- develop products and services.

**We** will not disclose **Your** personal and/or sensitive personal information to anyone outside the Talanx Group of companies except:

- where **We** have **Your** permission;
- where **We** are required or permitted to do so by law;
- to other companies who provide a service to **Us** or **You**; and/or
- where **We** may transfer rights and obligations under the insurance.

### Why it is necessary to share information?

Insurance companies share claims data to:

- ensure that more than one claim cannot be made for the same personal
- Injury or property damage;
- check that claims information matches what was provided when the insurance was taken out;
- act as a basis for investigating claims when **We** suspect that fraud is being attempted; and/or
- respond to requests for information from law enforcement agencies.

### Your rights

**You** have a right to know what personal and/or sensitive personal information **We** hold about **You**. If **You** would like to know what information **We** hold, please contact the Data Protection Officer at the address listed within this notice, clearly stating the reason for **Your** enquiry. **We** may write back requesting **You** to confirm **Your** identity.

If **We** do hold information about **You**, **We** will:

- give **You** a description of it;
- tell **You** why **We** are holding it;
- tell **You** who it could be disclosed to; and
- let **You** have a copy of the information in an intelligible form.

If some of **Your** information is inaccurate, **You** can ask **Us** to correct any mistakes by contacting **Our** Data Privacy Officer.

## Providing consent to process Your information

By purchasing insurance products from **Us** and by providing **Us** with **Your** personal and/or sensitive personal information, **You** consent to **Your** information being used, processed, disclosed, transferred and retained for the purposes set out within this notice.

If **You** supply **Us** with personal information and/or sensitive personal information of other people, please ensure that **You** have fairly and fully obtained their consent for the processing of their information. **You** should also show this notice to the other person.

**You** should understand that if **You** do not consent to the processing of **Your** information or **You** withdraw consent, **We** may be unable to provide **You** with insurance services.

## Collection and use of client information

### How We use Your data

**You** have the right to request a copy of the personal data **We** hold about **You**. A small charge may apply. **We** can only discuss **Your** personal details with **You**. If **You** would like anyone else to act on **Your** behalf please let **Us** know in writing.

**Petplan** gathers data containing information about its clients and their insurance placements, including, but not limited to: names, industry codes, policy types, and policy expiration dates, as well as information about the insurance companies that provide coverage to its clients or compete for its clients' insurance placements. This information is maintained in one or more databases. **Petplan** may use or disclose information about its clients, if it is required to do so by

- foreign or Australian law,
- **Petplan** policy,
- pursuant to legal process
- or in response to a request from foreign or Australian law enforcement authorities or other government officials.

In addition to being used for the benefit of **Petplan's** clients, these databases also may be accessed by other **Petplan** affiliates for other purposes, including providing consulting and other services to insurers for which **Our** Group of Companies may earn compensation.

Due to the global nature of services provided by **Our** Group of Companies, the information **You** provide may be transmitted, used, stored and otherwise processed outside the country where **You** submitted that information. If **You** have questions about **Our** Group data processing or related compensation, please contact **Your** **Petplan** Client Relationship Manager.

### Insurance Brokers Code of Practice

**Petplan** Australasia Pty Ltd is a member of the Steadfast Group Ltd. Both **Petplan** and the Steadfast Group Ltd subscribes to the Insurance Brokers Code of Practice and is bound by their Code of Practice (the Code).

The Insurance Broker's Code of Practice demonstrates the Australian insurance broking industry's professional commitment to its clients. The Code is administered by the Code Administration team at the Australian Financial Complaints Authority (AFCA). The Code applies to the relationship between Insurance Brokers and their clients. It describes key service standards that clients can expect from brokers, as well as an overview of the complaints and disputes handling process. The Code has been specifically developed by the National Insurance Brokers Association (NIBA) to be a user-friendly and helpful tool for both insurance brokers and their clients.

The objective of the Code is to build upon the professional competence in the insurance broking profession, increase consumer confidence in insurance brokers and increase knowledge of the important role they play. The service standards outlined in the Code are also aimed at safeguarding self-regulation of the broking industry. To view a copy of the Code visit [www.niba.com.au](http://www.niba.com.au) The Code does not form part of any retainer **Petplan** have with **You** and **Your** rights relating to any breach of the Code by **Petplan** are limited to remedies available under the Code.

### Service issues and complaints

**We** have in place a formal dispute resolution process, encompassing both internal and external dispute resolution.

**We** are committed to providing quality services to **Our** clients. This commitment extends to giving **You** easy access to people and processes that can resolve a service issue or complaint.

If **You** have a complaint about the service **We** have provided to **You**, please address **Your** enquiry or complaint to the staff member providing the service, or phone 1300 738 225 during normal office hours.

If **We** are not able to resolve the issue immediately, or within five days, **We** will refer it to the Complaints Manager, who will review the complaint and advise **You** in writing of the expected time for resolution.

### Making a Complaint

**We** treat complaints very seriously and believe **You** have the right to a fair, swift and courteous service at all times. If **You** are dissatisfied with the service **You** have received and wish to make a complaint, please contact **Us** and **We** will endeavour to resolve the issue as quickly as possible.

This **Policy** provides **You** with an overview of the process **You** can expect to undertake in order to resolve any complaint that **You** may have.

### Stage One – Review by Petplan

Any enquiry or complaint relating to this Insurance should in the first instance be referred to:

**Petplan** Australasia Pty Ltd  
Customer Service Centre  
1-3 Smolic Crt  
Tullamarine VIC 3043  
Phone 1300 738 225

If **Your** complaint is not satisfactorily resolved within 15 business days or **You** are not satisfied with **Petplan's** response to **Your** complaint, **You** may wish to have the matter reviewed by HDI Global Specialty SE -Australia.

### Stage Two – Review by HDI Global Specialty SE -Australia

In the unlikely event **Your** Complaint remains unresolved following Stage one – Review by **Petplan**, HDI Global Specialty SE -Australia undertake to review **Your** complaint within fifteen (15) working days. If HDI Global Specialty SE -Australia are unable to provide a written response setting out the final decision, HDI Global Specialty SE -Australia will keep **You** informed of progress at least every ten (10) days.

Please contact HDI Global Specialty SE -Australia at:

HDI Global Specialty SE -Australia  
Tower 1, Level 33  
100 Barangaroo Avenue  
Sydney NSW 2000  
Email: [ComplaintsAustralianBranch@hdi-specialty.com](mailto:ComplaintsAustralianBranch@hdi-specialty.com)

### Stage Three – Review by AFCA

If **You** are still not satisfied with the outcome of the Stage Two Review or if **We** have been unable to resolve **Your** complaint within 45 calendar days, **You** may be able to take **Your** matter to an independent dispute resolution body, the Australian Financial Complaints Authority (AFCA).

AFCA resolves certain insurance disputes between consumers and insurers and will provide an independent review at no cost to **You**.

**We** are bound by the determination of AFCA but the determination is not binding on **You**.

Contact details are:

Australian Financial Complaints Authority  
Telephone: 1800 931 678  
Email: [info@afca.org.au](mailto:info@afca.org.au)  
GPO Box 3  
Melbourne VIC 3000

**Petplan** Australasia Pty Ltd is a leading provider of Pet and Animal industry related insurances and risk services. It is part of **Our** Group of Companies, which is a global leader in the design and provision of insurance, reinsurance, risk and employee benefit services. **Petplan** meets the diverse and varied needs of **Our** clients through **Our** Animal industry knowledge, expertise and global resources.

If **You** have any questions about **Our** services or anything in this FSG, please contact **Petplan** on 03 9339 3333.

## Part 2: Product Disclosure Statement (including Policy Wording) (PDS)

This Product Disclosure Statement ('PDS') which includes the **Policy** Wording contains important information about this Dogs and Cats insurance and how it works.

### About this Insurance

This is an important document. **You** should read it carefully before making a decision to purchase this insurance. It will help **You** to:

- decide whether this insurance will meet **Your** needs; and
- compare it with other products **You** may be considering.

Please note that any recommendation or opinion in this document is of a general nature only and does not take into account **Your** objectives, financial situation or needs.

**You** need to decide if this insurance is right for **You** and **You** should read all of the documents that make up the **Policy** to ensure **You** have the cover **You** need.

### Who is the insurer?

HDI Global Specialty SE -Australia (ABN 58 129 395 544, AFS License number 458776) with its registered address at Tower 1, Level 33, 100 Barangaroo Avenue, Sydney NSW 2000 is the Insurer of the **Policy**.

HDI Global Specialty -Australia is authorised to carry out insurance business in Australia by the Australian Prudential Regulation Authority in accordance with the Insurance Act 1973 (Cth).

HDI Global Specialty SE is registered in Germany, with its registered office at Roderbruchstraße 26, 30655 Hannover, Germany with registration number HRB211924 authorised by Bundesanstalt für Finanzdienstleistungsaufsicht ("BaFin"). It is authorised to carry on insurance business in Germany under the German Insurance Supervisory Act ("Versicherungsaufsichtsgesetz").

### Who is the Administrator?

**Petplan** Australasia Pty Ltd ABN 64 069 468 542 AFSL No. 245663 (**Petplan**) is the sole administrator of the **Policy** acting under a binding agreement with the Insurer that authorises it to issue, vary and dispose of this Insurance and to manage and settle claims and deal with complaints. **Petplan** can be contacted as follows, Head Office: 1-3 Smolic Crt, Tullamarine VIC, 3043 Ph: 1300 738 225.

In arranging this insurance **Petplan** acts as agent for HDI Global Specialty SE -Australia and not as **Your** agent.

### Our contract with You

Where **We** agree to enter into a **Policy** with **You** it is a contract of insurance between **Us** and **You** (see the definition of 'You' for details of who is covered by this term). The **Policy** consists of:

- this document which sets out the standard terms of **Your** cover and its limitations;
- the relevant **Certificate of Insurance** issued by **Us**. The **Certificate of Insurance** is a separate document, which shows the insurance details relevant to **You**. It may include additional terms, conditions and exclusions relevant to **You** that amend the standard terms of this document. Only those sections shown as covered in **Your Certificate of Insurance** are included under the **Policy** coverage. If the **Policy** is varied during the **Period of Insurance** **We** will send **You** an updated **Certificate of Insurance** taking into account the variations; and
- any other change to the terms of the **Policy** otherwise advised by **Us** in writing (such as an endorsement or Supplementary PDS). These written changes may vary or modify the above documents.

These are all important documents and should be carefully read together as if they were one document to ensure that **You** are satisfied with the cover. All **Policy** documentation should be kept in a safe place for future reference.

**We** reserve the right to change the terms of the **Policy** where permitted to do so by law.

### What is covered?

Where **We** have entered into a **Policy** with **You**, **We** will insure **You** for:

- loss or damage caused by one or more of the covered insured events; and
- the other covered benefits, as set out in the **Policy** occurring during the **Period of Insurance**.

Other persons may be entitled to cover, but only if specified as so entitled and limited only to the extent and interest specified.

## Terms and Conditions

Cover under this **Policy** is provided on the basis:

- that **You** have paid or agreed to pay **Us** the premium for the cover provided;
- of the verbal and/or written information provided by **You** which **You** gave after having been advised of **Your Duty of Disclosure** either verbally or in writing.

If **You** failed to comply with **Your Duty of Disclosure** or have made a misrepresentation to **Us**, **We** may be entitled to reduce **Our** liability under the **Policy** in respect of a claim and/or **We** may cancel the **Policy**. If **You** have told **Us** something which is fraudulent, **We** also have the option of avoiding the **Policy** (i.e. treating it as if it never existed).

**Your Duty of Disclosure** and the consequences of non-disclosure, are set out under the heading '**Your Duty of Disclosure**', on page 13.

### Some words have special meanings

Certain words used in the **Policy** have special meanings. The **Definitions** section of this document on pages 22, 23, 24, 25, 26 and 27 contains such terms. In some cases, certain words may be given a special meaning in a particular section of the **Policy** when used or in the other documents making up the **Policy**.

Headings are provided for reference only and for interpretation purposes and do not form part of the **Policy**.

### Your obligation to comply with the Policy terms and conditions

**You** are required to comply with the terms and conditions of the **Policy**. Please remember that if **You** do not comply with any term or condition, **We** may (to the extent permitted by law) decline or reduce any claim payment and/or cancel the **Policy**.

If more than one person is insured under the **Policy**, a failure or wrongful action by one of those persons may adversely affect the rights of any other person insured under the **Policy**.

### Your Duty of Disclosure

Before **You** enter into a contract of Insurance with **Us**, the Insurance Contracts Act 1984 (Cth) requires **You** to disclose to **Us** every matter **You** know, or could be reasonably expected to know, (including but not limited to matters relating to the health of **Your Pet**) that is relevant to **Our** decision to insure **Your Pet**,

and if so, on what terms **Your** application for insurance is acceptable and to calculate how much premium is required for **Your** insurance.

**You** have the same duty to disclose any relevant matters to **Us** before **You** renew, extend, vary or reinstate the **Policy**.

The duty applies until the **Policy** is entered into or where relevant, renewed, extended, varied or reinstated (**Relevant Time**). If anything changes between the time **You** provide answers or make disclosure and the **Relevant Time**, **You** need to tell **Us**.

**You** do not need to tell **Us** about any matter that:

- diminishes **Our** risk;
- is of common knowledge
- **We** already know or should know as an insurer;
- **We** tell **You** **We** do not need to know.

### Who does the duty apply to?

The duty of disclosure applies to **You** and everyone that is an insured under the **Policy**. If **You** provide information for another insured, it is as if they provided it to **Us**.

### What happens if the duty of disclosure is not complied with?

If the duty of disclosure is not complied with **We** may cancel the **Policy** and/or reduce the amount **We** pay if **You** make a claim. If fraud is involved, **We** may treat the **Policy** as if it never existed, and pay nothing.

### What type of insurance is this?

Subject to the **Policy** terms and conditions (including exclusions and limits), this **Policy** covers the cost of **Veterinary Fees** if **Your Pet** is injured or becomes ill. Providing **You** renew **Your Policy** each year and continue to pay the premium, the **Policy** will give **You** continuous **Veterinary Fees** cover for ongoing or long-term **Conditions**, providing the **Injury** first happened after **You** obtained cover, or the **Illness** first showed **Clinical signs**, after **You** obtained cover and the conclusion of the twenty-one (21) day **Waiting Period**.

### How long does my Policy run for?

The **Policy** will remain in force for **twelve (12) months** from the date it starts and for any period which **You** renew unless cancelled earlier by **You** or **Us** in accordance with the terms of the **Policy**.

## Policy Summary

Please note that this is a limited summary only and not a full description of the covers. Each cover noted is subject to terms, conditions, exclusions and limitations that are not listed in the summary.

**You** need to read the full terms, conditions and exclusions of the **Policy** and the **Certificate of Insurance** which specifies the options taken for a full explanation of the cover provided under the **Policy**.

### Applying for cover – Eligibility

Eligible cats or dogs can be covered from the age of eight (8) weeks and before their 8th birthday. **Select Breeds**, as defined under Definitions, are eligible for cover from the age of eight (8) weeks and before their 5th birthday. **Your Cat** or **Dog** must live in Australia.

The following dogs are not eligible for cover:

- Dogs used for security, guarding, track racing or Coursing,
- Breeds of dogs that are listed as banned by any Australian Government, public or local authority,
- Dogs that are a cross breed with either a Pit Bull Terrier, Dogo Argentino, Perro De Presa Canario, Dogo Canario, Dingo, Japanese Tosa, Fila Brasileiro, Czechoslovakian Wolfdog, Saarloos Wolfhound/Wolfdog or any wolf hybrid, or any other breed advised to **You** when **You** apply for cover. This list may be modified from time to time and **We** will notify **You** in writing.

Other eligibility criteria may apply and **We** will tell **You** what they are when **You** apply for this insurance.

