



Pet Insurance for Rabbits

Terms and Conditions
for Lifetime Policies



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Introduction

This policy booklet provides **you** with the Terms and Conditions for the Pet Protect Lifetime Pet Insurance for rabbits which meet the demands and needs of a person who wishes to ensure that the veterinary costs of their **pet** are met now and in the future.

The Terms and Conditions provide **you** with the details of **your pet's** cover and form part of **your** insurance contract together with **your certificate of insurance** and any future endorsement documents. **Your certificate of insurance** is the personalised document which shows the **maximum benefits, excess(es)** and any special conditions and exclusions that apply to the cover **you** have selected.

It is important to read these Terms and Conditions alongside **your certificate of insurance** so that **you** know what **your** insurance does and doesn't cover and understand the requirements for making a claim. If any of the information contained in **your certificate of insurance** is incorrect please contact **us** straight away so that **we** can update **your** policy record.

Your policy is sold and administered by **Pet Protect Limited**, and underwritten by Pinnacle Insurance Limited.

This policy uses words and phrases that have specific meanings. **You** will find these explained in Section 2 - Definitions. Defined words are shown in **bold** wherever they appear. The singular shall include the plural and vice versa.

1 Contact Details



You can submit, track and manage a claim and make changes to **your** policy by logging in to:

Pet Portal: petportal.petprotect.co.uk



If **you** would prefer to speak to **us** please call **us** on 0345 602 4797 or contact **us** by live chat through **our** website.

Lines are open Monday to Friday 9am to 5:30pm.

To improve the quality of **our** service, **we** may monitor and record telephone calls. The cost of calls to 03 prefixed telephone numbers are charged at national call rates. Charges may vary for different network providers.

Address your letter or email to the relevant team:

General enquiries or cancellations:

Claims:

Complaints:

Post to:

Email Customer Services Team:

Email Claims Team:

Email Customer Relations Team:

Customer Services Team

Claims Team

Customer Relations Team

Pet Protect Pet Insurance,
PO Box 7925, Bilston,
WV1 9TT

enquiries@petprotect.co.uk

claims@petprotect.co.uk

complaints@petprotect.co.uk



PetConnect 

24/7 pet advice if your pet is unwell

Your Pet Protect Pet Insurance policy gives **you** access to PetConnect for any non-emergency **pet** health queries, behavioural and nutritional advice, and an opportunity to talk to someone should **you** sadly lose **your pet**.

Call PetConnect any time of the day or night on 0333 332 0339.
Make sure that **you** have **your** policy number to hand when **you** call.

If **you** prefer, **you** can also speak to PetConnect through live chat.
The link to this can be accessed by logging into the **Pet Portal**.

But remember, in an emergency:

You should always consult **your vet** immediately if **your pet** has collapsed, is unconscious or has been involved in a serious **accident**.

If **you** then need to make a claim, please log in to **Pet Portal** or contact **us** through **our** website.

2 Definitions

Accidental Injury means a sudden and unforeseen injury which is the result of an identifiable and known cause or event during the **policy year**. This includes any **symptoms**, whether or not diagnosed.

Certificate of Insurance means the personalised document issued by **us** which sets out the details of **your** cover, and which should be read in conjunction with the terms and conditions of the policy.

Complementary Treatment means hydrotherapy, osteopathy, massage and healing, laser treatment, electrical muscle stimulation, acupuncture or chiropractic **treatment**.

Condition(s) means any **illness** or **accidental injury** whether or not it results in a diagnosis. There will be **conditions** that will fall in the following categories:

1. **Bilateral Conditions(s)** means any **condition** affecting the right and left sides or paired organs or body parts of **your pet** such as (but not limited to) ears, eyes, cruciate ligaments, hips and patellae, where there is an underlying cause;
2. **Recurring Conditions(s)** means any previous **illness** or any **symptoms** relating to that **illness** or a previous **accidental injury** or any **symptoms** relating to that **accidental injury** that may come back or that **your pet** is prone to, no matter how many times this comes back or how many areas of the body are affected;
3. **Related Condition(s)** means if a number of **illnesses**, **accidental injuries** or **symptoms** are:
 - Diagnosed as one **illness** or **accidental injury**; or
 - Caused by, relate to, or result from another **illness**, **accidental injury** or **symptom**.

When applying a **maximum benefit** or exclusion, **we** will consider **bilateral**, **recurring** or **related conditions** as one **condition**.

