

Third Party Liability Claim Form



Complete and return to: claims@petprotect.co.uk

Please ensure both pages of this claim form are completed by the policyholder

This form is intended for the use of the external claims handlers of our underwriters in connection with a claim against you, actual or anticipated. Please answer each question as fully as possible and return without delay to the email address shown above.

Each time your pet injures someone or damages their property, and you are responsible, we will pay up to the maximum amount as shown on your policy schedule:

- Compensation to them for the injury or damage;
- Their legal costs to claim compensation from you;
- Our legal costs if we defend the claim against you

We are unable to become involved in a police prosecution

We will not pay compensation or legal costs if the injured person or the damaged property belongs to, is in the custody or control of, or is held in trust by you or a person who:

- is part of your family
- lives at your home
- works for you or
- is looking after your dog with your permission

Policyholder Details

Policy Holder Name		Policy Number	
Address		Mobile Number	
		Telephone number	
		Email Address	

About Your Dog

Policy Start Date (DD/MM/YY)		Sex	
Name of Dog		Dog's Date of Birth	
Breed of Dog		When did you acquire your dog? (DD/MM/YY)	
Has your dog attended any training or obedience classes?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details:			
Was the other party known to you or your dog?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details:			
Was your dog on a lead and/or muzzled at the time of the incident?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has anyone ever complained about your dog's behaviour, or has it ever been aggressive towards another person or animal?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Household Insurance

Policy Number		Name of Insurer	
Address of Insurer		Postcode	

About the Accident or Incident

Date of Incident (DD/MM/YY)		Time of Incident (HH:MM)	
When was the accident or incident reported to you? (DD/MM/YY)			
Place of accident or incident			
Who was in charge of the insured dog at the time of the accident or incident?			

Full description of the accident or incident circumstances. Please use the below box to create a sketch of the accident or incident.

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About the Accident or Incident (continued)			
Has a claim been made against you? If yes, please attach all details with this form		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Was the accident or incident reported to the police?			
If yes, please provide more information:			
Station Name		Incident Reference Number	
Address		Postcode	
Do you believe anyone else caused or contributed to the accident or incident? If yes, please provide details below:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Name		Postcode	
Address		Why do you feel this person is to blame?	

Details of the injured party or owner of damaged property	
Name	
Address	
Postcode	
Details of personal injury	
Details of damage to property	
Is the claimant a relative or an employee?	

Witness (if there were any witnesses to the accident or incident, please list these below)	
Who was present at the time?	
Name	
Address	
Postcode	
Name	
Address	
Postcode	
Did you obtain statements from the witness or witnesses? (even if they did not see the incident)	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide full details	
Have you had any other complaints by third parties regarding your dog(s)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide full details	

Declaration – please carefully read this declaration and sign below	
By signing this form, I declare that the above statements are true and complete to the best of my knowledge and belief. I understand that this form is not to be taken as an admission by the Company of any Liability to the insured or to any other person.	
Signed (Policyholder)	Date (DD/MM/YY)
Name Printed	

Contact Pet Protect
Chat with us: Before you contact us, many queries can be answered through our help section or by completing the forms within the Manage My Policy section on our website visit www.petprotect.co.uk you can also chat to us using our Live chat service.
Call 0345 602 4797: Lines are open from 9am to 5.30pm Monday to Friday. Calls may be monitored and recorded.
Post to: Pet Protect Limited, PO Box 7925, Bilston, WV1 9TT.