Subject to the **Policy** terms and conditions (including limits and exclusions), the following benefits are provided under the **Policy**:


**COVER SUMMARY**

<p><b>Veterinary Fees</b></p>	<p><b>We</b> will pay the cost of <b>Veterinary Fees</b> incurred by <b>You</b> for <b>Veterinary Treatment</b> provided during the <b>Period of Insurance</b> to treat <b>Your Pet's Injury</b> or <b>Illness</b>, including <b>Veterinary Fees</b> incurred during <b>Journeys</b> in the <b>Agreed Countries</b>. <b>We</b> will also cover <b>Physiotherapy</b> and <b>Treatment</b> provided during the <b>Period of Insurance</b> of a <b>Behavioural Illness</b> when carried out by a <b>Member of a Veterinary Practice</b> or one of <b>Our</b> recognised associations.</p>	<p>The <b>Maximum Benefit We</b> will pay for <b>Injury</b> and <b>Illness</b> for all <b>Treatment</b> types is shown on <b>Your Certificate of Insurance</b>.</p>
<p><b>Alternative or Complementary Treatment</b></p>	<p><b>We</b> will pay the cost of the following procedures when referred and endorsed by <b>Your Vet</b> and carried out in <b>Australia</b> to treat <b>Your Pet's Injury</b> and <b>Illness</b> during the <b>Period of Insurance</b>:</p> <ul style="list-style-type: none"> <li>• <b>Acupuncture</b> and <b>Homeopathy</b> carried out by a <b>Vet</b>.</li> <li>• <b>Herbal Medicine</b> prescribed by a <b>Member of a Veterinary Practice</b>.</li> <li>• <b>Chiropractic Manipulation</b> and <b>Osteopathy</b> carried out by a <b>Member of a Veterinary Practice</b> or one of <b>Our</b> recognised associations.</li> <li>• <b>Hydrotherapy</b> carried out by a <b>Member of a Veterinary Practice</b> (provided it is in a pool owned by the <b>Veterinary Practice</b>) or a person or a <b>Hydrotherapy</b> business who/ which is a member of one of <b>Our</b> recognised associations.</li> </ul>	<p>The <b>Maximum Benefit We</b> will pay for <b>Injury</b> and <b>Illness</b> for all <b>Treatment</b> types is shown on <b>Your Certificate of Insurance</b>.</p>
<p><b>Theft or Straying</b></p>	<p>If <b>Your Pet</b> is stolen or goes missing during the <b>Period of Insurance</b> in <b>Australia</b> and cannot be found, <b>We</b> will pay the price <b>You</b> paid for <b>Your Pet</b> (or the <b>Market Value</b> if <b>You</b> have no formal proof of how much <b>You</b> paid or if <b>You</b> did not pay for <b>Your Pet</b>).</p>	<p>The <b>Maximum Benefit We</b> will pay for this benefit is shown on <b>Your Certificate of Insurance</b>.</p>

<b>Third Party Liability (Dogs only)</b>	<p><b>We will cover Your Legal Liability</b> for payment of compensation in respect of:</p> <ul style="list-style-type: none"> <li>• death, bodily <b>Injury</b> or <b>Illness</b>; and/or</li> <li>• physical loss of or damage to property occurring during the <b>Period of Insurance</b> and which is caused by an <b>Accident</b> involving <b>Your Dog</b>.</li> </ul>	<p>The <b>Maximum Benefit We</b> will pay for this benefit is shown on <b>Your Certificate of Insurance</b>.</p>
<b>Excesses</b>	<p>If <b>You</b> need to make a claim under this <b>Policy</b>, <b>You</b> may be required to pay an <b>Excess</b>. <b>Your Excess</b> will depend on the product <b>You</b> choose, where <b>You</b> live and the breed and age of <b>Your Pet</b>. For full details, please refer to the terms and conditions of the <b>Policy</b> and <b>Your Certificate of Insurance</b>.</p>	

### Policy Benefits

Unless otherwise indicated in the **Policy**, the amounts shown below are the **Maximum Benefits** that **We** will pay to **You** under the **Policy** in relation to a **Period of Insurance**. **Veterinary Fees** and **Alternative or Complementary Treatment** are subject to the **Policy Aggregate** less the applicable **Excess**.

Type of cover	 Classic	 Ultimate
Covered for Life	✓	✓
Veterinary Fees	<p><b>For Dogs</b> A choice of either <b>\$10,000 or \$15,000</b></p> <p><b>For Cats</b> A choice of either <b>\$9,000 or \$10,000</b> for <b>Treatment of Injury, Accident or Illness</b> as shown in the <b>Certificate of Insurance</b>.</p>	<p><b>For Dogs</b> <b>\$20,000</b></p> <p><b>For Cats</b> <b>\$15,000</b> for <b>Treatment of Injury, Accident or Illness</b> as shown in the <b>Certificate of Insurance</b>.</p>
Alternative or Complementary Treatment	<p><b>\$2,000</b> (Any amounts paid under this benefit are part of the <b>Policy Aggregate of Veterinary Fees</b> as shown above).</p>	<p><b>\$4,000</b> (Any amounts paid under this benefit are part of the <b>Policy Aggregate of Veterinary Fees</b> as shown above).</p>
Third Party Liability	<p><b>\$3 million</b> (any one loss occurrence) (Dogs only)</p>	<p><b>\$5 million</b> (any one loss occurrence) (Dogs only)</p>
Death from Illness	<p>Up to \$1,500 – <b>Optional Extra Benefit</b></p>	<p><b>Up to \$2,000</b></p>



<b>Death from Injury</b>	<b>Up to \$1,500 – Optional Extra Benefit</b>	<b>Up to \$2,000</b>
<b>Boarding Fees</b>	Dogs \$1,000 Cats \$500	<b>\$2,000</b>
<b>Advertising &amp; Reward</b>	<b>\$1,000</b>	<b>\$2,000</b>
<b>Loss by Theft or Straying</b>	<b>\$1,500 – Optional Extra Benefit</b>	<b>\$2,000</b>
<b>Holiday Cancellation</b>	Dogs \$1,000 Cats \$500	<b>\$2,000</b>
<b>Quarantine expenses and Loss of Documents</b>	<b>\$1,000</b>	<b>\$1,000</b>
<b>Multi-pet Discount</b>	✓	✓

The benefits listed below are **Optional Extra Benefits** under the **Classic Cover** and may not be included in cover for **Your Pet**.

**\*\*Please note, Your Pet will only be covered under Classic Cover for an Optional Extra Benefit if You have selected the cover option and have paid an additional premium and it is shown on Your Certificate of Insurance. Optional Extra Benefits are automatically included in Ultimate Cover.**

If applicable, **We** will pay the price **You** paid for **Your Pet** (or the **Market Value** if **You** have no formal proof of how much **You** paid or if **You** did not pay for **Your Pet** under the following circumstances):

<b>Theft or Straying</b>	If <b>Your Pet</b> is stolen or goes missing during the <b>Period of Insurance</b> in <b>Australia</b> and cannot be found.	The maximum amount <b>We</b> will pay in relation to these benefits is shown on <b>Your Certificate of Insurance</b> .
<b>Death from Injury</b>	If <b>Your Pet</b> dies during the <b>Period of Insurance</b> in <b>Australia</b> due to an <b>Injury</b> .	
<b>Death from Illness</b>	If <b>Your Pet</b> dies during the <b>Period of Insurance</b> in <b>Australia</b> due to an <b>Illness</b> .	

# Policy Limits and Exclusions

Benefit limits do apply to some items covered under the **Policy**. **You** should read **Your Policy** carefully so that **You** are aware of what limits may be applicable in the event of a claim.

This Insurance is not intended to cover every single occurrence, in fact, there are some circumstances the **Policy You** are considering will not provide insurance cover for. Under all sections of the **Policy**, **We** do not pay for:

1. A **Condition** specifically excluded on **Your Certificate of Insurance or Policy**.
2. Any animal less than eight (8) weeks old at the time of commencement of **Period of Insurance**.
3. Any costs of treatment throughout the lifetime of **Your Pet** for any injury or illness which occurs or shows **Clinical Signs** prior to the commencement of **Your Insurance** or within the first twenty-one (21) days of cover (**Waiting Period**), or any **Pre-Existing Conditions** This applies regardless of whether or not **We** place any exclusion(s) for the Injury/Illness in **Your Certificate of Insurance**.

*See 'What We will not pay – applying to **Veterinary Fees and Complementary Treatment**' – points 2 and 3, and 'What We will not pay – applying to Death from **Injury and Death from Illness**' – points 3 and 4.*

4. Any costs of treatment throughout the lifetime of **Your Pet** for Brachycephalic Obstructive Airway syndrome (BOAS), Brachycephalic Gastrointestinal Syndrome (BGS), nasal fold surgery, skin fold surgery, stenotic nares and soft palate resection, enlarged tongue (macroglossa), or everted laryngeal sacculae, that occurs or shows **Clinical Signs** within the first twelve (12) months of commencement of **Your Insurance**, inclusive of the **Waiting Period** and any free cover policy or prior to the commencement of the **Your Insurance**. This applies regardless of whether or not **We** place any exclusions on **Your Certificate of Insurance**.

5. Any amount for death from an **Illness** or disease occurring after **Your Pet's** 8th birthday, or if **Your Pet** is a **Select Breed**, its 5<sup>th</sup> birthday.

*See 'Definitions' – **Select Breeds**, and 'What We will not pay – applying to death from **Injury and death from Illness**' – point 9.*

6. Cost of **Routine Treatment or Preventative** care such as check-ups and procedures that are designed to prevent future **Illnesses** from occurring rather than treating existing **Illnesses**. These include, but not limited to annual physical examinations and/or check-ups, vaccinations, heart worm prevention medication; flea and other internal/external parasite prevention.
7. Cost of **Elective** procedures and **Treatment**, including but not limited to de-sexing, spaying or castration; micro-chipping; grooming and de-matting, cosmetic or aesthetic surgery, or **Elective** surgery including but not limited to dew-claw removal, prescription diet foods, and any **Treatment** not related to an **Injury, Illness**, or trauma. **Elective** surgery or **Treatment** that is beneficial to the **Pet** but is not essential for **Your Pet's** survival or does not form part of a **Treatment** for an **Injury or Illness**.
8. The cost of periodontics, dental check-ups, Comprehensive Oral Health Assessment and Treatment (COHAT), dental x-rays, dental prophylaxis, dental scale and polish or teeth cleaning, gingival curettes, gingival hyperplasia, removal of plaque or calculus or periodontal surgery.
9. The cost of prosthodontics, the removal or repair of misaligned or retained deciduous teeth, orthodontic appliances, crowns, caps or splints, luxation, horizontal bone loss, impacted teeth or embedded teeth.
10. Any cost relating to orthodontics, malocclusion, wry bite, supernumerary teeth, reverse scissor bite, posterior cross bite, anterior crossbite, overbite, brachygnathia, open bite or level bite.
11. Any **Treatment** for dental disease if an annual dental examination has not been undertaken within the twelve (12) months preceding the problem requiring **Treatment** and any **Treatment** a **Vet** recommended resulting from that had not been carried out. Evidence will need to be provided to **Us** if **Your Vet** has carried out an annual dental examination.
12. The cost of the following procedures; experimental **Treatments**, or therapies; prosthetics or orthopedic supports or braces, open heart surgeries, cancer vaccinations, therapeutic antibody for dog and cat cancers, stem cell therapy, organ transplants, gene therapies, probiotics, dental vaccines, cold laser treatments, 3D printing, Juvenile Pubic Symphysiodesis (JPS), any drugs not used in accordance with the manufacturers recommendations.

13. Any costs for **Alternative or complementary Treatment** or veterinary **Treatment** that does not improve the health or wellbeing of **Your Pet**.
14. Any prolonged course of veterinary medicines, **Alternative or Complementary Treatments** for more than three (3) months if there is a veterinary operation that would have improved or cured the **Condition** unless agreed by **Us**. The maximum payment will be limited to the equivalent cost of the operation.
15. The cost for **Your Vet** to write a prescription or charge a dispensing fee.
16. Any medicines that have not been approved by the by the Australian Pesticides and Veterinary Medicines Authority (APVMA) or where there is no evidence to support the usage of this medicine for this **Condition**.or where there is no evidence to support the usage of this medicine for this **Condition**.
17. Dogs being used for guarding, track racing or Coursing.
18. Any breed of dog that is banned by any Australian Government, Public or Local Authority, or that is crossed with any banned breed or Pit Bull Terrier or Dingo or crosses of these breeds.
19. Any dog declared as a dangerous dog by a Government authority.
20. Any dog that must be registered under the applicable legislation dealing with dangerous dogs.
21. Any amount caused by, arising out of or in any way connected with **Your Pet** being confiscated or destroyed by any Government or Public or Local Authority or any person or Body having the jurisdiction to do so.
22. Any costs caused because any Government or Public or Local Authority or any person or Body having the jurisdiction to do so, have put restrictions on **Your Pet**.
23. Any amount caused by, arising out of or in any way connected with **You** breaking Australian animal health or importation laws or regulations.
24. Legal costs, expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.
25. Any loss caused by, arising out of or in any way connected with an act of force or violence for political, religious or ideological reasons war, acts of terrorism, riot, revolution or any similar event, including any chemical or biological terrorism.
26. The cost of treating any **Injury or Illness** or other bodily **Injury or Illness** caused by, arising out of, or in any way connected with a malicious act, deliberate **Injury** or bodily **Injury** or gross negligence caused by **You** or a member of **Your Immediate Family** or anyone living with **You** or acting with **Your** express or implied consent.
27. Any amount resulting from an **Illness** that **Your Pet** contracted while outside **Australia** or New Zealand, that it would not normally have contracted in **Australia** or New Zealand.
28. Any amount resulting from a disease transmitted from animals to humans.
29. Any pandemic disease that causes widespread **Illness**, death or destruction affecting dogs and cats.
30. Any dog not vaccinated against distemper, hepatitis, kennel cough, leptospirosis (in areas where it is prevalent and **Vets** recommend vaccination) and parvovirus.
31. Any cat not vaccinated against feline infectious enteritis, feline leukaemia and cat flu, or other disease that there is a known vaccine and **Vets** recommend vaccination.
32. Any amount arising from or in any way connected with **Your** failure to take all reasonable precautions to protect **Your Pet** from or by aggravating or prolonging an **Injury** or **Illness**.
  - **Your Legal Liability** for payment of compensation in respect of:
    - death, bodily **Injury** or **Illness**, and/or
    - physical loss or damage to property, except to the extent **You** have such cover under **Third Party Liability** of this **Policy** in relation to **Your Dog**.

The following **Exclusions** only apply when **Your Pet** is on a **Journey** within the **Agreed Countries**.

33. Any amount if **Your Pet** lives permanently outside of **Australia**.
34. Any **Journey You** take **Your Pet** on against a **Vets** advice which may result in aggravating or prolonging an **Injury** or **Illness**.

These are the main exclusions and **Policy Limits**. Additional **Exclusions** and **Policy Limits** that apply. For full details of all relevant **Policy Limits** and **Exclusions You** must read the **Certificate of Insurance** and the general exclusions to all sections and also the specific exclusions to each section under the heading "What **We** will not pay" as set out in this document.

## Excess

**You** will be required to pay a non-refundable **Excess** for claims covered under this **Policy**. Most **Excesses** are detailed on **Your Certificate of Insurance** but some additional **Excesses** may apply to some additional benefits provided by the **Policy**. **You** should read the **Policy** and **Your Certificate of Insurance** carefully so that **You** are aware of what **Excesses** may be applicable to **You** in the event of a loss.

Petplan is solely liable for qualifying and or identifying opportunities where any recovery can be obtained from a third party. **Your Excess** may be reimbursed upon a successful recovery by Petplan however, Petplan retains the right to not refund the **Excess** payment in any instance.

## Costs

The premium payable by **You** will be shown on **Your** tax invoice. **We** take into consideration a number of factors in setting premiums. The base premium **We** charge varies according to **Your** risk profile (e.g. the breed, age, gender and location of **Your Pet**, **Our** claims experience, **Your** individual claims experience, the increased costs of doing business and any events that impact the insurance industry).

**You** will also have to pay any compulsory government charges (e.g. Stamp Duty and GST) plus any additional charges of which **We** tell **You**. These amounts will be set out separately on **Your Certificate of Insurance** (or tax invoice) as part of the total premium payable.

Minimum premiums may apply. In some cases discounts may apply if **You** meet criteria **We** set. Any discounts/ entitlements only apply to the extent any minimum premium is not reached. If **You** are eligible for more than one, **We** also apply each of them in a predetermined order to the premium (excluding taxes and government charges) as reduced by any prior applied discounts/ entitlements. Any discounts will be applied to the base premium calculated prior to any taxes being added.

When **You** apply for this insurance, **You** will be advised of the total amount payable, when it needs to be paid and how it can be paid. If **You** fail to pay **We** may reduce any claim payment by the amount of premium owing and/or cancel the **Policy**. Special rights and obligations apply to instalment premium payments as set out below.