Excess(es) means the amount **you** pay towards each **vet fees** claim. The **excess(es)** will be a fixed amount (for example £60) and a percentage contribution (for example 15%). **Your excess(es)** are shown in **your certificate of insurance**. When **your pet** reaches a certain age these **excess(es)** will increase. This change and the age when it applies for **your pet** is shown on **your certificate of insurance**. **You** will be told of the change at least one year before it is applied.

Family means **your** spouse, civil partner, partner of the same or opposite sex whom **you** currently live with, **your** children, **your** parents, or other relatives who normally live with **you**.

Helpline means the helpline operated by PetConnect, a trading name of Vetsdirect Limited.

Illness means physical disease, sickness, abnormality, infection or failure which is not caused by an **accidental injury**. This includes any **symptoms**, whether or not diagnosed.

Insurer means Pinnacle Insurance Limited.

Maximum Benefit means the most **we** will pay during the **policy year** in respect of any element of cover as set out in **your certificate of insurance**.

Words and phrases with special meanings/cont...

Pet means the rabbit named and described on **your certificate of insurance**.

Pet Portal means the online platform (petportal.petprotect.co.uk) where **you** can manage **your** policy and submit and track claims.

Pet Protect Limited means the administrator of this policy. **Pet Protect Limited** is registered in England and Wales with registered number 1774371. Registered office: 4th Floor, Limelight, Elstree Way, Borehamwood, Hertfordshire, United Kingdom WD6 1JH. **Pet Protect Limited** is authorised and regulated by the Financial Conduct Authority (Firm reference number 311794).

Policy Year means the 12 month period shown on **your certificate of insurance** during which **your premium** and benefit levels are guaranteed. However, if there is a change to **your** circumstances (specifically noted by **you**) or correction to **your pet's** details, it may be necessary to alter **your premium** during that 12 month period.

Premium(s) means the **premium** payable either monthly or annually by **you** in respect of this insurance.

Start Date means the date when **your pet** first becomes covered under this policy as shown on **your certificate of insurance**.

Symptom(s) means a change in **your pet's** normal healthy state, its bodily functions or behaviour.

Treatment(s) means any examination, consultation, advice, tests, X-rays, medication, surgery, nursing and care provided by a **vet**, veterinary practice or member of an approved professional organisation following **your vet's** instruction, which **we** deem necessary in line with the Royal College of Veterinary Surgeons code of professional conduct up to the limits set out in **your certificate of insurance**. **We** may telephone **your vet** to confirm that **treatment** was appropriate for the particular **condition**.

Vet means a member of the Royal College of Veterinary Surgeons working as a veterinary surgeon or holding a veterinary degree approved by the Royal College of Veterinary Surgeons in the United Kingdom, the Channel Islands or the Isle of Man.

Vet Fees means fees charged by a **vet** to provide **treatment** for a **condition**.

We, Us, Our means **Pet Protect Limited**.

You, Your, Yourself means the person named in the **certificate of insurance** who is responsible for **your pet**. Joint policyholders are not permitted. If **your pet** is owned by more than one person **you** must select one to be the policyholder.

3 Eligibility and Cover Limits

You can insure **your pet** from 8 weeks up to their 5th birthday.

Once **your pet** is insured, cover can continue beyond this upper age limit for the lifetime of **your pet** subject to the terms and conditions of this policy.

The **maximum benefits** payable under this policy per **policy year** are shown in **your certificate of insurance**.

4 Your Insurance Cover

A. Veterinary Fees

What we will pay

We will reimburse **you** the cost of any **treatment your pet** has received for a **condition(s)** during the **policy year**, up to the limits set out in **your certificate of insurance**. We may telephone **your vet** to confirm the **treatment** was appropriate for the particular **condition**. If **we** believe these fees and/or **treatment** are excessive, **we** will negotiate with **your vet** on **your** behalf and **we** may ask **you** to seek an alternative **vet** for future **treatment**. Otherwise **we** may not be able to pay future claims.

What you pay

You are required to pay the **excess(es)** as shown on **your certificate of insurance**.