The amount **You** pay for **Your** premium includes Commission paid to Petplan. If a person has referred **You** to **Us**, **We** may pay them a part of the amount that relates to Commission. This will not increase the amount **You** pay **Us**.

## Payments by Instalments

If **You** pay **Your** premium by instalments refer to the 'General **Policy Conditions**' applicable to all sections for important details on **Your** and **Our** rights and obligations. Note that an instalment premium outstanding for 14 days may allow **Us** to refuse to pay a claim.

## Goods and Services Tax (GST)

All monetary limits in the **Policy** are inclusive of GST. In the event of a claim, if **You** are not registered for GST, **We** will reimburse **You** the GST component in addition to the amount **We** pay **You**. If **You** are registered for GST, **You** will need to claim the GST component from the Australian Taxation Office.

**You** must advise **Us** of **Your** correct input tax credit percentage where **You** are registered as a business and have an Australian Business Number. **You** are liable to **Us** for any GST liability **We** incur arising from **Your** incorrect advice.

## Your cooling-off period and Cancellation rights

**You** have a cooling off period of twenty-one (21) days from the date **You** purchased the **Policy**. During this period **You** can return the **Policy** and receive a refund of any premium paid, provided **You** have not exercised right or power under the **Policy** (e.g. made any claim) or the **Period of Insurance** has not ended.

**We** will not accept **Policy** cancellation requests by telephone. To exercise **Your** cooling off rights **You** must advise **Us** of **Your** intention to cancel in writing. Send written confirmation to: Petplan Australasia Pty Ltd, 1-3 Smolic Crt, Tullamarine VIC, 3043 or email to [info@petplan.com.au](mailto:info@petplan.com.au)

**We** may deduct from **Your** refund amount any reasonable administrative and transaction costs incurred by **Us** that are reasonably related to **You** buying and cancelling the **Policy** and any government taxes or duties **We** cannot recover.

After the cooling off period has ended, **You** still have cancellation rights, however **We** may deduct a pro rata proportion of the premium for time on risk, plus any reasonable administrative costs and any government taxes or duties **We** cannot recover (refer to 'General Conditions'. Cancellation on pages 27 and 28 for full details).

### How do I make a claim?

**We** will not guarantee on the phone if **We** cover a claim under the **Policy**. **You** must send **Us** a claim form that has been properly filled in. **We** will then write to **You** with **Our** decision.

Before **Your Pet** is treated, **You** must make sure that the **Vet** who is treating it is prepared to complete **Our** claim form and provide fully itemised invoices, and where requested, supply a complete medical history of **Your Pet**.

**You** must fill in a claim form and ask **Your Vet** to fill in their part. **We** will not pay for the **Vet** to do this. Send **Us** the claim form together with the original fully itemised invoices setting out the costs involved.

**You** can notify **Us** of a claim and obtain a claim form by calling 1300 738 225 or emailing [claims@petplan.com.au](mailto:claims@petplan.com.au). Alternatively, if **You** already have a claim form or have downloaded a claim form from **Our** Website at <http://www.petplan.com.au/claims>. **You** can notify **Us** by sending the completed claim form to: Petplan Australasia Pty Ltd, Claims Centre, 1-3 Smolic Court, Tullamarine, VIC 3043.

### Updating this PDS

**We** may need to update this PDS from time to time if certain changes occur where required and permitted by law. **We** will issue **You** with a new PDS or a Supplementary PDS or other compliant documents to update the relevant information except in limited cases. Where the information is not something that would be materially adverse from the point of view of a reasonable person considering whether to buy this insurance, **We** may issue **You** with notice of this information in other forms or keep an internal record of such changes (**You** can get a paper copy free of charge by contacting **Us** using **Our** details on the back cover of this PDS). Other documents may form part of **Our** PDS and the **Policy**. If they do **We** will tell **You** in the relevant document.

### Further information and confirmation of transactions

If **You** require further information about this insurance or wish to confirm a transaction, please contact **Us**.

### Your Pet Insurance Policy - Details

Details of **Your Pet's** cover are outlined in the **Policy** and the **Certificate of Insurance**. There are ten (10) sections of cover but please be aware that some of the sections of cover may not be automatically provided and as such may not be included in the **Policy**. Cover under a section is only provided to **You** if it is shown as covered on **Your Certificate of Insurance**. **We** recommend **You** check **Your Pet's** cover and contact **Us** as soon as possible if this is not as expected.

These Terms and Conditions are part of **Your** insurance contract. The other parts are **Your Certificate of Insurance**, and **Your** written, internet or telephone application. To understand exactly what **Your** insurance contract covers **You** must read **Your Certificate of Insurance**, together with all other documents that make up **Our** contract with **You**.

## Definitions

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

<b>Accident</b>	<p>means a sudden, unexpected, unusual, specific event, which occurs fortuitously at an identifiable time and place and is unforeseen or unintended. All <b>Accidents</b> consequent upon or attributable to one source or original cause are treated by <b>Us</b> as one <b>Accident</b>. This does not include any physical damage or trauma that is of a gradual nature or that happens over a period of time.</p> <p>For the sake of clarity, the following <b>Conditions</b> are not considered <b>Accidents</b>: luxating patella; a rupture or strain of one or both cruciate ligaments; degenerative joint disease; hip dysplasia and hyperextending hocks; Juvenile Pubis Symphysiodesis (JPS).</p>
<b>Acupuncture or Homeopathy</b>	<p>means <b>Acupuncture or Homeopathy</b> which is carried out by a <b>Vet</b>.</p>
<b>Alternative or Complementary Treatment</b>	<p>means the cost of any examination, consultation, advice, test and legally prescribed medication for the following procedures where they treat an <b>Illness</b> or <b>Injury</b>. This includes any <b>Veterinary Treatment</b> specifically needed to carry out the procedure;</p> <ol style="list-style-type: none"><li>1. <b>Acupuncture or Homeopathy</b> carried out by or <b>Herbal Medicine</b> prescribed by a <b>Member of a Veterinary Practice</b>.</li><li>2. <b>Chiropractic Manipulation</b> carried out by a <b>Member of a Veterinary Practice</b>, providing the member is a qualified animal chiropractor.</li><li>3. <b>Hydrotherapy</b> carried out by a <b>Member of a Veterinary Practice</b> in a pool/water treadmill owned by the <b>Veterinary Practice</b> providing the member is a qualified animal Hydrotherapist.</li><li>4. <b>Osteopathy</b> carried out by a <b>Member of a Veterinary Practice</b> providing the member is a qualified animal Osteopath.</li></ol>
<b>Agreed Countries</b>	<p>means any Australian Quarantine &amp; Inspection Service (AQIS) approved Countries from which a dog or cat can return to <b>Australia</b> from that does not require quarantine. (At the date of this document the countries specified are New Zealand, Cocos (Keeling) Island, Norfolk Island).</p>
<b>Australia</b>	<p>means Commonwealth of <b>Australia</b>.</p>
<b>Behaviour modification programme</b>	<p>means a programme written by an Animal Behaviourist who is a <b>Member of a Veterinary Practice</b> detailing specific techniques to be used and action to be taken with the aim of permanently changing <b>Your Pet's</b> behaviour.</p>
<b>Behavioural Illness</b>	<p>means any change to <b>Your Pet's</b> normal behaviour, resulting from a mental or emotional disorder diagnosed by a <b>Vet</b>.</p>
<b>Bilateral Condition</b>	<p>means any <b>Condition</b> affecting body parts of which the <b>Pet</b> has at least two, including, but not limited to eyes, ears, patella's (knees), cruciate ligaments. When applying an exclusion, <b>Bilateral Conditions</b> are considered the one <b>Condition</b>.</p>

<b>Certificate of Insurance</b>	means the relevant <b>Certificate of Insurance</b> We issue including on renewal or variation of the <b>Policy</b> containing details of the cover provided under the <b>Policy</b> , including any exclusions and other specific insurance details that <b>We</b> have applied to <b>Your</b> cover.
<b>Clinical sign(s):</b>	means change(s) in <b>Your Pet's</b> normal healthy state, its bodily functions or behaviour.
<b>Condition</b>	means any <b>Condition</b> that causes discomfort, dysfunction, distress, including <b>Injuries</b> and <b>Illness</b> , disabilities, disorders, <b>Clinical signs</b> , syndromes, infections, isolated symptoms, deviant behaviour, and atypical variations of structure and function and/or death to the <b>Pet</b> afflicted.
<b>Covered for Life Policy</b>	means with this cover where <b>You</b> can continue to claim for the <b>Treatment</b> for on-going <b>Illness</b> or <b>Injuries</b> throughout <b>Your Pet's</b> lifetime, provided you renew the <b>Policy</b> without any break in cover and pay the required premium.
<b>Chiropractic Manipulation</b>	means <b>Chiropractic Manipulation</b> which is carried out by a <b>Member of a Veterinary Practice</b> who is a qualified animal Chiropractor.
<b>Elective Treatment, diagnostic or procedure</b>	means a <b>Treatment</b> that is, but not limited to, de-sexing, spaying or castration; micro-chipping; grooming and de-matting, cosmetic or aesthetic surgery, or elective including but not limited to dew-claw removal, prescription diet foods, and any <b>Treatment</b> not related to an <b>Injury</b> , <b>Illness</b> , or trauma. <b>Elective</b> surgery or <b>Treatment</b> that is beneficial to the <b>Pet</b> but is not essential for <b>Your Pet's</b> survival or does not form part of a <b>Treatment</b> for an <b>Injury</b> or <b>Illness</b> , or any <b>Treatment</b> , diagnostic or procedure <b>You</b> request, which the <b>Vet</b> confirms is not necessary to treat an <b>Injury</b> or <b>Illness</b> .
<b>Excess</b>	means the amount(s) shown on <b>Your Certificate of Insurance</b> that <b>You</b> must pay for each unrelated <b>Condition</b> claim made under <b>Your Policy</b> per <b>Policy Year</b> . <ul style="list-style-type: none"> <li>• <b>Veterinary Fees</b> and <b>Alternative or Complementary Treatment Excesses</b> may be either: <ol style="list-style-type: none"> <li>a. the Fixed <b>Excess</b> only; or</li> <li>b. the Fixed <b>Excess</b> and the Optional Pet % Share <b>Excess</b>;</li> </ol> An additional <b>Age Contribution</b> may also apply and where applicable will be shown on <b>Your Certificate of Insurance</b>. </li> <li>• Separate <b>Excesses</b> apply for <b>Veterinary Fees</b> and <b>Alternative or Complimentary Treatment</b> which means if <b>You</b> claim under both benefits for the same <b>Injury</b> or <b>Illness</b>, <b>You</b> will pay an <b>Excess</b> for each benefit.</li> </ul>
<b>Family</b>	means <b>Your Immediate Family</b> and, grandparents, brothers, sisters, grandsons, and/or granddaughters including <b>Family</b> of step and defacto relationships.
<b>Herbal Medicine</b>	means <b>Herbal Medicine</b> prescribed by a <b>Member of a Veterinary Practice</b> .
<b>Home</b>	means the place in <b>Australia</b> where <b>You</b> usually live.

<b>Hydrotherapy</b>	<p>means the <b>Treatment of Injury and Illness</b>, with, or in, water, including swimming in a pool and the use of a water treadmill, which is carried out:</p> <ul style="list-style-type: none"> <li>• By a <b>Member of a Veterinary Practice</b> providing the <b>Hydrotherapy</b> is carried out in a pool/water treadmill owned by the veterinary practice.</li> </ul>
<b>Illness</b>	<p>means an unhealthy state, condition, ailment, affliction, sickness, disease, disorder, defect, syndrome or abnormality that causes pain, dysfunction or distress and that is not due to an external <b>Injury</b>.</p>
<b>Illness which starts in the first 21 days of cover</b>	<p>means an <b>Illness</b> that:</p> <ol style="list-style-type: none"> <li>Showed <b>Clinical signs</b>,</li> <li>Is the same as, or has the same <b>Clinical signs</b> or diagnosis as an <b>Illness</b> that showed <b>Clinical signs</b>,</li> <li>Is caused by, relates to, or results from, a <b>Clinical sign</b> that first occurred, or an <b>Illness</b> that, showed <b>Clinical signs</b>,</li> <li>In the first twenty-one (21) days of: <ul style="list-style-type: none"> <li>• <b>Your Pet's first Policy Year</b>, or</li> <li>• The section being added to <b>Your</b> insurance.</li> </ul> </li> </ol> <p>No matter where the <b>Illness</b> or <b>Clinical signs</b> occur or happen in, or on, <b>Your Pet's</b> body. The twenty-one (21) day <b>Waiting Period</b> will cease at 00.01 on the twenty-second (22<sup>nd</sup>) day of cover under this <b>Policy</b>.</p>
<b>Immediate Family</b>	<p>means spouse, civil partner, life partner, partner, defacto partner, parents, sons and daughters, including <b>Family</b> of step and/or defacto relationships.</p>
<b>Injury</b>	<p>means a physical <b>Injury</b> or trauma caused immediately, solely and directly from an <b>Accident</b>. This does not include any physical <b>Injury</b> or trauma that happens over a period of time or is of a gradual nature.</p>
<b>Journey</b>	<p>means travel from <b>Your Home</b> within <b>Australia</b> or any of the <b>Agreed Countries</b> undertaken during the <b>Period of Insurance</b> for a maximum of ninety (90) days for all journeys in the <b>Period of Insurance</b>. This includes the duration of <b>Your</b> holiday or business trip and any travel, in and between <b>Australia</b> and an <b>Agreed Country</b> and return <b>Journeys</b> to <b>Your Home</b>.</p>
<b>Market Value</b>	<p>means the price generally paid for an animal of the same age, breed, pedigree, sex and breeding ability at the time <b>You</b> took ownership of <b>Your Pet</b> as determined by <b>Us</b>.</p>
<b>Maximum Benefits</b>	<p>means the most <b>We</b> will pay for the relevant level of cover <b>You</b> have chosen during the <b>Period of Insurance</b> as set out in the <b>Certificate of Insurance</b>, subject to exclusions of the <b>Policy</b> and subject to the <b>Policy Aggregate</b> less the applicable <b>Excess</b>.</p>
<b>Member of a Veterinary Practice</b>	<p>means any person legally employed by a <b>Veterinary Practice</b> under a contract of employment, other than a <b>Vet</b> who may be the Insured.</p>
<b>Osteopathy</b>	<p>means <b>Osteopathy</b> which is carried out by a <b>Member of a Veterinary Practice</b> who is a qualified animal Osteopath.</p>



<b>Our Vet</b>	means any <b>Vet</b> appointed or engaged by <b>Us</b> to carry out <b>Treatment</b> to <b>Your Pet</b> or discuss <b>Your Pet's Treatment</b> with <b>Your Vet</b> .
<b>Optional Extra Benefit</b>	means an additional Benefit that <b>You</b> can elect to include in addition to the basic insurance. There are <b>Optional Extra Benefits</b> in <b>Petplan Covered 4 Life Classic Cover</b> being only: <ul style="list-style-type: none"> <li>a. Theft or Straying</li> <li>b. Death from <b>Illness</b></li> <li>c. Death from <b>Injury</b></li> </ul> For <b>Optional Extra Benefits</b> to be included <b>You</b> must select the Option and pay an additional premium. If applicable the <b>Optional Extra Benefit</b> will be shown on <b>Your Certificate of Insurance</b> .
<b>Petplan®</b>	Is a Registered Trade Mark, and Products sold under this Trade Mark in <b>Australia</b> are sold exclusively by Petplan Australasia Pty Ltd under Licence from Pet Plan Limited.
<b>Pet Immigration Rules</b>	means a system that allows pet owners in <b>Australia</b> to take their pets to the <b>Agreed Countries</b> and bring them back to <b>Australia</b> without the need for quarantine.
<b>Policy Aggregate</b>	means the total amount payable for all <b>Veterinary Fees</b> and <b>Alternative or Complementary Treatment</b> for <b>Injuries</b> and/or <b>Illnesses</b> occurring during any one <b>Policy Year</b> as specified in the <b>Certificate of Insurance</b> .
<b>Policy</b>	means this document and the <b>Certificate of Insurance</b> and any other documents <b>We</b> issue to <b>You</b> which are expressed to form part of the <b>Policy</b> terms, which set out the cover <b>We</b> provide for the <b>Period of Insurance</b> . For the sake of clarity, it does not include any prior <b>Policy</b> that this is a renewal of or any future <b>Policy</b> that is a renewal of this <b>Policy</b> .
<b>Policy Year</b>	means the time during which <b>We</b> give cover as shown on <b>Your Certificate of Insurance Policy</b> details. This is normally twelve (12) months but may be less if <b>Your Pet</b> has been added to, or cancelled from, <b>Your</b> insurance.
<b>Period of Insurance</b>	means the time during which <b>We</b> give cover as shown on <b>Your Certificate of Insurance</b> . It does not refer to any prior <b>Period of Insurance</b> if the <b>Policy</b> is a renewal of a previous <b>Policy</b> or any future <b>Period of Insurance</b> for any <b>Policy You</b> may enter into with <b>Us</b> upon renewal. Each <b>Period of Insurance</b> is treated as separate. This is normally twelve (12) months but may be less if <b>Your Pet</b> has been added to <b>Your Insurance</b> or it has been cancelled.
<b>Physiotherapy</b>	means <b>Physiotherapy</b> (not including <b>Hydrotherapy</b> ) carried out by a <b>Member of a Veterinary Practice</b> who is a qualified animal Physiotherapist.

<p><b>Pre-Existing Condition(s)</b></p>	<p>means any <b>Condition(s)</b> or symptom(s), sign(s) or <b>Clinical sign(s)</b> of that <b>Condition, Injury</b> or <b>Illness</b> occurring or existing in any form that;</p> <ol style="list-style-type: none"> <li>Has happened or first showed <b>Clinical signs</b>;</li> <li>Has the same diagnosis or <b>Clinical signs</b> as an <b>Injury, Illness</b> or <b>Clinical sign Your Pet</b> had; or,</li> <li>Is caused by, relates to, or results from, an <b>Injury, Illness</b> or <b>Clinical sign Your Pet</b> had occurring or existing: <ul style="list-style-type: none"> <li>Before <b>Your Pet's</b> cover started, or prior to the <b>Policy</b> commencement date;</li> <li>During the twenty-one (21) day <b>Waiting Period</b>; or</li> <li>Before the section was added to <b>Your</b> insurance.</li> </ul> </li> </ol> <p>This applies no matter where the <b>Injury, Illness</b> or <b>Clinical sign(s)</b> occurred or happen in, or on, <b>Your Pet's</b> body. This is regardless of whether or not <b>We</b> place any exclusion(s) for the <b>Injury/Illness</b>. For the avoidance of doubt when referring to <b>Pre-Existing Conditions</b>, and <b>Conditions</b> affecting a part of <b>Your Pet's</b> body of which it has two, will be deemed to be a <b>Bilateral Condition</b> and both will be excluded from cover.</p>
<p><b>Routine or Preventative Treatment</b></p>	<p>means care or <b>Treatment</b> such as check-ups and procedures that are designed to prevent future <b>Illnesses</b> from occurring rather than treating existing <b>Illnesses</b>. These include, but are not limited to annual physical examinations and check-ups, vaccinations, heart worm prevention medication; flea and other internal/external parasite prevention.</p>
<p><b>Select Breed(s)</b></p>	<p>means Bandog, Bavarian Mountain Hound, Bergamasco Shepherd Dog, Briard, Blood Hound, Boerboel, Beauceron, Bernese Mountain Dog, Bracco, All Bulldogs (i.e. English, American, Australian, Miniature, etc.), Bull Arab, Deerhound, Dogue de Bordeaux, Entlebucher Mountain Dog, Estrela Mountain Dog, Grand Blue De Gascoigne, Great Dane, Greater Swiss Mountain Dog, Hamiltonstovare, Hungarian Kuvasz, Irish Wolfhound, Komondor, Maremma Sheepdog, Leonberger, All Mastiff Breeds, Newfoundland, Old English Sheepdog, Polish Lowland Sheepdog, Pyrenean Mountain Dog, Rottweiler, Russian Black Terrier, Shar Pei, St Bernard or any crosses of these breeds. (<b>We</b> may modify this list from time to time) Please refer to the '<b>Select Breed</b>' section on <b>Your Certificate of Insurance</b> Animal Details to find out if <b>Your Pet</b> is a <b>Select Breed</b>.</p>
<p><b>Therapist</b></p>	<p>means a Certified Clinical Animal Behaviourist who is a <b>Member of a Veterinary Practice</b>.</p>
<p><b>Travel Documents</b></p>	<p>means the Pet's Import Permit issued by AQIS, any Vaccination Certificates and/or Certificate for <b>Treatment</b> against parasites issued for <b>Your Pet</b> under the Regulations for taking a pet to <b>Australia</b>.</p>
<p><b>Treatment</b></p>	<p>means <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b>.</p>
<p><b>Treatment of a Behavioural Illness</b></p>	<p>means the <b>Treatment</b>, by a <b>Therapist</b> who is <b>Member of a Veterinary Practice</b>, of a change(s) to <b>Your Pet's</b> normal behaviour that is caused by a mental or emotional disorder which could not have been prevented by training and/or spaying/castration.</p>

<b>Vet</b>	means a registered Veterinarian, Specialist Veterinarian, vet practice, clinic, hospital, centre including referral hospitals, licensed to practice in <b>Australia</b> , other than a <b>Vet</b> who may be the Insured.
<b>Veterinary Fees</b>	means the amount <b>Vets</b> in general or referral practices usually charge.
<b>Veterinary Practice</b>	means any veterinary service provided by a veterinary organisation or business.
<b>Veterinary Treatment</b>	<p>means the cost of the following when required to treat an <b>Illness</b> or <b>Injury</b>,</p> <ul style="list-style-type: none"> <li>• any examination, consultation, advice, tests, X-rays, diagnostic procedure, surgery and nursing carried out by a <b>Vet</b>, a Veterinary Nurse or another <b>Member of a Veterinary Practice</b> under the supervision of a <b>Vet</b>, and</li> <li>• Any medication legally prescribed by a <b>Vet</b></li> <li>• <b>Physiotherapy</b> and <b>Treatment of a Behavioural Illness</b></li> </ul>
<b>Waiting Period</b>	means a period of twenty-one (21) days starting from the commencement date of the <b>Policy</b> (excluding renewals) as shown on <b>Your Certificate of Insurance</b> during which an <b>Illness</b> or <b>Condition</b> that first occurs or shows <b>Clinical signs</b> will be excluded from Cover unless otherwise stated on <b>Your Certificate of Insurance</b> . The twenty-one (21) day <b>Waiting Period</b> will cease at 00.01 on the twenty second (22 <sup>nd</sup> ) day of cover.
<b>We, Us, Our</b>	means <b>Petplan</b> acting on behalf of HDI Global Specialty SE -Australia, the Insurer of the <b>Policy</b> .
<b>You, Your</b>	means the person(s) named on the <b>Certificate of Insurance</b> .
<b>Your Pet</b>	means the dog or cat named on the <b>Certificate of Insurance</b> .

## General Conditions

<b>Conditions of the Policy</b>	<b>You</b> must keep to the General <b>Conditions</b> and Special <b>Conditions</b> of the <b>Policy</b> to have the full protection of the <b>Policy</b> . If <b>You</b> do not, and the <b>Condition</b> <b>You</b> have not kept to relates to a claim, <b>We</b> may refuse or reduce the amount <b>We</b> pay under the claim.
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## Caring for Your Pet (Dental, Vaccinations)

Throughout the **Period of Insurance** **You** must take all reasonable steps to maintain **Your Pet's** health and to prevent **Injury, Illness** and loss.

- a. **You** must provide **Routine or Preventative Treatment** normally recommended by a **Vet** to prevent **Illness or Injury**. If there is a disagreement between **You** and **Us** as to what reasonable steps are, the details will be referred to an independent national Welfare body or an independent **Vet** mutually agreed upon.
- b. **You** must arrange and pay for **Your Pet** to have a yearly dental examination and to receive any oral **Treatment** normally recommended by a **Vet** to prevent **Illness or Injury**. Any **Treatment** recommended as a result of the dental examination must be carried out as soon as possible. If **You** do not comply with this obligation then any claims which relate to dental **We** may refuse or reduce the amount **We** pay under the claim.
- c. **You** must keep **Your Pet** vaccinated against the following:

**Dogs** – Distemper, hepatitis, parvovirus, kennel cough and leptospirosis (in areas where it is prevalent and **Vets** recommend vaccination) and any other vaccination recommended to **You** by a **Vet**.

**Cats** – Feline infectious enteritis, feline leukaemia and cat flu and any other vaccination recommended to **You** by a **Vet**.

If **You** do not keep **Your Pet** vaccinated, **We** may refuse or reduce the amount **We** pay under the claim that result from any of the above **Illnesses**.

- d. **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 Illness**. **You** must follow the advice and recommendations of the treating **Vet** so as not to prolong or aggravate the **Illness or Injury**. If **You** do not follow the **Vet's** advice **We** may refuse or reduce the amount **We** pay relating to that **Injury or Illness**. And if **We** decide, **You** must also take **Your Pet** to **Our Vet**.

If **You** do not keep **Your Pet** vaccinated, **We** may refuse or reduce the amount **We** pay under the claim that result from any of the above **Illnesses**.

## Claims Pre-Authorisation

**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.

## Vet Information, Other Insurance

When **You** make a claim **You** agree to give **Us** any information **We** may reasonably ask for.

## Legal rights against others

- a. If there is any other insurance under which **You** are entitled to make a claim **You** must report the incident to that insurance company and tell **Us** their name and address and **Your Policy** and claim number with them. To the extent permitted by law, **We** will only pay **Our** share of the claim.
- b. 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.

<p><b>Claims - Paid Direct to Vet</b></p>	<p>If <b>We</b> agree for a claim payment to be paid directly to <b>Your Vet</b> and <b>You</b> allow this, then if the <b>Vet</b>, who has treated <b>Your Pet</b> or is about to treat <b>Your Pet</b>, asks for information about <b>Your</b> insurance that relates to a claim, <b>We</b> will tell the <b>Vet</b> what the insurance covers, what <b>We</b> will not pay for, how the amount <b>We</b> pay is calculated and if the premiums are paid to date.</p>
<p><b>Claims - Vet Fee Charges</b></p>	<p>If the <b>Veterinary Fees</b> <b>You</b> are charged are higher than the <b>Veterinary Fees</b> normally charged by a general or referral practice, <b>We</b> reserve the right to request a second opinion from <b>Our Vet</b> as to whether the fees are reasonable. If <b>Our Vet</b> does not agree that the <b>Veterinary Fees</b> charged are reasonable <b>We</b> may decide to pay only the <b>Veterinary Fees</b> usually charged by a general or referral practice in a similar area as determined by <b>Our Vet</b>.</p>
<p><b>Claims - Over Treatment</b></p>	<p>If <b>We</b> consider the <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b> <b>Your Pet</b> receives may not be required, or may be excessive when compared with the <b>Treatment</b> normally recommended to treat the same <b>Illness</b> or <b>Injury</b> by general or referral practices, <b>We</b> reserve the right to request a second opinion from <b>Our Vet</b>. If <b>Our Vet</b> does not agree that the <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b> provided is reasonably required <b>We</b> may decide to pay only the cost of the <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b> that was necessary to treat the <b>Injury</b> or <b>Illness</b>, as advised by <b>Our Vet</b> from whom <b>We</b> have requested the second opinion.</p>
<p><b>Claims - Veterinary information</b></p>	<p><b>You</b> agree that any <b>Vet</b> or <b>Therapist</b> has <b>Your</b> permission to release any information <b>We</b> ask for about <b>Your Pet</b>. If the <b>Vet</b> or <b>Therapist</b> makes a charge for this, <b>You</b> must pay the charge.</p>
<p><b>Claims - Settlement</b></p>	<p>When <b>We</b> settle <b>Your</b> claim, <b>We</b> reserve the right to deduct from the claim amount, any amount due to <b>Us</b>.</p>
<p><b>Cancelling Your Policy</b></p>	<p><b>You</b> can cancel <b>Your Policy</b> by writing to <b>Us</b>. <b>You</b> are entitled to a refund of the money <b>You</b> have paid for the <b>Period of Insurance</b> after the cancellation date.</p>
<p><b>Cancellation rights</b></p>	<p>a. In addition to <b>Your</b> Cooling off rights detailed earlier, <b>You</b> may cancel the <b>Policy</b> at any time by notifying <b>Us</b>.</p> <p>b. Cancellation by <b>You</b> will be effective from 16:00 (4:00pm) AEST on the day <b>We</b> receive <b>Your</b> notice of cancellation.</p> <p>c. <b>We</b> have the right to cancel the <b>Policy</b> where permitted by and in accordance with law. For example, <b>We</b> may cancel:</p> <ol style="list-style-type: none"> <li>i. If <b>You</b> failed to comply with <b>Your</b> Duty of Disclosure; or</li> <li>ii. Where <b>You</b> have made a misrepresentation to <b>Us</b> during negotiations prior to the issue of the <b>Policy</b>; or</li> <li>iii. Where <b>You</b> have failed to comply with a provision of the <b>Policy</b>, including the term relating to payment of premium; or</li> </ol>

## Cancellation rights (cont.)

- iv. Where **You** have made a fraudulent claim under the **Policy** or under some other contract of insurance that provides cover during the same period of time that the **Policy** covers **You**, and **We** may do so by giving **You** three days' notice in writing of the date from which the **Policy** will be cancelled. The notification may be delivered personally or posted to **You** at the address last notified to **Us**.
- d. Cancellation by **Us** will be effective from the later of 16:00 (4:00pm) AEST on the third business day after the day it is given to **You** or such other date specified in the cancellation notice.

If **You** or **We** cancel the **Policy** **We** may deduct a pro rata proportion of the premium for time on risk, reasonable administrative and transaction costs related to the acquisition and termination of the **Policy** **We** incur and any government taxes or duties **We** cannot recover.
- e. For the avoidance of doubt, if the **Policy** is cancelled or comes to an end for any reason all cover for **Your Pet** will stop on the date and time the cancellation becomes effective and no further claims will be paid.

## Paying Your premium

- a. If **You** pay by monthly instalments and if **You** do not pay an instalment on time, then if the outstanding instalment remains unpaid for at least fourteen (14) days **We** can refuse to pay a claim arising after the payment was due or if the instalment remains unpaid for at least one month **We** can cancel the **Policy**. **We** also reserve the right to have **You** pay the rest of the yearly premium immediately.
- b. If **Your** instalments are frequently late or missed **We** also reserve the right to have **You** pay all premiums due until the end of the current **Period of Insurance**.
- c. If the **Policy** is cancelled by **Us** because **You** have not paid the premium **We** may agree to reinstate the **Policy**. If **We** agree, **We** may charge an administration fee and may require **You** to pay all premiums due until the end of the current **Period of Insurance**.
- d. When **We** settle **Your** claim, **We** will deduct from the claim, any amount due to **Us**.

## Renewing Your Policy

If **You** pay **Your** premium by Direct Debit instalment, when the **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** at least fourteen (14) days before the **Policy** expires with full details of **Your** premium and terms upon which renewal will be offered for a further **Period of Insurance**. If **You** do not want to renew the **Policy** just let **Us** know.

It is important that **You** check the terms of any renewal offer to satisfy yourself that the details are correct. In particular, check the sum insured amounts and **Excess(es)** applicable and ensure that the levels of cover are appropriate for **You**.

At each renewal, **We** ask **You** to notify **Us** of certain information. The information **We** require from **You** will be stated in **Your** renewal documentation. It is important that **You** provide **Us** with full and accurate information as this could affect a future claim. Please note that **You** need to comply with **Your Duty of Disclosure** before each renewal (see above).