What you are covered for

- ✓ **Vet fees** up to the **maximum benefit** stated on **your certificate of insurance**;
- ✓ Any herbal or homeopathic treatment **your vet** recommends.
- ✓ Any **complementary** and physiotherapy **treatment your vet** recommends up to the limits specified on **your certificate of insurance**.
- ✓ The cost of having **your pet** put to sleep (euthanasia) if recommended by or agreed with **your vet**.
- ✓ 25% of the cost of a clinical diet for **your pet** for a maximum period of 6 months per **condition**, if it is recommended by **your vet** for a treatable **condition** other than for obesity/weight loss.
- ✓ The cost of dental **treatment** as a result of an **accidental injury**;
- ✓ The cost of **treatment** for a dental **condition** and any **related conditions**, provided:
 - There is a history of annual check-ups (if not annual, as recommended by **your vet**) and evidence that any advice given has been followed within 3 months; and
 - The **treatment** is to relieve suffering due to **illness**;
- ✓ Ongoing **treatment** of a **condition** providing the policy remains in force, subject to the 'We will not pay for' section below; and
- ✓ Fees for **treatment** for the first instance of fly strike.

A. Veterinary Fees/cont...

What we will not pay for

- x Any **condition** or **symptom**, or anything related to it, that **you** were aware of or has been noted and/or investigated by a **vet** before this policy started;
- x Any excluded **condition** stated on **your certificate of insurance**;
- x The cost of any **treatment** for any **illness** which occurs or shows **symptoms** within 14 days of the **start date**;

This 14 day exclusion period will not apply if **you** have switched to **Pet Protect Pet Insurance** from another insurer and have had continuous cover for **your pet** for at least 14 days with **your** previous insurer before **your** policy **start date**. If this is the case, **we** will ask for evidence of **your** previous policy.

- x Any **treatment** for **accidental injury** or poisoning within 3 days of the **start date**;

This 3 day exclusion period will not apply if **you** have switched to **Pet Protect Pet Insurance** from another insurer and have had continuous cover for **your pet** for at least 14 days with **your** previous insurer before your policy **start date**. If this is the case, **we** will ask for evidence of **your** previous policy.

- x The **excess(es)**;
- x Any amount more than the **maximum benefit** in any **policy year** as set out in **your certificate of insurance**;
- x Any **treatment** **your pet** has received outside the **policy year**;
- x House calls, any extra cost for out of hours **treatment**, or ambulance fees, regardless of **your** personal circumstances, unless **your vet** confirms that moving **your pet** or waiting until normal surgery hours would either endanger its life or significantly worsen the **condition**;
- x Any costs relating to routine or investigative tests, unless they are undertaken as part of **treatment** for a **condition** covered under this policy;
- x Any routine and preventative **treatments**, vaccinations, cosmetic dentistry, cosmetic surgery, cleaning, trimming and descaling of teeth, spaying, castration, routine removal of dew claws, parasite control **treatments**, grooming and nail clipping;
- x Any complications arising from cosmetic **treatments** or where **your vet** confirms the **treatment** was not necessary;
- x The cost of **treatment** for a dental **condition** and any related **conditions**, unless:
 - a. there is a record of annual check-ups (or if not annual, as recommended by **your vet**) and evidence that any advice given has been followed within 3 months; and
 - b. the **treatment** is to relieve suffering due to **illness**.

A. Veterinary Fees/cont...

- x The cost of routine and preventative trimming, burring or rasping of rabbits' teeth;
- x Any **treatment** related to deciduous teeth if **your pet** is over 16 weeks of age at the **start date**;
- x Any **treatment** related to retained testes if **your pet** is over 16 weeks of age at the **start date**;
- x The cost of any food except as set out in Section 4 A 'What you are covered for';
- x The cost of any post mortem examination, cremation, burial or disposal of **your pet**;
- x Any **treatment** for an **illness** that is preventable by vaccination and **you** failed to vaccinate as recommended by **your vet**;
- x The cost of any **treatment** for fleas except where this is used to treat a skin condition, in which case **we** will pay the cost of one flea **treatment**;
- x Fees for **treatment** related to a second or subsequent instance of fly strike;
- x Any **treatment** related to pregnancy, giving birth or breeding, uterine cancer and any complications thereof;
- x Any post-operative or convalescent **treatment** which **your vet** confirms **you** could have provided in **your home yourself**;
- x Any organ or stem cell transplants and any related **treatment**, limb prostheses including any **vet treatment** needed to fit the prosthesis. This does not apply to the cost of replacing hip, knee and/or elbow joints;
- x The cost of surgical items that can be used more than once;
- x Claims resulting from **your pet** being involved in a fight where **your pet** has a history of **treatment** following fighting
- x Any **treatment** following a fight between two or more of **your pets** or where one of the pets involved is residing at **your** address but belongs to a member of **your family** or anyone else living with **you** on a permanent or temporary basis;
- x Any **treatment** for an **injury** or illness deliberately caused by **you** or anyone living with **you**;
- x Any fees charged by **your vet** for completing claim forms;
- x Any fees charged by **your vet** for referral to another **vet**;
- x Travelling expenses; or
- x Any claims for **treatment** not supported by a receipt endorsed with the address and telephone number of the veterinary surgery providing **treatment**.