<p><b>Changes at renewal</b></p>	<p>This document also applies for any offer of renewal <b>We</b> make, unless <b>We</b> tell <b>You</b> otherwise. When <b>We</b> offer renewal <b>We</b> may:</p> <ul style="list-style-type: none"> <li>• Change the premium, <b>Excesses</b> and <b>Policy</b> Terms and <b>Conditions</b>.</li> <li>• Place exclusions because of <b>Your Pet's</b> claims and <b>Veterinary</b> history.</li> <li>• Limit or withdraw Third Party Liability cover based on a review of <b>Your Pet's</b> behaviour. For example, any aggressive tendencies shown or any incidents where <b>Your Pet</b> has caused <b>Injury</b> to a person or another animal.</li> </ul>
<p><b>Upgrading cover</b></p>	<p>If a higher plan is available for <b>Your Pet</b> <b>You</b> can apply for an upgrade at renewal of <b>Your Policy</b> and at this time the request will be subject to an underwriting review of <b>Your Pet's</b> veterinary history.</p>
<p><b>Changes during the Period of Insurance</b></p>	<p>Changes will only be made to <b>the Policy</b> at renewal, <b>We</b> will not change the cover <b>We</b> provide for <b>Your Pet</b> during the <b>Period of Insurance</b>, unless:</p> <ol style="list-style-type: none"> <li>a. <b>You</b> decide to change <b>Your Pet's</b> cover.</li> <li>b. <b>You</b> did not tell <b>Us</b> about something when <b>We</b> previously asked.</li> <li>c. <b>You</b> provided <b>Us</b> with inaccurate information when previously asked, regardless of whether or not <b>You</b> thought it was accurate at the time.</li> </ol> <p>If <b>You</b> transfer <b>Your Pet</b> to a plan with additional or higher benefit limits, the additional or higher benefits will not apply if the <b>Condition</b> being claimed for first occurred prior to the change in the level of cover.</p>
<p><b>Exclusions applicable to Your Pet</b></p>	<p>Any <b>Injury/Illness</b> which occurred before <b>Your Pet's</b> cover started is a <b>Pre-Existing Condition</b> and something which will never be covered by <b>Your</b> insurance. This is regardless of whether <b>We</b> place an exclusion for the <b>Injury/Illness</b> or not.</p> <ol style="list-style-type: none"> <li>a. Any <b>Illness which starts in the first twenty-one (21) days of cover</b> (The <b>Waiting Period</b> will cease at 00.01 on the twenty-second (22<sup>nd</sup>) day of cover).</li> <li>b. In addition to the exclusions set out in these <b>Terms and Conditions</b>, the <b>Policy</b> does not cover any amount that results from an <b>Injury, Illness</b> or incident which is shown as excluded on <b>Your Certificate of Insurance</b>.</li> <li>c. Some exclusions are temporary and upon request may be lifted following underwriting review.</li> </ol>
<p><b>Policy Limits</b></p>	<p>Limits do apply to some items covered by <b>Your Policy</b>. <b>You</b> should read the <b>Policy</b> carefully so that <b>You</b> are aware of what limits may be applicable to <b>You</b> in the event of a loss.</p>

<b>Travel Cover</b>	<p>Some sections of <b>Your Policy</b> provide cover whilst <b>Your Pet</b> is on a <b>Journey</b>.</p> <p>a. This type of cover is limited to the <b>Agreed Countries</b> for a maximum of ninety (90) days in each <b>Period of Insurance</b>. While <b>Your Pet</b> is outside <b>Australia</b> <b>You</b> ou must follow the <b>conditions</b> of the Australian Pet Immigration Regulations. Full details can be found on the Department of Agriculture and Water Resources Website, <a href="http://www.agriculture.gov.au/cats-dogs/cats-dogs-returning-to-australia">http://www.agriculture.gov.au/cats-dogs/cats-dogs-returning-to-australia</a>, or Contact National office GPO Box 858, Canberra ACT 2601. Phone: +61 2 6272 3933.</p> <p>b. <b>You</b> agree to pay translation costs for any claim documentation not written in English.</p>
<b>Jurisdiction</b>	<p>a. Australian law applies to this insurance contract.</p> <p>b. Unless <b>We</b> agree otherwise the language of the <b>Policy</b> and all communications relating to it will be in English.</p>
<b>Your Residence</b>	<p>a. <b>Your Pet</b> must live in <b>Australia</b>.</p> <p>b. If <b>Your</b> address, or the address of <b>Your Pet</b>, changes <b>You</b> must advise <b>Us</b> as soon as possible as this may affect the insurance cover provided.</p>
<b>False information</b>	<p>If <b>You</b> have provided false information or make a false or exaggerated claim, or any claim involving <b>Your</b> dishonesty, this <b>Policy</b> will end and <b>We</b> will not make any further payments.</p>
<b>Fraudulent Claims</b>	<p>If <b>You</b> submit a fraudulent claim, or solicit <b>Your Vet</b> to behave in a fraudulent manner or persuade them to falsify or change information regarding a claim, then the claim may be denied and <b>We</b> may cancel the <b>Policy</b>. <b>We</b> may also be entitled to reclaim any payments already made to <b>You</b> in respect to such claims.</p>
<b>Lost Pets</b>	<p>If <b>Your Pet</b> is lost or missing when <b>You</b> first take out the <b>Policy</b>, the cover under this <b>Policy</b> will not start until <b>You</b> are reunited with <b>Your Pet</b> and any incident, <b>Injury</b> or <b>Illness</b> which occurs before <b>You</b> are reunited will not be covered by the <b>Policy</b>.</p>
<b>Your Rights</b>	<p>The <b>Policy</b> is subject to any rights and remedies <b>You</b> have under the Insurance Contracts Act 1984 (Cth).</p>

## Cover

At **Petplan**, **We** are proud of the insurance cover **We** provide for pets – in fact, every Pet deserves **Petplan**. In return for the payment of **Your** premium, **We** will provide cover in the following sections if they are shown on **Your Certificate of Insurance**. The cover applies within **Australia** and any of the **Agreed Countries** for a maximum of ninety (90) days for all **Journeys** undertaken during the **Period of Insurance**. This includes the duration of **Your** holiday or business trip and any travel, in and between **Agreed Countries** and return **Journeys** to **Your Home**. The cover **You** have chosen and the applicable **Maximum Benefits** and **Excesses** will be shown on **Your Certificate of Insurance**.



## Section 1a – Veterinary Fees

Cover under this section applies in **Australia** and **Agreed Countries** only.

### We will pay

We will pay the cost of **Veterinary Fees** incurred for the **Veterinary Treatment Your Pet** has received to treat an **Injury** and/or **Illness** during the **Period of Insurance**.

When referred and endorsed by **Your Vet**, this section also covers the cost of **Physiotherapy** to treat an **Injury** and/or **Illness** and the **Treatment of a Behavioural Illness**.

### You must pay:

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

## Section 1b – Alternative or Complementary Treatment

Cover under this section applies in **Australia** only

### We will pay:

We will pay when referred and endorsed by **Your Vet**, the cost of any examination, consultation, advice, test and legally prescribed medication for the following when it is deemed necessary by **Your Vet** to treat an **Injury** and/or **Illness**:

- **Acupuncture**
- **Homeopathy**
- **Herbal Medicine**
- **Chiropractic Manipulation**
- **Osteopathy**
- **Hydrotherapy**

For up to ten (10) sessions in total per **Period of Insurance**.

Any amount paid under Section 1B are part of Section 1A, **Veterinary Fees Policy Aggregate**.

### You must pay:

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

### We will not pay under Section 1A or 1B:

(applying to **Veterinary Fees** and **Alternative or Complementary Treatment**)

We will not pay:

1. More than the **Maximum Benefit** for the relevant section or which will result in the **Maximum Benefit** being exceeded, subject to exclusions of the **Policy** and subject to the **Policy Aggregate** less the applicable **Excess**.
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 twenty-one (21) days of cover.
4. To the extent permitted by law, costs of any **Treatment** for:
  - a) an **Injury** that happened or an **Illness** that first showed **Clinical signs** before **Your Pet's** cover started; or,
  - b) an **Injury** or **Illness** that is the same as, or has the same diagnosis or **Clinical sign** as an **Injury**, **Illness** or **Clinical sign** **Your Pet** had before its cover started; or,
  - c) an **Injury** or **Illness** that is caused by, relates to or results from an **Injury**, **Illness** or **Clinical signs** **Your Pet** had before its cover started, no matter where the **Injury**, **Illness** or **Clinical signs** occurred or happened in, or on **Your Pet's** body.

5. To the extent permitted by law, for the costs of any **Treatment** of:
  - a) an **Illness** that first showed **Clinical signs** within twenty-one (21) days of **Your Pet's** cover starting; or,
  - b) an **Illness** which is the same as, or has the same diagnosis or **Clinical signs** as an **Illness** that first showed **Clinical signs within twenty-one (21) days of Your Pet's cover starting**; or,
  - c) an **Injury** or **Illness** that is caused by, relates to or results from a **Clinical sign(s)** that first occurred, or an **Illness** that first showed **Clinical signs** within twenty-one (21) days of **Your Pet's** cover starting, no matter where the **Injury, Illness** or **Clinical signs** occurred or happened in, or on **Your Pet's** body.
6. The cost of any **Treatment** to prevent **Injury** or **Illness**.
7. The cost of any **Elective, Routine or Preventative Treatment**, diagnostics or procedure, 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.
8. The cost of any **Treatment**, or complications arising from **Treatment**, that **You** choose to have carried out that is not directly related to an **Injury** or **Illness**, including cosmetic dentistry.
9. The cost of killing and controlling fleas, general health improvers and any **Treatment** in connection with breeding, pregnancy or giving birth.
10. The cost of any vaccinations, spaying and castration other than the cost of treating any complications arising from these procedures.
11. The costs of having **Your Pet**:
  - a) Put to sleep, including any **Veterinary** consultation/visit or prescribed medication specifically needed to carry out the procedure, or
  - b) Cremated, buried or otherwise disposed of.
12. For the cost of a post mortem examination, voluntary euthanasia, or **Injury, Illness** or **Condition** attributable to an exclusion.
13. For the cost of a house call unless the **Vet** or **Therapist** confirms that **Your Pet** is suffering from a serious **Injury** or **Illness** and that moving **Your Pet** would either endanger its life or significantly worsen the serious **Injury/Illness**, regardless of **Your** personal circumstances.
14. For extra costs for treating **Your Pet** outside usual surgery hours; unless the **Vet** or **Therapist** confirms an emergency consultation is essential, regardless of **Your** personal circumstances.
15. For the cost of any additional Veterinary attention required because **You** are unable to administer medication or **Treatment** due to **Your Pet's** behaviour or **Your** personal circumstances.
16. For the cost of hospitalisation and any associated **Treatment**, unless the **Vet** or **Therapist** confirms **Your Pet** must be hospitalised for essential **Treatment**, regardless of **Your** personal circumstances.
17. For costs resulting from an **Injury** or **Illness** that are excluded under the **Policy**.
18. The cost of periodontics, dental check-ups, Comprehensive Oral Health Assessment and Treatment (COHAT), dental x-rays, dental prophylaxis, dental scale and polish or teeth cleaning, gingival curettes, gingival hyperplasia, removal of plaque or calculus or periodontal surgery.
19. The cost of prosthodontics, the removal or repair of misaligned or retained deciduous teeth, orthodontic appliances, crowns, caps or splints, luxation, horizontal bone loss, impacted teeth or embedded teeth.
20. Any cost relating to orthodontics, malocclusion, wry bite, supernumerary teeth, reverse scissor bite, posterior cross bite, anterior crossbite, overbite, brachygnathia, open bite or level bite.
21. Any cost of **Treatment** for dental disease if an annual dental examination has not been undertaken within the twelve (12) months preceding the problem requiring **Treatment** a **Vet** recommended resulting from the examination that had not been carried out. Evidence will need to be provided to **Us** if **Your Vet** has carried out an annual dental examination.
22. Any costs of treatment throughout the lifetime of **Your Pet** for Brachycephalic Obstructive Airway syndrome (BOAS), Brachycephalic Gastrointestinal Syndrome (BGS), nasal fold surgery, skin fold surgery, stenotic nares and soft palate resection, enlarged tongue (macroglossa), or everted laryngeal sacculles, that occurs or shows **Clinical Signs** within the first twelve (12) months of commencement of **Your Insurance**, inclusive of the Waiting Period and any free cover policy or prior to the commencement of the **Your Insurance**. This applies regardless of whether or not **We** place any exclusions on **Your Certificate of Insurance**.
23. The cost of the following procedures; experimental **Treatments**, or

therapies; prosthetics or orthopedic supports or braces, open heart surgeries, cancer vaccinations, therapeutic antibody for dog and cat cancers, stem cell therapy, organ transplants, gene therapies, probiotics, dental vaccines, cold laser treatments, 3D printing, Juvenile Pubic Symphysiodesis (JPS), any drugs not used in accordance with the manufacturers recommendations.

24. Any costs for **Alternative or complementary Treatment** or veterinary **Treatment** that does not improve the health or wellbeing of **Your Pet**.
25. Any prolonged course of veterinary medicines, **Alternative or Complementary Treatments** for more than three (3) months if there is a veterinary operation that would have improved or cured the **Condition** unless agreed by **Us**. The maximum payment will be limited to the equivalent cost of the operation.
26. The cost for **Your Vet** to write a prescription or charge a dispensing fee.
27. Any medicines that have not been approved by the Australian Pesticides and Veterinary Medicines Authority (APVMA) or where there is no evidence to support the usage of this medicine for this condition.
28. The cost of any medication or drug course to treat a **Condition** that is for more than four (4) weeks at a time. **We** may consider a longer period of time providing **Your Vet** has submitted a full **Treatment** plan to us for review prior to the **Treatment** being carried out.
29. The cost of any ongoing **Treatment** that will require more than six (6) visits, without the letter from **Your Vet** setting out a **Treatment** plan for permanent cure of the **Condition**. Any further consultations and **Treatments** will require pre authorisation by **Us**.
30. For life long **Conditions You** are required to obtain an annual **Treatment** report from **Your Vet**; pre authorisation for one (1) years further treatment will be given upon receipt of this report or until the end of **Your** policy period.
31. Any bulk purchase of medicines that can't be used in full by the end of the current policy period.
32. Any claim where the full medical history is not provided when requested
33. The cost of, bathing, grooming, clipping or de-matting **Your Pet**, other than bathing when a substance is being used which, according to manufacturer's guidelines, can only be administered by a **Member of a Veterinary Practice**, regardless of **Your** personal circumstances.
34. For any costs for treating an **Illness** or **Injury** after the last day of the **Period of Insurance**, unless a further **Period of Insurance** has been entered into by **You** and **Us**, in which case the costs may be paid under the new **Policy** entered into with **Us**.
35. For the cost of treating any **Injury** or **Illness** deliberately caused by **You** or anyone living with **You** or, while on a **Journey**, anyone travelling with **You**.
36. For the cost of dental **Treatment** unless **Your Pet** had a dental examination carried out by a **Vet** in the **twelve (12) months** before the **Clinical signs** of the **Injury** or **Illness** giving rise to the claim were first noted. If any **Treatment** was recommended as a result of the check, this must have been carried out.
37. For the cost of any transplant surgery, or stem cell transplants, including any pre and post-operative care.
38. For the cost of any **Treatment** while on a **Journey** if a **Vet** believes it can be delayed until **Your Pet** returns **Home**.
39. For the cost of any **Treatment** if the **Journey** was made to get **Treatment** outside of **Australia**.
40. For the cost of hiring a swimming pool, **Hydrotherapy** pool or any other pool or **Hydrotherapy** equipment.
41. For the cost of buying or hiring equipment or machinery or any form of housing, including cages.
42. For the cost of any surgical items that can be used more than once.
43. For the cost of any **Treatment** if a claim has not been submitted within one year of **Your Pet** receiving **Treatment**, **We** may refuse or reduce the amount **We** pay to the extent that **We** are prejudiced by the late notification of the claim.
44. In relation to any pandemic disease that causes widespread **Illness**, death or destruction affecting dogs and cats.
45. For the cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.

#### **Please also read**

1. **We will not pay under Section 1A – applying to Veterinary Fees only**
2. **We will not pay under Section 1B – applying to Alternative or Complementary Treatment only and**

### 3. Special Conditions – applying to Veterinary Fees and Alternative or Complementary Treatment.

#### We will not pay under Section 1A (applying to Veterinary Fees only):

1. More than the **Maximum Benefit** for the relevant section or which will result in the **Maximum Benefit** being exceeded subject to exclusions of the **Policy** and subject to the **Policy Aggregate** less the applicable **Excess**.
2. For the cost of any food, including food prescribed by a **Vet**, unless it is:
  - a) Used to dissolve existing bladder stones and crystals in urine, which is limited to a maximum of 40% of the cost of food for up to six (6) months. A diagnostic test must be carried out to confirm the presence of the stones/crystals.
  - b) Liquid food, used for up to five (5) days while **Your Pet** is hospitalised at a Veterinary practice, providing the **Vet** confirms the use of the liquid food is essential to keep **Your Pet** alive.
3. For the cost of pheromone products, including DAP diffusers and Feliway, unless used as part of a structured **Behaviour Modification Programme**, and then limited to a maximum period of six (6) months. If the **Behavioural Illness** recurs after these six (6) months, **We** will not cover the cost of any further pheromone products for that **Behavioural Illness**.
4. For the cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.
5. For the cost of spaying and castration for the **Treatment of a Behavioural Illness**.
6. For 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 **Injury** or **Illness** for which cover is provided under Section 1A and it is essential to treat the **Injury** or **Illness**, or
  - b) The costs claimed are for the **Treatment** of complications arising from this procedure.
7. For the cost of any **Treatment** in connection with a retained testicle(s) if **Your Pet** was over the age of twelve (12) weeks when cover started.
8. For the cost of any **Treatment** in connection with false pregnancy if **Your Pet** has received **Veterinary Treatment** for a false pregnancy previously.
9. For the cost of surgical items that can be used more than once.
10. For the cost of **Hydrotherapy, Acupuncture, Homeopathy, Chiropractic Manipulation, Osteopathy** or any other **Alternative or Complementary Treatment**. This includes any **Veterinary Treatment** specifically needed to carry out the particular **Alternative or Complementary Treatment**.
11. For the cost of a post-mortem examination.
12. For the cost of any transplant surgery, or stem cell transplants, including any pre and post-operative care.
13. For the cost of any prosthesis, including any **Veterinary Treatment** needed to fit the prosthesis, other than hip, knee and/or elbow replacement(s).
14. For the cost of any **Treatment** while on a **Journey** if:
  - a) A **Vet** believes the **Treatment** can be delayed until **Your Pet** returns **Home**, or
  - b) The **Journey** was made to get **Treatment** overseas.

#### We will not pay under Section 1B (applying to Alternative or Complementary Treatment only):

1. More than the **Maximum Benefit** for **Alternative or Complementary Treatment Maximum Benefit for Injury and Illness** or which will result in the **Maximum Benefit** being exceeded, subject to exclusions of the **Policy** and subject to the **Policy Aggregate** less the applicable **Excess**.
2. The cost of any food, including food prescribed by a **Vet**.
3. The cost of more than ten (10) sessions in total for the **Treatment** of an **Injury, Illness** or **Behavioural Illness** of **Acupuncture, Chiropractic Manipulation, Osteopathy, Hydrotherapy**.
4. The cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.

#### Special Conditions applying to Veterinary Fees Sections 1A, and Alternative or Complementary Treatment Sections 1B:

1. The maximum amount **We** will pay for the cost of **Treatment** for **Injury** and or **Illness** is the **Maximum Benefit** that applies on the date the **Injury** happened or the date the **Clinical signs** of the **Illness** first occurred, provided the relevant date falls within the **Period of Insurance**, subject to exclusions of the **Policy** and subject to the **Policy Aggregate** less the applicable **Excess**.

2. If the claim includes medication, these costs will be subject to the **Maximum Benefit** that applies on the date the medication will be used.
3. If **We** agree for a claim settlement to be paid direct 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 premium is paid to date.
4. If **We** receive a request to pay the claim settlement direct to a Veterinary practice, **We** reserve the right to decline this request.
5. **We** may refer **Your Pet's** case history to **Our Vet** and if **We** request, **You** must arrange for **Your Pet** to be examined by **Our Vet**.
6. As **Your Pet** is insured on a **Covered for Life** plan, **We** fully appreciate that the amount **You** claim for **Your Pet's Treatment** can add up over the years – that's what is great about **Covered for Life**, **You** can continue to claim for the life of **Your Pet** (providing **You** continue to renew the **Policy** without a break in cover).
7. If over the life time of **Your Pet** **You** have claimed over \$36,000, to make sure **Your Pet** is receiving the best **Treatment** available, **We** may require one of the following. If this is necessary **We** will contact **You**.
  - a) Before any further **Veterinary Fees** or **Alternative or Complementary Treatment** claims can be considered **We** may require **Your Pet** is examined by a specialist/consultant **Vet**. **We** will pay any costs for this.
  - b) All future **veterinary Treatment** and **Alternative or Complementary Treatment** (other than emergency life-saving **Treatment**) may need to be authorised by **Us** before **Treatment** is carried out. A pre-authorisation claim form may need to be submitted and **We** will then let **You** know if **Treatment** can go ahead.
  - c) All future **Veterinary Treatment** and **Alternative or Complementary Treatment** may need to be carried out in conjunction with a specialist/consultant by **Our Vet** or **Therapist** **We** choose.
8. If **You** decide to take **Your Pet** to a different **Vet** or **Therapist** for a second opinion because **You** are unhappy with the diagnosis or **Treatment** provided, **You** must tell **Us** before **You** arrange an appointment with the new **Vet** or **Therapist**. If **You** do not, **We** will not pay any costs relating to the second opinion. If **We** request, **You** must use **Our Vet** or **Therapist** **We** choose. If **We** decide the diagnosis or **Treatment** currently being provided is correct, **We** will not cover any costs relating to the second opinion.
9. It is **Your** responsibility to ensure the Veterinary practice or **Therapist** is paid within the required time frame:
  - If an additional charge is added to the cost of **Treatment** due to the late payment of fees, **We** will deduct this charge from the claim settlement.
  - If the Veterinary practice or **Therapist** provides a discount for paying the cost of **Treatment** within a certain time frame, **You** must provide payment within this time frame. If **You** do not, **We** will deduct the discount, which would have been provided, from the claim settlement.
10. **We** will require fully itemised invoices.

## Section 2 – Death from Injury

*Cover under this section applies in **Australia** only.*

*This section is an **Optional Extra Benefit** under the **Classic Cover** and only applies if it is shown as covered on **Your Certificate of Insurance**.*

*\*\***Optional Extra Benefits** are automatically included in **Ultimate Cover**.*

### **We will pay:**

**We** will pay for the price **You** paid for **Your Pet**, up to the **Maximum Benefit**, if it either dies or has to be put to sleep by a **Vet** during the **Period of Insurance** as a result of an **Injury** caused by an **Accident**.

If **You** have no formal proof of how much **You** paid for **Your Pet**, **We** will pay the **Market Value** or purchase price, whichever is less. If **You** did not pay for **Your Pet** **We** will pay the **Market Value**.

### **You must pay:**

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

## Section 3 – Death from Illness

Cover under this section applies in **Australia** only.

*This section is an **Optional Extra Benefit** under the Classic Cover and only applies if it is shown as covered on Your Certificate of Insurance.*

**\*\*Optional Extra Benefits are automatically included in Ultimate Cover.**

### We will pay:

**We** will pay for the price **You** paid for **Your Pet**, up to the **Maximum Benefit**, if it either dies or has to be put to sleep by a **Vet** during the **Period of Insurance** as a result of an **Illness**.

If **You** have no formal proof of how much **You** paid for **Your Pet**, **We** will pay the **Market Value** or purchase price, whichever is less. If **You** did not pay for **Your Pet** **We** will pay the **Market Value**.

### You must pay:

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

### We will not pay under Sections 2 or 3 (applying to Death from Injury and Death from Illness):

1. Any amount which exceeds the **Maximum Benefit** for the relevant section or which will result in the **Maximum Benefit** being exceeded.
2. To the extent permitted by law, if the death results from an **Injury** or **Illness** that happened prior to the **Period of Insurance**.
3. To the extent permitted by law, if **Your Pet's** death results from a **Pre-Existing Condition**.
4. To the extent permitted by law, if **Your Pet's** death results from an **Illness which starts in the first twenty-one (21) days of cover**.
5. Any amount unless **Your Vet** confirms it was not humane to keep **Your Pet** alive because it was suffering from an **Injury** that could not be treated or an incurable **Illness**.
6. Any amount if the death results from breeding, pregnancy or giving birth.
7. Any amount if the death results from an **Illness** or disease in any **Select Breed** aged five (5) years or over, or any other **Pet** aged eight (8) years or over.
8. Any amount if a claim has not been submitted within one year of **Your Pet's** death, to the extent that **We** are prejudiced by the late notification of the claim.
9. Any amount if the death results from an **Injury** or **Illness** specified as excluded on **Your Certificate of Insurance** or generally not covered within these terms and conditions.

**Please also read 'Special Conditions – applying to Death, Theft or Straying and Advertising and Reward'.**

## Section 4 – Theft or Straying

Cover under this section applies in **Australia** only.

*This section is an **Optional Extra Benefit** under the Classic Cover and only applies if it is shown as covered on Your Certificate of Insurance.*

**\*\*Optional Extra Benefits are automatically included in Ultimate Cover.**

### We will pay:

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

### You must pay:

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

### We will not pay under Section 4 (applying to Theft or Straying):

1. Any amount which exceeds the **Maximum Benefit** for the relevant section or which will result in the **Maximum Benefit** being exceeded.
2. Any amount if **You** or the person looking after **Your Pet** has freely parted with it, even if tricked into doing so, unless anyone was looking after or transporting **Your Pet** in return for money, goods or services.
3. Any amount if a claim has not been submitted within one year of **Your Pet**

being stolen or going missing, to the extent that **We** are prejudiced by the late notification of the claim.

**Please also read 'Special Conditions – applying to Death, Theft or Straying and Advertising and Reward'**

## Section 5 – Advertising and Reward

*Cover under this section applies in **Australia** and the **Agreed Countries** only.*

### **We will pay:**

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

1. The cost of advertising, and
2. The reward **You** have offered and paid to get **Your Pet** back.
3. If **Your Pet** is stolen or goes missing during **Your Journey**, **We** will also pay the cost of **Your** accommodation to stay and look for **Your Pet** if it has not been found or returned by the scheduled last date of **Your Journey**.

### **We will not pay under Section 5 (applying to Advertising and Reward):**

1. Any amount which exceeds the **Maximum Benefit** for all incidents covered under the relevant section or which will result in the **Maximum Benefit** being exceeded for all incidents during the **Period of Insurance**.
2. More than \$100 towards sundries to make **Your** own posters and advertising material.
3. For any reward that **We** have not agreed before **You** advertised it.
4. For any reward not supported by a signed receipt giving the full name, address and telephone number of the person who found **Your Pet**.
5. Any reward paid to:
  - a member of **Your Family** or any person living with **You** or employed by **You**, including any person travelling with **You** during **Your Journey**.
  - the person who was caring for **Your Pet** when it was lost or stolen.
  - the person who stole **Your Pet** or any person who is in collusion with the person who stole **Your Pet**.
6. Any amount if a claim has not been submitted within one year of **Your Pet** going missing, to the extent that **We** are prejudiced by the late notification of the claim.
7. If **Your Pet** is stolen or goes missing during **Your Journey**:
  - More than seven (7) days' accommodation costs and more than \$60 for each day's accommodation.
  - Any amount if the cost of accommodation is at a property owned by **You** or **Your Family**.
8. Any amount unless there is some official documentation to certify the theft or loss was reported to the police or the shipping, or aircraft operator if the loss or theft happened while **You** Were travelling with them.

### **Special Conditions - applying to Theft or Straying and Advertising and Reward as set out below:**

1. **You** must immediately take all reasonable steps to find or recover **Your Pet**.
2. **You** must take the following steps:
  - a) Within twenty-four (24) hours of **You** discovering **Your** dog or cat is stolen, **You** must tell the appropriate authority and obtain written confirmation of **Your** report. Depending on where **You** live the appropriate authority may be **Your** local Council or the police.
  - b) Tell all the **Vets** and local rescue centres within a reasonable distance of the area where **Your** dog or cat was last seen, within five (5) days of **Your Pet** going missing; and
  - c) If **Your** dog or cat has not been found within thirty (30) days, fill in a claim form and return it to **Us** as soon as possible.
3. If **Your Pet** was lost or stolen while being transported by a shipping agent or aircraft, **You** must immediately report the loss to the operator and obtain written confirmation of **Your** report.

There are other actions **You** can take, which although are not requirements of this insurance, may help to improve the chances of **Your Pet** returning **Home**. This includes notifying all vets, local rescue centres, distributing flyers, do a letterbox drop in the area **Your Pet** went missing and searching the local area; **We** are happy to share useful tips with **You** if **You** contact **Us**.

4. **For Advertising and Reward only:**
  - a) The **Maximum Benefit** covers the cost of both advertising and the reward. The full **Maximum Benefit** is available for **You** to use for advertising but the amount **You** can use for a reward is limited to 50% of the **Maximum Benefit**.
  - b) **You** must obtain **Our** approval before advertising a reward; if not, the cost of the reward will not be covered by the **Policy**.
  - c) **You** must provide **Us** with a receipt(s) for any amount which **You** are claiming for. Any costs not supported by a receipt will not be covered by Section 5 of the **Policy**.
5. **For Theft or Straying only:**
  - a) To submit a claim for Theft or Straying **You** must have advertised the loss of **Your Pet** for at least thirty (30) days and when **You** claim **You** must provide **Us** with evidence showing the advertising took place, the **Pet's** original Pedigree Certificate and purchase receipt from where **You** bought **Your Pet**, where applicable; **We** will not pay for this information.
  - b) If **Your Pet** has not been found within thirty (30) days, please fill in a claim form and return it to **Us** as soon as possible.
  - c) If the claim is paid the original pedigree certificate and purchase receipt will not be returned to **You**.
  - d) If **Your Pet** is found or returns, **You** must repay the full amount **We** have paid **You**.
  - e) If the loss or theft happened during **Your Journey** please also send **Us** the booking invoice for **Your Journey** or any other official documentation to show the dates of **Your Journey**.
6. **For Death only:**
  - a) A letter or a Death Certificate from a **Vet**, noting the Pets microchip or tattoo number its breed and colour, and how the **Pet** died.
  - b) The **Pets** original Pedigree Certificate and purchase receipt from where **You** bought **Your Pet**, where applicable; **We** will not pay for this information.

## Section 6 – Third Party Liability

(This section only applies to Your dog named on the Certificate of Insurance)

Cover under this section applies in **Australia** only.

In this section, '**You**' and '**Your**' mean **You** or any person looking after or handling **Your Pet** with **Your** permission.

### We will pay

**We** will pay **Your** legal liability for payment of compensation in respect of:

- death, bodily **Injury** or **Illness** of another person, and/or
- physical loss of or damage to property,
- occurring during the **Period of Insurance** and which is caused by an **Accident** caused by **Your Pet**.

### We will pay Legal costs and expenses:

**We** will also pay the legal costs and expenses **You** incur for a legal liability claim covered under this Section with **Our** consent for which **You** are legally liable, plus the cost of any lawyers **We** appoint.

All **Accidents** of a series consequent upon or attributable to one source or original cause are treated by **Us** as one **Accident**. This cover applies in respect of an **Accident** occurring anywhere in **Australia**. The maximum amount **We** will pay for each claim under this **Section 6 – Third Party Liability** for Dogs covered under Classic Covered 4 Life **Policy** is \$3,000,000 (Australian) Dogs covered under Ultimate Covered 4 Life **Policy** is \$5,000,000 (Australian). Where permitted by law, this limit will be reduced by any amount paid under any other insurance **You** have with **Us**, that provides cover for the same liability, loss, **Accident**, occurrence or incident.