B. Finding your Pet

What we will pay

- ✓ **We** will reimburse **you** for any local advertising expenses and rewards **you** have had to pay to help recover **your pet** after it is stolen or strays during the **policy year**, up to the **maximum benefit**.

What we will not pay for

- x If **your pet** is stolen or strays within 14 days of the **start date**;
This 14 day exclusion period will not apply if **you** have switched to **Pet Protect Pet Insurance** from another insurer and have had continuous cover for **your pet** for at least 14 days with **your** previous insurer before **your** policy **start date**. If this is the case, **we** will ask for evidence of **your** previous policy.
- x Any reward not supported by a signed receipt giving the name, address and telephone number of the person who found and returned **your pet** to **you**;
- x Any reward to a **family** member;
- x Any reward to the person who was caring for **your pet** when it was lost or stolen; or
- x Any costs for services provided by another person, company, organisation or pet detective other than producing posters and leaflets for local advertising and communicating the loss on the internet and social media.

C. Your Hospitalisation and Boarding Fees

What we will pay

- ✓ **We** will reimburse **you** for rabbit hotel fees **you** have had to pay up to the **maximum benefit**, if during the **policy year**:
 - **You** or a member of **your family** is ill or injured and has to spend more than 48 hours in hospital; and
 - **Your pet** stays in a licensed rabbit hotel while **you** are hospitalised.

Alternatively, if **you** ask someone who is not living with **you** to look after **your pet** while **you** are in hospital, **we** will pay a daily rate of £15, subject to the **maximum benefit**.

C. Your Hospitalisation and Boarding Fees/cont...

We will not pay any costs resulting from your hospitalisation:

- x For alcoholism, drug abuse, self-inflicted injuries, pregnancy or giving birth;
- x For an **illness** or **accidental injury** first occurring or showing **symptoms** before the **start date**; or
- x For an **illness** first occurring or showing **symptoms** within 14 days of the **start date**.

This 14 day exclusion period will not apply if **you** have switched to **Pet Protect Pet Insurance** from another insurer and have had continuous cover for **your pet** for at least 14 days with **your** previous insurer before **your** policy **start date**. If this is the case, **we** will ask for evidence of **your** previous policy.

5 General Exclusions, Rights and Responsibilities and General Conditions

A. General Exclusions

We will not pay for

- x Any other costs that are indirectly caused by the event which led to **your** claim, unless specifically stated in this policy.
- x Any claim arising from a malicious or intentional act, wilful injury or gross negligence by **you** or any member of **your family** or anyone else living with **you** on a permanent or temporary basis.
- x Any **pet** less than 8 weeks old.
- x Any claim where United Kingdom animal health or importation legislation has been contravened or broken.
- x Any claims arising as a result of war, civil war, hostilities (whether war be declared or not), violence for any political, religious or ideological reason, terrorist activity, revolution, civil unrest or any similar event.
- x Any claims arising from radiation, nuclear explosion or radioactive contamination.
- x Any claims arising from air, water or soil pollution.
- x Any claim arising from pressure waves from supersonic aircraft.
- x Any claim which **your vet** confirms has arisen as a result of **you** not taking reasonable care of **your pet**.

B. Your Rights and Responsibilities

1. **You** must take proper and reasonable care of **your pet** at all times. This includes, but is not limited to, ensuring **your pet** is handled correctly and safely at all times and that **your pet** is fed a wholesome and nutritionally adequate diet and **your pet's** body weight is maintained within a normal range (as recognised by **your vet**).
2. **You** must take **your pet** for regular annual check-ups, (or as otherwise recommended by **your vet**) and vaccinations with licensed products as recommended by **your vet**.

B. Your Rights and Responsibilities/cont...

3. **You** must respond honestly to any request for information **we** make when **you** take out cover under this policy, or apply to vary **your** cover under this policy. In the event that any statement of fact **you** make is untrue or misleading, this may affect the validity of **your** policy, any claims previously paid by **us**, and whether **you** can make any subsequent claim.
4. If **you** have legal rights against another person in relation to **your** claim, **we** may take legal action against them in **your** name and at **our** expense. **You** must give **us** all the help that **you** can and provide any documents that **we** ask for.
5. **You** must pay **your premium** in full and on time to remain covered.
6. **You** must check **your certificate of insurance** on receipt and return it to **us** for correction if **you** find any mistakes.
7. **You** must keep to the conditions of the policy.
8. **You** must never make any claim **you** know is false, dishonest or exaggerated.
9. If **you** wish to cancel **your** policy, please contact **us** as set out in Section 1.