### You must pay:

**You** must pay the first \$500 of each claim under this Section 6.

### We will not pay under Section 6 (applying to Third Party Liability):

1. Any amount which exceeds the **Maximum Benefit** for the relevant section or which will result in the **Maximum Benefit** being exceeded.
2. Any amount in relation to **Your legal liability** for:
  - a) damage to **Your** property,



- b) **Injury** to or death of any person who normally lives with **You** or is part of **Your Immediate Family**, or for damage to their property,
  - c) **Injury** to **Your** employees or anyone who works for **You**, or for damage to their property,
  - d) loss of or damage to property in **Your**, a person who lives with **You** or a member of **Your Immediate Family**'s care, custody or control or the care, custody or control of **Your** employees or any person who normally lives with **You**.
  - e) involving **Your** business trade or profession, or for events that happen where **You** work. This includes where **You** live, if **You** work from **Home** and **Your Pet** has access to **Your** work area.
  - f) Any costs and expenses for defending **You** which **We** have not agreed beforehand.
  - g) because of the terms of an agreement (unless **You** would have been liable if the agreement did not exist),
  - h) claims caused by, arising out of, or in any way connected with asbestos,
  - i) claims caused by, arising out of or in any way connected with the discharge, dispersal, release or escape of pollutants defined as smoke, vapours, soot, fumes, acid, alkalis, toxic chemicals, liquids, gases, waste materials or other irritants, contaminants or pollutants into or upon land, the atmosphere or any watercourse or body of water. This exclusion will not apply if such discharge, dispersal, release or escape is caused by an **Accident** which occurred during the **Period of Insurance** involving **Your Pet**.
  - j) the prevention of such contamination or pollution,
3. Claims caused by, arising out of, or in any way connected with
    - a) pregnancy, or
    - b) the transmission of disease
  4. Claims caused by, arising out of or in any way connected with an **Accident**, if **You** have not followed the instructions or advice given to **You** by the previous owners of **Your Pet**, or the re-homing organisation or a qualified behaviourist about the behaviour of **Your Pet**.
  5. Where **Your** legal liability is covered or indemnified, in any way under any:
    - a) statutory or compulsory scheme, fund or insurance, or
    - b) compensation scheme or workers compensation **Policy** of insurance, or
    - c) industrial award, even if the amount recoverable is nil,
  6. Where **Your** legal liability is over that recoverable under any:
    - a) statutory or compulsory scheme, fund or insurance, or
    - b) **Accident** compensation scheme or workers compensation **Policy** of insurance, or
    - c) industrial award.
  7. For any aggravated, exemplary or punitive damages, damages resulting from the multiplication of compensatory damages, fines or penalties.
  8. If **Your Pet** is kept or lives on premises that sell alcohol, unless there is no access from the residential premises to the business premises.
  9. For an incident which takes place when **Your Pet** is in the care of a business or a professional and **You** are paying for their services. For example, but not limited to, when **Your Pet** is in the care of a dog minder, a dog trainer, a dog sitter or at the grooming parlour or boarding kennel.
  10. If the **Accident** happens in an area or place where dogs are specifically prohibited, unless **Your Pet** escapes and enters the area outside of **Your** control.

#### **Special Conditions - applying to Section 6 Third Party Liability:**

1. **You** must not admit responsibility, agree to pay any claim or negotiate with any person following an incident which may give rise to claim under section 6.
2. **You** must immediately send **Us** any writ, summons or legal documents **You** receive and **You** or any other person on **Your** behalf must not respond to any of these documents.
3. **You** agree to provide **Us** with any information connected with the claim **We** reasonably ask for including details of **Your Pet's** history.
4. **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.
5. **You** must allow **Us** to take charge of **Your** claim and allow **Us** to prosecute in **Your** name for **Our** benefit.
6. If more than one of the dogs insured under the **Policy** are involved in, or contribute towards, an **Accident** which is covered under Section 6 only one **Maximum Benefit** will apply to the **Accident** for all of the dogs. This means that if:
  - a) The dogs involved all have the same **Maximum Benefit**; the most **We** will pay for the **Accident** is that **Maximum Benefit**. For example, if all of

the dogs insured each have a **Maximum Benefit** of \$3 million, **We** will pay no more than \$3 million for the **Accident**.

b) The dogs involved are covered under a **Policy** which has different **Maximum Benefits**; the most **We** will pay for the incident is the highest of the **Maximum Benefits**. For example if one dog has a **Maximum Benefit** of \$3 million, and another of \$5 million, **We** will pay no more than \$5 million for the **Accident**.

c) If dogs involved (all owned by **You**, but some are uninsured) **We** will pay no more than a pro ratio portion of the total amount of the claim, up to the **Maximum Benefit**.

7. If a business or a professional is being paid to care for **Your Pet** in any way (for example, but not limited to a dog minder, a dog trainer, a dog walker or a groomer) it is **Your** responsibility to:
  - a) Make sure the business/person has the appropriate third party liability insurance cover, and
  - b) Tell them if **Your Pet** has any behavioural problems or requires any special handling so they are able to handle **Your Pet** in an appropriate manner.
8. **Third Party Liability** cover will be governed by the law of the State or Territory where the **Policy** was arranged and whose courts will have jurisdiction in any dispute.

## Section 7 – Boarding Fees

*Cover under this section applies in **Australia** only. In this section 'You' means **You** or **Your** husband, wife, civil partner or de facto partner.*

### **We will pay:**

**We** will pay the cost of boarding **Your Pet** at a licensed boarding kennel or cattery or \$15 a day towards the cost of someone who does not live with **You** (or is a co-owner of the **Pet**), looking after **Your Pet** while **You** are an inpatient in hospital during the **Period of Insurance**.

### **We will not pay under Section 7 (applying to Boarding Fees):**

1. Any amount which exceeds the **Maximum Benefit** for the relevant section for all hospitalisations or which will result in the **Maximum Benefit** being exceeded.
2. To the extent permitted by law, any amount if **You** are in hospital for less than four (4) consecutive days during each hospital stay.
3. To the extent permitted by law resulting from **You** having to go into hospital because of a sickness, disease, disability, **Injury** or **Illness** that first occurred or manifested itself prior to or at the commencement of the **Period of Insurance** or was showing symptoms before **Your Pet** was covered.
4. If the person looking after **Your Pet** normally lives with **You** or is a member of **Your Family**, or is a Co-Owner of the **Pet**.
5. Resulting from **You** being pregnant, giving birth or any **Treatment** that is not related to an **Injury** or **Illness**.
6. Resulting from **You** having to go into a hospital for the **Treatment** of alcoholism, drug abuse, drug addiction, attempted suicide or a self-inflicted **Injury** or cosmetic surgery or other forms of elective surgery.
7. Resulting from care in a Nursing **Home** or from convalescence care that **You** do not receive in a hospital.
8. If a claim under this section has not been submitted within one year of the stay in hospital, to the extent that **We** are prejudiced by the late notification of the claim.

## Section 8 – Holiday Cancellation

Cover under this section applies in **Australia** only.

### We will pay:

1. Travel and accommodation expenses for **You** and **Your Immediate Family** that **You** cannot recover if **You** have to cancel **Your Journey** during the **Period of Insurance** because **Your Pet** is suffering from an **Injury** or **Illness** and is too ill to travel with **You**.
2. Any travel and accommodation expenses for **You** and **Your Immediate Family**, that **You** cannot recover if **You** have to cancel **Your Journey** during the **Period of Insurance** because **Your Pet** is Injured or shows the first **Clinical signs** of an **Illness** up to seven (7) days before **You** leave and so needs immediate lifesaving surgery.
3. Any travel and accommodation expenses for **You** and **Your Immediate Family** that **You** cannot recover if **You** have to cut short **Your Journey** during the **Period of Insurance** because **Your Pet**:
  - goes missing; or
  - is injured or shows the first **Clinical signs** of an **Illness** while **You** are away and needs immediate lifesaving surgery.
4. If **Your Pet** goes with **You** on the **Journey** during the **Period of Insurance** and is injured or shows the first **Clinical signs** of an **Illness** during the **Journey** and has to return **Home** for **Vet Treatment**, which means **You** have to cut short **Your** holiday,

### We will pay:

1. The value of any unused travel and accommodation expenses that **You** and **Your Immediate Family** have paid for, and
2. Any extra travel expenses to return **Your Pet Home**.

### You must pay:

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

### We will not pay under Section 8 (applying to Holiday Cancellation):

1. Any amount which exceeds the **Maximum Benefit** for all **Journeys** or which will result in the **Maximum Benefit** being exceeded for all **Journeys** undertaken during the **Period of Insurance**.
2. To the extent permitted by law, any amount or expenses resulting from:
  - a) **Pre-Existing Condition**;
  - b) An **Illness** that first showed **Clinical signs** before **Your Pet's** cover started; or
  - c) A **Illness** that is the same as, or has the same diagnosis or **Clinical signs** as an **Illness** or **Clinical sign** **Your Pet** had before cover started; or
  - d) an **Injury** or **Illness** that is caused by, relates to or results from an **Illness** or **Clinical signs** **Your Pet** had before its cover started, no matter where the **Injury**, **Illness** or **Clinical signs** occurred or happen in or on **Your Pet's** body.
3. To the extent permitted by law, any amount or expense resulting from:
  - a) an **Illness which starts in the first twenty-one (21) days of cover**;
  - b) an **Illness** that first showed **Clinical signs** within twenty-one (21) days of **Your Pet's** cover starting; or,
  - c) an **Illness** that is the same as, or has the same diagnosis or **Clinical signs** as an **Illness** or **Clinical signs** **Your Pet** has before its cover started or within twenty-one (21) days of **Your Pet's** cover starting; or
  - d) an **Illness** that is caused by, relates to or results from an **Illness** or **Clinical sign** that first occurred, or an **Illness** that first showed **Clinical signs** within twenty-one (21) days of **Your Pet's** cover starting, no matter where the **Injury**, **Illness** or **Clinical signs** occurred or happen in or on **Your Pet's** body.
4. Any amount payable for travel expenses to return **Your Pet Home** unless a **Vet** has certified **Your Pet** is too ill to travel or has to return **Home** for **Treatment**.
5. Any amount if **Your Journey** was made to get **Veterinary Treatment** or **Alternative or Complementary Treatment** outside of **Australia**.
6. As permitted by law, any amount **You** can claim back for anywhere else.
7. For the cost of food.
8. Any costs relating to a holiday **You** booked less than twenty-eight (28) days before **You** were due to leave.
9. Any costs resulting from an **Injury** or **Illness** **We** have specified as excluded on **Your Certificate of Insurance** or generally not covered by these terms and conditions.

10. Any costs if a claim has not been submitted within one year of **Your Journey** being cancelled, to the extent that **We** are prejudiced by the late notification of the claim.

### Special Conditions – applying to claiming for Holiday Cancellation:

1. When claiming for a benefit under Section 8 Holiday Cancellation **You** must supply **Us** with:
  - a) the booking invoice and cancellation invoice from the travel agent, **tour** operator or other holiday sales organisation if **You** have cancelled or cut short **Your Journey**; and
  - b) Receipts for **Your** expenses if **You** are claiming for extra travelling expenses.
2. The invoices must show the date of the booking, the dates of the **Journey**, the date **You** decided to cancel or return **Home** and any expenses **You** cannot recover.

**We** will not pay for this information.

## Section 9 – Emergency Repatriation

*Cover under this section applies in **Australia** only.*

### We will pay:

If **Your Pet** is injured or shows the first **Clinical signs** of an **Illness** during **Your Journey** and cannot travel **Home** the same way it travelled to **Your** holiday destination **We** will pay the:

1. Extra costs to get **Your Pet Home**,
2. Cost of accommodation for **You** to stay after **Your** scheduled date of travel **Home** until **Your Pet** is well enough to travel, and
3. If **Your Pet** dies, the costs of returning **Your Pet's** body **Home** or the cost of disposal, charged by the **Vet** where **Your Pet** dies.

### We will not pay under Section 9 (applying to Emergency Repatriation):

1. Any amount which exceeds the **Maximum Benefit** for all **Journeys** or which will result in the **Maximum Benefit** being exceeded for all **Journeys** during the **Period of Insurance**.
2. Any costs resulting from a **Pre-Existing Condition**.
3. Any costs resulting from an **Illness which starts in the first 21 days of cover**.
4. Any costs resulting from an **Injury** that happens or an **Illness** first showing **Clinical signs** before the start of **Your Journey**.
5. Any costs that can be reclaimed from anywhere else.
6. Any costs unless a **Vet** has certified **Your Pet** is too ill to travel **Home** the same way it travelled to **Your** holiday destination.
7. Any amount if **Your Journey** was made to get **Veterinary** or **Alternative or Complementary Treatment** outside of **Australia**.
8. For more than seven (7) days' accommodation costs and more than \$60 for each day's accommodation.
9. The cost of cremation or a coffin, casket or any other container for **Your Pet's** remains.
10. For the cost of food.
11. Any costs if a claim has not been submitted within one year of the date **Your Pet** returns **Home**, to the extent that **We** are prejudiced by the late notification of the claim.

## Section 10

### Quarantine Expenses and Loss of Documents

Cover under this section applies in the **Agreed Countries** only.

#### We will pay:

If **Your Pet** is either unable to return to **Australia** or must be quarantined on return to **Australia** because of:

1. An **Illness** first showing **Clinical signs** during **Your Journey**,
2. The failure of the microchip, or
3. The Importation Documents being lost or stolen.

#### We will pay:

1. The cost to keep **Your Pet** in quarantine,
2. The cost of getting duplicate Importation Documents,
3. The cost of temporary accommodation while getting the duplicate Importation Documents, and
4. Extra costs to travel **Home** if the delay in getting duplicate Importation Documents has caused **You** to miss **Your** scheduled travel arrangements back to **Your Home**.

#### You must pay:

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

#### We will not pay under Section 10 (applying to Quarantine Expenses and Loss of Documents):

1. Any amount which exceeds the **Maximum Benefit** for all **Journeys** or which will result in the **Maximum Benefit** being exceeded for all **Journeys**.
2. Any costs resulting from a **Pre-Existing Condition**.
3. Any costs resulting from an **Illness which starts in the first twenty-one 21 days of cover**.
4. Any costs resulting from an **Injury** that happens or an **Illness** first showing **Clinical signs** before the start of **Your Journey**.
5. Any costs that can be reclaimed from anywhere else.
6. Any costs that result from the failure of any microchip that does not meet the Australian Standards AS 5019-2001.
7. Any costs that result from a microchip reader failing to read a microchip.
8. For more than seven (7) days' accommodation costs and more than \$60 for each day's accommodation.
9. Any costs if a claim has not been submitted within one year of the date **Your Pet** returns **Home**, to the extent that **We** are prejudiced by the late notification of the claim.

#### Special Conditions – applying to Quarantine Expenses and Loss of Documents:

1. When the Importation Documents are left unattended they must be kept in **Your** locked accommodation or in the locked boot, covered luggage area or glove compartment of a locked vehicle.
2. If the Importation Documents are lost or stolen, within twenty-four (24) hours of discovering them missing, **You** must report the incident to the police and obtain a police report. If the loss or theft occurred on a ship, aircraft, train or coach **You** must report the loss to the operator and obtain a report.

## General Exclusions

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

<b>Your Certificate of Insurance</b>	A <b>Condition</b> specifically excluded on <b>Your Certificate of Insurance</b> .
<b>Your Pet's age</b>	Any <b>Pet</b> that is less than eight (8) weeks old at the commencement of cover.
<b>Your Pet's Use</b>	Dogs used for security, guarding, track racing or Coursing.

<p><b>Your Pet's breed</b></p>	<p>Any breed of dog that is banned by any Australian Government, Public or Local Authority or any dog that is, or is crossed with, a Pit Bull Terrier, Dogo Argentino, Perro De Presa Canario, Dogo Canario, Dingo, Japanese Tosa, Fila Brasileiro, Czechoslovakian Wolfdog, Saarloos Wolfhound/Wolfdog or any wolf hybrid. (This list may be modified from time to time).</p>
<p><b>Laws and regulations</b></p>	<ol style="list-style-type: none"> <li>Any dog that must be registered under the relevant legislation dealing with dangerous dogs, Dangerous Dog Act, or any further amendments to such legislation. Any dog declared as a dangerous dog by a Government authority.</li> <li><b>You</b> breaking Australian laws or regulations, including those relating to animal health or importation regulations.</li> <li><b>Your Pet</b> being confiscated, destroyed or having restrictions put on it by any Government or local or public Authority having the jurisdiction to do so, including because it was worrying livestock.</li> <li>Any Government or Public or Local Authority or any person or Body having the jurisdiction to do so, having put restrictions on <b>Your Pet</b>.</li> <li>Legal expenses, fines and penalties connected with or resulting from a Criminal Court Case or an Act of Parliament.</li> </ol>
<p><b>Miscellaneous</b></p>	<ol style="list-style-type: none"> <li>An act of force or violence for political, religious or ideological reasons war, acts of terrorism, riot, revolution or any similar event, including any chemical or biological terrorism.</li> <li>Radiation, nuclear explosion, nuclear fallout or contamination by radioactivity.</li> <li>A disease transmitted from animals to humans.</li> </ol>
<p><b>When Your Pet is on a Journey in an Agreed Country</b></p>	<ol style="list-style-type: none"> <li><b>You</b> not following the conditions of AQIS Pet Importation Regulation.</li> <li>Any <b>Journey You</b> take <b>Your Pet</b> on against a <b>Vet's</b> advice.</li> <li>Any animal less than twelve (12) weeks old.</li> <li>A foreign government or public authority putting restrictions on <b>Your Pet</b>.</li> <li><b>Your Pet</b> living permanently outside of <b>Australia</b>.</li> <li>An <b>Illness</b> that <b>Your Pet</b> contracted while outside <b>Australia</b>, or the <b>Agreed Countries</b> that it would not normally have contracted in <b>Australia</b> or the <b>Agreed Countries</b>.</li> </ol>
<p><b>Preventative or Routine Treatment</b></p>	<p>Cost of <b>Routine or Preventative Treatment</b> or care such as check-ups and procedures that are designed to prevent future <b>Illnesses</b> from occurring rather than treating existing <b>Illnesses</b>. These include, but are not limited to annual physical examinations and or check-ups, vaccinations, heart worm prevention medication; flea and other internal/external parasite prevention.</p>

<b>Elective Treatment</b>	Cost of <b>Elective Treatment</b> , diagnostics or procedures including, but not limited to de-sexing, spaying or castration; micro-chipping; grooming and de-matting, cosmetic or aesthetic surgery, or elective surgery including but not limited to dew-claw removal, prescription diet foods, and any <b>Treatment</b> not related to an <b>Injury, Illness</b> , or trauma. <b>Elective Treatment</b> that is beneficial to the <b>Pet</b> but is not essential for <b>Your Pet's</b> survival or does not form part of a <b>Treatment</b> for an <b>Injury</b> or <b>Illness</b> .
<b>Care &amp; Negligence</b>	Cost of treating any <b>Injury</b> or <b>Illness</b> or other bodily <b>Injury</b> or <b>Illness</b> caused by, arising out of, or in any way connected with a malicious act, deliberate <b>Injury</b> or bodily <b>Injury</b> or gross negligence caused by <b>You</b> or a member of <b>Your Immediate Family</b> or anyone living with <b>You</b> or acting with <b>Your</b> express or implied consent.
<b>Pandemic Disease</b>	Any pandemic disease that causes widespread <b>Illness</b> , death or destruction affecting dogs and cats.
<b>Vaccinations</b>	Any dog not being vaccinated against distemper, hepatitis, kennel cough, leptospirosis (in areas where it is prevalent and <b>Vets</b> recommend vaccination) and parvovirus. Any cat not being vaccinated against feline infectious enteritis, feline leukaemia and cat flu, or other disease that there is a known vaccine and <b>Vets</b> recommend vaccination.
<b>Reasonable Precautions</b>	<b>Your</b> failure to take all reasonable precautions to protect <b>Your Pet</b> from or by aggravating or prolonging an <b>Injury</b> or <b>Illness</b> . <b>Your</b> failure to take all reasonable precautions to protect <b>Your Pet</b> from or by aggravating or prolonging an <b>Injury</b> or <b>Illness</b> .
<b>Your Legal Liability</b>	<b>Your Legal Liability</b> for payment of compensation in respect of: a. death, bodily <b>Injury</b> or <b>Illness</b> , and/or b. physical loss or damage to property, c. except to the extent <b>You</b> have such cover under <b>Section 6 - Third Party Liability</b> for dogs of this <b>Policy</b> in relation to <b>Your Dog</b> .

## Claiming

This section tells **You** what **You** will need to send **Us** if **You** need to make a claim. Don't forget if **You** have a valid claim for **Veterinary Fees We** can pay the **Veterinary Practice** direct (if mutually agreed to by **Your Vet**) which means the only amount **You** will need to pay them is the **Excess** which applies to the **Treatment** for **Your Pet**

## Notifying Us of a potential claim

1. In all cases, other than **Veterinary Fees, Alternative or Complementary Treatment** claims, **You** must let **Us** know of any circumstances which are likely to lead to a claim.
2. For Third Party Liability **You** must let **Us** know of any incident that happens even if **You** don't believe a claim will be made against **You** at this time. Details of what **You** need to do if an incident happens can be found in 'Special Conditions - applying to Third Party Liability - point 1 and 2.'

## Requesting a claim form

- Most claim forms can be downloaded from **Our** website [www.petplan.com.au/claims](http://www.petplan.com.au/claims).
- Some proactive **Veterinary Practices** will also have a supply of **Veterinary Fees** claim forms and some will submit **Your** claim for **You** (providing **You** have completed **Your** section of the claim form).
- If **You** would like **Us** to send **You** a claim form please contact **Us**.

When to claim under **Veterinary Fees** and **Complementary Treatment**:

Claims must be sent to **Us** as soon as possible, but no later than one year after the **Treatment** start date.

## 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 relevant authorities. If **We** pay a claim and subsequently find the claim was fraudulent, **You** must repay **Us** the full amount.

'Void **Your Policy**' means **We** will cancel **Your Policy** from the date the fraud occurred. If **We** take this action **You** must tell any other insurer that **We** have void **Your Policy** and failure to do this could invalidate any future insurance **Policy**.

## Making a Claim

It's distressing when a much loved pet suffers an **Injury** or **Illness** so **We** do all **We** can to make the claims process as quick and easy as possible. There's lots of useful information on **Our** website [www.petplan.com.au](http://www.petplan.com.au) to assist **You** making a claim.

### How to claim

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

1. Downloading and completing a claim form from **Our** website: [www.petplan.com.au/claims](http://www.petplan.com.au/claims); or
2. Claims for **Veterinary Fees** only may be lodged with **Your Vet** (if mutually agreed by **Your Vet**) and **We** will pay the **Veterinary Practice** directly. **You** will need to pay **Your Vet** the applicable **Excess(es)** and any non-claimable items. Claims for **Veterinary Fees** and **Complementary Treatment** must be notified to **Us** no later than one year after the **Treatment** date. **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.
3. Contact **Us** immediately about any incident that happens involving **Injury** to a person, another animal or property even if **You** don't believe a claim will be made against **You** at the time. Call **Us** on 1300 738 225 Monday to Friday 8:30am – 6pm; Saturday 10am – 2:30pm.
4. Do not admit responsibility, agree to pay any claim or negotiate with any person following an incident that may give rise to a claim. Any writ, summons or legal documents received by **You** need to be sent to **Us** immediately. **You** must not respond to any of these documents.
5. Please send **Us** the following supporting documentation related to **Your** claim or incident:



<p><b>Veterinary Fees, Alternative or Complementary Treatment</b></p>	<ul style="list-style-type: none"> <li>• For both sections of cover, the <b>Veterinary Practice</b> must complete the relevant section of the claim form.</li> <li>• Please send <b>Us</b> the original fully itemised invoices from the <b>Veterinary Practice</b> or <b>Therapist</b> (for <b>Alternative</b> or <b>Complementary Treatment</b> if the <b>Therapist</b> is not a <b>Member of a Veterinary Practice</b>) which show what <b>You</b> are claiming for. (Photo- copies of fully itemised invoices are not acceptable).</li> <li>• When <b>You</b> make the first claim for <b>Your Pet</b>, <b>We</b> will obtain its full clinical history. The full clinical history is a record of all visits <b>Your Pet</b> has made to a <b>Vet</b> and this information will be obtained from each <b>Veterinary Practice</b> <b>Your Pet</b> has attended.</li> <li>• Claims for certain Conditions may also require additional information about <b>Your Pet's</b> full clinical history. <b>We</b> will advise <b>You</b> if <b>We</b> need this once <b>We</b> receive <b>Your</b> claim form.</li> <li>• For <b>Veterinary Fees</b>, if the claim is for <b>Treatment</b> in an <b>Agreed Country</b>, <b>You</b> need to provide the booking invoice for <b>Your Journey</b> or any other official documents which show the dates of <b>Your Journey</b>.</li> </ul>
<p><b>Death from Injury, Death from Illness</b></p>	<p>Please send <b>Us</b>:</p> <ul style="list-style-type: none"> <li>• The death certificate from <b>Your Vet</b>,</li> <li>• The purchase receipt from when <b>You</b> bought <b>Your Pet</b>, and</li> <li>• If <b>Your Pet</b> is a pedigree, the original pedigree certificate.</li> </ul>
<p><b>Theft or Straying</b></p>	<p>Please send <b>Us</b>:</p> <ul style="list-style-type: none"> <li>• Evidence of the advertising carried out to try and find <b>Your Pet</b>,</li> <li>• The purchase receipt from when <b>You</b> bought <b>Your Pet</b>, and</li> <li>• If <b>Your Pet</b> is a pedigree, the original pedigree certificate.</li> </ul>
<p><b>Advertising and Reward</b></p>	<p>You must phone <b>Us</b> on 1300 738 225 and talk to <b>Our</b> Claims Supervisor, for the approval of any reward before <b>You</b> advertise it.</p> <p>Please send <b>Us</b>:</p> <ul style="list-style-type: none"> <li>• The original fully itemised invoices and receipts to show the costs involved, including a receipt for any reward paid, and</li> <li>• If the loss or theft happened during <b>Your Journey</b>, the booking invoice or another official document to show the dates of <b>Your Journey</b> and</li> <li>• If applicable the police or operator's report.</li> </ul>
<p><b>Boarding Fees</b></p>	<p>Your doctor/consultant and the owner of the boarding establishment (if one has been used, or pet sitter) must complete the relevant section(s) of the claim form</p> <p>Please send <b>Us</b>:</p> <ul style="list-style-type: none"> <li>• The original fully itemised invoice from the boarding establishment, Pet sitter or written confirmation from the person looking after <b>Your Pet</b>.</li> </ul>

<b>Holiday Cancellation</b>	Please send <b>Us</b> : <ul style="list-style-type: none"> <li>• The booking invoice and cancellation invoice from the holiday sales organisation. The invoices must show the date of the booking, the dates of the <b>Journey</b>, the total cost of the holiday, the date <b>You</b> decided to cancel or return <b>Home</b> and any expenses <b>You</b> cannot recover.</li> <li>• The receipts for <b>Your</b> extra travel expenses.</li> </ul>
<b>Emergency Repatriation, Quarantine Expenses and Loss of Documents</b>	Please send <b>Us</b> : <ul style="list-style-type: none"> <li>• The booking invoice or another official document showing the dates of <b>Your Journey</b>,</li> <li>• The original fully itemised invoices and receipts to show the costs involved, and</li> <li>• If applicable the police or operator's report.</li> </ul>
<b>Claims Involving Your Pet being attacked by another Animal</b>	If <b>Your Pet</b> has been injured or had to be put down due to being injured by another Animal, please contact Petplan for an additional form that needs to be completed and be included with <b>Your</b> claim form along with the following: <ul style="list-style-type: none"> <li>• Details of the owners of the other Animal(s),</li> <li>• Confirmation the matter was reported to the police/relevant authority, and</li> <li>• Depending on where the attack happened, <b>You</b> must report the attack to the appropriate authorities in that Shire/municipality, i.e. The Ranger at the Local Council/Police Station.</li> </ul>

### Excess

An **Excess** is the amount(s) shown on the **Certificate of Insurance** that **You** must pay for each unrelated **Condition** when **You** make a claim under the **Policy** per **Policy Year** unless **We** state an **Excess** does not apply. There are different types of **Excess** that may apply to **You** at the time of the claim.

### Fixed Excess

The Fixed **Excess** is the first amount **You** must pay for each unrelated **Condition** per **Policy Year**. The amount of the Fixed **Excess** will be shown on **Your Certificate of Insurance**.

The Fixed **Excess** may be **Our** standard minimum **Excess** or **You** may choose a higher **Excess** in exchange for a cheaper premium.

### Optional Pet % Share Excess

The Pet % Share **Excess** is an additional voluntary **Excess** payable in addition to the Fixed **Excess** in return for a cheaper **Policy** premium. If **You** have chosen this option, the total claim amount will be reduced by the percentage amount shown on **Your Certificate of Insurance**.

Example calculation:

If **Your Pet** is a **dog**:

Claimable <b>Veterinary Fees</b>	\$10,000
Less the Fixed <b>Excess</b>	\$150
<i>Revised claimable amount</i>	<i>\$9,850</i>
Less Optional Pet % Share <b>Excess</b> 25% (on revised claimable amount)	\$2,462.50
<b>Total claimable amount</b>	<b>\$7387.50</b>

\*The above is an example only and subject to the total benefit amount and applicable **Excesses** as shown on the **Certificate of Insurance**.

## Age Contribution

In addition to any Fixed **Excess** and Pet % Share **Excess**, an **Age Contribution** will apply in the following circumstances:

	Age of Pet	Age Contribution Loading
<b>Dogs</b>	8+ years	20%
	10+ years	35%
<b>Select Breed Dogs</b>	4+ years	20%
	7+ years	35%
<b>Cats</b>	8+ years	20%
	10+ years	35%

The **Age Contribution** is calculated against the amount **You** are claiming.

Example calculation:

If **Your Pet** is a **Dog** aged nine (9) years old:

Claimable <b>Veterinary Fees</b>	\$10,000
Less the Fixed <b>Excess</b>	\$150
<i>Revised claimable amount</i>	\$9,850
Less <b>Age Contribution</b> loading 20% (on revised claimable amount)	\$1,970
<b>Total claimable amount</b>	<b>\$7,880</b>

Or,

**Your Pet** is a **Cat** aged nine (9) years old:

Claimable <b>Veterinary Fees</b>	\$10,000
Less the Fixed <b>Excess</b>	\$125
<i>Revised claimable amount</i>	\$9,875
Less Optional Pet % Share <b>Excess</b> 25%	\$2,468.75
<i>Revised claimable amount</i>	\$7,406.25
Less <b>Age Contribution</b> 20% (on revised claimable amount)	\$1,481.25
<b>Total claimable amount</b>	<b>\$5,925</b>

\*The above is an example only and subject to the total benefit amount and applicable **Excesses** as shown on the **Certificate of Insurance**.

## Changes to this Notice

**We** keep **Our** privacy notice under regular review. This notice was last updated on the 8th March 2018.

## Contacting Us

If **You** have any questions relating to the processing of **Your** information, please contact **Us**:

**Petplan** Australasia Pty Ltd  
Customer Service Centre  
1-3 Smolic Crt  
Tullamarine VIC 3043  
Phone 1300 738 225

For information about the Insurer and HDI Global Specialty SE -Australia please visit [www.hdi-specialty.com](http://www.hdi-specialty.com)

## Sanctions

**We** will not provide any benefit under this insurance to the extent of providing cover, payment of any claim or the provision of any benefit where doing so would breach any sanction, prohibition or restriction imposed by law or regulation.

## Choice of Law and Jurisdiction

**You** and **We** are free to choose the law applicable to this contract of insurance. Unless specifically agreed to the contrary this contract of insurance shall be governed by the laws of **Australia** and subject to the exclusive jurisdiction of the courts of **Australia**.

Any term in this contract which conflicts with the law which applies to the country in which **You** live shall be amended to conform to that law.

## Service of Suit

The **Insurer** agrees that in the event of a dispute arising under this **Policy**, the **Insurer** shall, at **Your** request, submit to the jurisdiction of any competent court in the Commonwealth of Australia. Such dispute will be determined according to the law and practice applicable to such court. Any summons, notice or process to be served upon the **Insurer** as follows:

HDI Global Specialty SE -Australia  
Tower 1, Level 33  
100 Barangaroo Ave  
Sydney NSW 2000

## Language

Unless otherwise agreed in writing the language of **Your** policy and any communication throughout the duration of the policy will be in English.

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## How to contact us

<b>BY TELEPHONE</b>	1300 738 225
<b>BY EMAIL</b>	<a href="mailto:info@petplan.com.au">info@petplan.com.au</a>
<b>IN WRITING</b>	Petplan Australasia Pty Ltd Customer Care 1-3 Smolic Court Tullamarine VIC 3043
<b>WEBSITE</b>	<a href="http://www.petplan.com.au">www.petplan.com.au</a>

### **Administrator**

Petplan Australasia Pty Ltd ABN 64 069 468 542 AFSL No. 245663 is the sole Administrator of the **Policy** acting on behalf of the **Insurer**.

Petplan® is a Registered Trade Mark, and Products sold under this Trade Mark in Australia are sold exclusively by Petplan Australasia Pty Ltd under Licence from Pet Plan Limited.

### **Head Office**

1-3 Smolic Crt, Tullamarine VIC, 3043 Ph: 1300 738 225  
[info@petplan.com.au](mailto:info@petplan.com.au) [www.petplan.com.au](http://www.petplan.com.au)

### **The Insurer**

HDI Global Specialty SE -Australia (ABN 58 129 395 544, AFS License number 458776) (HDI Global Specialty) with its registered address at Tower 1, Level 33, 100 Barangaroo Avenue, Sydney NSW 2000.

HDI Global Specialty SE -Australia is authorised to carry out insurance business in Australia by the Australian Prudential Regulation Authority in accordance with the Insurance Act 1973 (Cth).