If **you** fail to carry out these responsibilities, **we** may reduce or refuse to pay any claim **you** may make.

C. Our Rights and Responsibilities

1. **We** will assess all claims fairly, reasonably and promptly against the information **you** provide and the terms of the policy.
2. When **you** claim, if **you** have other insurance cover under which **you** can claim, **you** must notify **us** of the other insurer and give **us** authority to contact them to discuss how **we** apportion liability for the claim.
3. **We** may need to see **your pet's** records from any **vet** who has treated it and any other information about **your pet** before **your** claim is paid. If the **vet** charges for this information, **you** will have to pay.
4. **We** may need to arrange for a representative to visit **you** and **your pet** if **we** feel **we** need further information to properly validate **your** claim.

D. Contract of Insurance

1. This is an annually renewable policy which **you** can either pay as a single annual payment or in monthly instalments. The contract of insurance between **you** and **us** consists of the policy terms and conditions, **your certificate of insurance** and any endorsements.

D. Contract of Insurance/cont...

2. **Your** cover under this policy will end on the earliest of the following:
 - a. The date **your pet** dies;
 - b. The date **you** fail to pay the **premium** when due;
 - c. The date **you** or **we** cancel **your** cover subject to the terms and conditions of this policy.
3. (a) If **we** make any claim payments as a result of dishonesty or deceitful behaviour by **you** (or by someone acting on **your** behalf), then:
 1. **We** may stop making further payments and may seek to recover from **you** any sums paid by **us** in respect of any dishonest claim;
 2. **We** may terminate the contract with effect from the time of the behaviour which may affect other claims; and
 3. If **we** terminate the contract, **we** may refuse to pay any claims occurring after the time of the dishonest claim.
- (b) If **we** terminate the contract under this section, **we** will not return any of the premiums paid by **you**.
- (c) These provisions will not affect any valid claim occurring before the dishonest claim.

4. Premiums

- (a) The **premium** for this policy is fixed for 12 months and reviewed annually on the anniversary of the policy **start date**.

If there is a change to **your** circumstances or correction to **your pet's** details, **we** may be required to alter **your** premium during the 12 month period.

- (b) Each year, at least three weeks before the current **policy year** is due to end, **we** will send a renewal notice by **your** chosen method of contact setting out the new policy terms and conditions and **premium** for the next **policy year**. If **you** have already given your consent for **us** to collect the premium, **your** payment will continue to be taken using **your** designated payment method unless **you** instruct us otherwise. **Your** cover under this policy will continue as long as **you** pay the **premium** whenever **your premiums** are reviewed.

When reviewing **your premiums**, we will consider any future impact to one or more of the following:

1. Changes due to new information arising from **our** own experience suggesting that **our** future claims experience is likely to be better or worse than previously assumed. This information includes changes to the number and types of claims **we** expect to pay or changes to the average expected amount paid per claim;

D. Contract of Insurance/cont...

2. Changes due to new information arising from external sources such as general industry, population or reinsurer experience suggesting that **our** future claims experience is likely to be better or worse than previously assumed. This includes information on the cost of veterinary **treatments** (which may vary depending upon **your** location) and general information about the breed of **your pet**;
 3. Changes to **your** circumstances such as the age of **your pet**, **your** claims history or any change to **your** address;
 4. Relevant changes to **our** previous assumptions in relation to:
 - a. Expenses related to providing the insurance;
 - b. Policy lapse rates which means the average time policies are held;
 - c. Interest rates;
 - d. Tax rates;
 - e. The cost of any legal or regulatory requirements;
- (c) Any changes to **your premium we** make will not:
1. Be made as a result of any reason other than changes in the assumptions mentioned in Section 5 D 4 (b) above; or
 2. Be made to recover any previous losses.
- (d) As a result of the **premium** review, **your premium** may go up, stay the same or go down, and there is no limit to the amount of any change.
- (e) If **we** change **your premium** and **you** do not wish to continue **your** cover **you** should contact **us** to cancel. **You** can cancel at any time as set out in Section 5 D 6 below.
- (f) **You** must continue to pay the full **premium** even when **you** are making a claim under this policy to ensure that cover can continue in respect of any further **treatment** provided or costs incurred. Claims can only be considered in respect of **treatment** provided or costs incurred during the period for which **premium** has been paid.

5. Terms and Conditions

- (a) The terms and conditions of this policy are fixed for 12 months and reviewed annually on the anniversary of the policy **start date**. Each year, at least three weeks before the current **policy year** is due to end, **we** will send a renewal notice as outlined in section 5 D 4 (b) above and this will include **your** new Terms and Conditions.
- (b) **We** may vary or waive the terms and conditions of this policy to reflect changes in the assumptions set out in Section 5 D 4 (b) above which **we** use to design and price **your** cover. Such changes may have the effect of increasing or reducing the cover previously provided under this policy.

D. Contract of Insurance/cont...

- (c) **We** may make changes to **your** policy terms and conditions on each anniversary of the **start date** of **your** policy. When changing **your** terms and conditions **we** will consider any future impact of changes in one or more assumptions due to the reasons set out in Section 5 D 4 (b) above.
- (d) In addition, **we** may also vary or waive **your** terms and conditions to:
1. Improve **your** cover;
 2. Comply with any applicable laws or regulations;
 3. Reflect any changes to taxation;
 4. Correct any typographical or formatting errors; or
 5. Provide additional clarity to the existing terms and conditions.
- (e) Any changes to **your** terms and conditions will not:
1. Be made as a result of any reason other than changes in the assumptions mentioned in Section 5 D 4 (b) or for the reasons set out in Section 5 D 5 (d) above; or
 2. Be made to recover any previous losses.
- (f) If **your policy** is varied and **you** do not wish to continue **your** cover **you** should contact **us** to cancel. **You** can cancel at any time as set out in Section 5 D 6 below.

6. Your Right to Cancel

If **you** are thinking of leaving **us**, please contact **us** on 0345 602 4797 or by live chat on **our** website. **You** can also send **us** an email through the **Pet Portal** using the following link: petportal.petprotect.co.uk

Within the 'cooling off period'

If **you** decide **you** do not want the cover and wish to cancel **your** policy, **you** can do so within 14 days of either the **start date** or the date **you** receive these policy documents, whichever is later (the "cooling off period"). **You** will receive a full refund of any **premium** **you** have paid provided no claim has been made under the terms of this policy. If **you** have made a claim, no refund of **premium** will be payable.

Outside the 'cooling off period'

Monthly payments

If **you** pay for **your** policy monthly and cancel **your** policy after the initial 14 day cooling off period, **we** will cancel **your** policy and not collect the future monthly payments due for the remainder of the current period of insurance. If **you** pay for **your** policy monthly and cancel **your** policy because **your pet** has died, been stolen or has strayed, and **you** claim for this, **we** will not deduct any further monthly payments for the remainder of the current period of insurance.

D. Contract of Insurance/cont...

However, if **you** have been paid a claim during this **policy year** then **we** will deduct any outstanding monthly payments for the current period of insurance from **your** final settlement claim.

Annual payments

If **you** have paid the full annual **premium** and cancel **your** policy after the initial 14 day cooling off period, **we** will refund a pro-rata proportion of the **premium** already paid for the remainder of the current period of insurance provided **you** have made no claims under this policy during this **policy year**.

If **you** have paid the full annual **premium** and cancel **your** policy because **your pet** has died, been stolen or has strayed **we** will refund a pro-rata proportion of the **premium** already paid for the remainder of the current period of insurance.

However, if **you** have been paid a claim during this **policy year** then **we** will not refund any of the **premium** already paid unless the claim value is less than the pro-rata **premium** for the remainder of the **policy year**. In this case, the difference between the pro-rata **premium** and the claim value will be refunded.

If, at renewal, **your premium** changes and/or **your** terms and conditions are varied and **you** do not wish to continue **your** cover **you** should contact **us** to cancel. **You** can cancel on the terms set out above. Any cancellation, as a result of such changes, will take effect at the end of the period for which **you** have already paid **your premium**.

All cancellation requests should be made to:

Customer Services Team
Pet Protect Pet Insurance
PO Box, Bilston,
WV1 9TT

Telephone: 0345 602 4797

7. Our Right to Cancel

(a) **We** may cancel **your** insurance cover immediately when:

1. **You** deliberately tell **us** something which is untrue or misleading in response to any question **we** ask **you** when **you** take out cover under this policy, or apply to vary **your** cover under this policy (or **we** can demonstrate from the relevant circumstances that **you** did not take reasonable care to ensure the statements **you** made to **us** were true);
2. **You** unintentionally tell **us** something which is untrue or misleading in response to any question **we** ask **you** when **you** take out cover under this policy or apply to vary **your** cover which, if correctly answered, would have caused **us** to decline to cover **you**;

D. Contract of Insurance/cont...

3. There is evidence of dishonesty or deceitful behaviour by **you** (or by someone acting on **your** behalf) in relation to the cover provided under this policy (see Section 5 D 3);
4. Necessary to comply with any applicable laws or regulations; or
5. Necessary to comply with any applicable sanctions. **We** will not be liable to provide cover (including payment of a claim or provision of any other benefit) under this policy if **we** are prevented from doing so by any sanction which prohibits **us** or **our** parent company (or **our** parent company's ultimate controlling entity) from providing cover under this policy. Sanctions change from time to time and can include prohibiting the transfer of funds to a sanctioned country, freeze the assets of a government, the corporate entities and residents of a sanctioned country, or freeze the assets of specific individuals or corporate entities. This means that if **you**, or any joint policy holder or other relevant third party who has suffered a loss which would otherwise be covered under the policy, are the subject of a sanction, **we** may not be able to provide cover under the policy.

For the purposes of this clause, "sanctions" means any sanctions, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union or United Kingdom.

If **your** policy is cancelled as a result of Section 5 D 7 (a) 1, 3, 4 or 5, **we** will not return any **premiums you** have paid under the terms of this policy. If **your** policy is cancelled as a result of Section 5 D 7 (a) 2, **we** will return any **premiums you** have paid under the terms of this policy provided no claim has been made.

- (b) Any decision to cancel cover will not be made at an individual level and will not be based on whether **you** have made a claim, except where Section 5 D 7 (a) 1, 2 or 3 applies.
- (c) Cancellation of **your** policy will not affect **your** entitlement to claim for any event occurring before the date of cancellation, except where Section 5 D 7 (a) 1, 2 or 3 applies.

8. Reinstatement

If **you** cancel **your** cover under this policy, or the cover lapses due to unpaid **premium**, **you** may ask **us** to reinstate the policy. If **we** accept **your** request, any claim or **condition** arising during the period when **you** were not covered i.e. the lapse period, will not be accepted.

E. General Conditions

1. **You** and **your pet** must live in the United Kingdom at the address shown on **your certificate of insurance**.
2. **Territorial Limits** - this insurance only applies in the United Kingdom, the Channel Islands and the Isle of Man.
3. **Choice of Law** - this policy is governed by English law. Any legal proceedings will be held in the courts of England and Wales unless **you** live in Scotland, Northern Ireland, the Channel Islands or the Isle of Man, in which case **you** will be entitled to commence legal proceedings in **your** local courts.
4. **Surrender Value** - when **your** cover under this policy ends it will not have a cash value.
5. **Transfer Rights** - the rights given under this policy can be transferred directly to another individual taking on the full responsibility of the **pet** provided **you** obtain **our** consent. In order to transfer the rights of **your** policy, please contact **our** Customer Services Team using the details in Section 1. Transfer of rights may result in a change to the **premium** amount.
6. Failure to comply with any condition of this policy may result in the suspension or the stopping of the benefits.
7. All communications will be conducted with **you** in English.

6 Making a Claim

Before making any claim please check **your** policy and **certificate of insurance** to see if **you** are covered. Please remember that any costs relating to the completion of claim forms must be paid by **you**.

Please note that **we** cannot guarantee the validity of a claim over the phone. **You** will need to provide a completed claim form and **we** will notify **you** in writing of **our** decision.

We have a regulatory obligation to prevent fraud. In the event of a claim, any information **you** have supplied relevant to this insurance and on the claim form, together with other information relating to the claim may be shared with other insurers in order to prevent fraudulent claims.

We reserve the right to decline to pay any costs or fees that are not covered, where these have been included with other costs or fees that are covered (see "What we will not pay for" in each section of **your** cover). This includes any claim that is processed by **our** automated decision making tool. **You** can discuss these decisions with **us** at any time.

A. Veterinary Fees

- Step 1: Before **your pet** is treated, check **your vet** is prepared to complete a claim form, provide invoices and a full medical history.
- Step 2: The quickest way to log and track a claim is to go to **Pet Portal** (petportal.petprotect.co.uk).
- Step 3: Alternatively you can download a claim form from the **Pet Portal** or from **our** website and return to us together with the invoices showing the costs/fees **you** have paid.
- Step 4: **You** should submit **your** claim together with invoices showing costs/fees **you** have incurred within 12 months of the **treatment** taking place. Failure to do so will result in non-payment of **your** claim unless there are exceptional circumstances.

B. All other Claims

Step 1: Download a claim form from the **Pet Portal** (petportal.petprotect.co.uk).

Step 2: Complete the relevant sections of the claim form, sign and return together with:

Finding your Pet

(a) receipts for any advertising costs and rewards.

Before incurring any advertising or reward costs please contact **us** to obtain approval.

Your Hospitalisation and Boarding Fees

(a) **your** rabbit hotel receipts; and

(b) evidence from **your** doctor or hospital confirming **your** hospital stay.

7 If you have a Concern

A. PetConnect Helpline

You have access to **our PetConnect** helpline where qualified veterinary nurses can assist with queries regarding **your pet's** health and wellbeing.

If **your pet** shows any signs of injury, **illness** or distress, **we** suggest **you** telephone **PetConnect** on 0333 332 0339, making sure **you** have **your** policy number to hand.

Special Note: If **your pet** has collapsed, is unconscious or been involved in a serious accident **you** should consult **your vet** immediately. Should this then result in **you** needing to make a claim, please log into the **Pet Portal** or contact **our** Customer Service Team on 0345 602 4797 as soon as possible.

B. Customer Service

If **you** have any queries during **your policy year** or **you** need to change **your** address, **your** payment details or **your pet** dies from natural causes, please visit our **Pet Portal** or contact **us** by live chat on our website.

The cost of calls to 03 prefixed numbers are charged at national call rates and charges may vary dependent on your network provider.

C. Complaints Procedure

We hope **you** never need to, but if **you** want to complain about **our** products or services **you** can do so by:

Calling us: 0345 602 4797

Writing to: Customer Relations Team
Pet Protect Pet Insurance
PO Box 7925
Bilston
WV1 9TT

C. Complaints Procedure/cont...

We will deal with any concerns **you** may have as quickly as **we** can and wherever possible within 8 weeks of receiving **your** complaint as required by the Financial Conduct Authority. If **you** are not satisfied with the answer **we** give **you**, **you** can refer **your** complaint to the:

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Telephone: 0300 123 9123 or 0800 023 4567
E-mail: complaint.info@financial-ombudsman.org.uk
Website: www.financial-ombudsman.org.uk

Following this complaints procedure does not affect **your** rights to take legal proceedings.

A leaflet about **our** full complaints process is available from **us** on request.

D. Compensation Arrangements

We are covered by the Financial Services Compensation Scheme (FSCS). If **we** are unable to meet **our** liabilities to **you**, **you** may be entitled to compensation from the FSCS. Further information is available from their website: www.fscs.org.uk

E. Important Information

Your Pet Protect Lifetime Pet Insurance for Rabbits is underwritten under policy number 02641 (22nd May 2024) by Pinnacle Insurance Limited.

8 Privacy Notice Using your Personal Information

Pet Protect Limited Privacy Notice

When **you** purchase **your** pet insurance, **we** will collect certain types of personal information from **you**.

We will process **your** personal data in line with the UK Data Protection Act 2018 to perform the contract with **you** or to take steps at **your** request before entering into the contract, when **we** manage **your** marketing consent choices, as well as to act in line with law and regulation and for the legitimate interests of **our** business.

Our full Privacy Notice is available on **our** website at the following address: www.petprotect.co.uk/privacy-and-cookies, which includes further information about **our** processing of **your** personal data, retention periods, **your** data protection rights and **our** contact details.

Pinnacle Insurance Limited Privacy Notice

When **you** purchase **your** pet insurance, **Pet Protect** will collect certain types of personal information from **you**, which **Pet Protect** will share with Pinnacle Insurance Limited, **your insurer**.

Pinnacle will process **your** personal data in line with the UK Data Protection Act 2018 to perform the contract with **you**, as well as to act in line with law and regulation and for the legitimate interests of **their** business.

Pinnacle's full Privacy Notice is available on Pinnacle's website at the following address: www.pinnaclepetgroup.com/privacy, which includes further information about **your** data protection rights and **our** contact details.



Pet Protect Limited
4th Floor, Limelight
Elstree Way
Borehamwood
Hertfordshire
WD6 1JH
United Kingdom

0345 602 4797
www.petprotect.co.uk

Pet Protect is underwritten by:

Pinnacle Insurance Limited
4th Floor, Limelight
Elstree Way
Borehamwood
Hertfordshire
WD6 1JH
United Kingdom

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