



We've Got Your Pet Covered

# Pet Insurance

Dog & Cat

Safety-Net Plans  
Economy

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



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



Dear Policyholder,

Thank You for considering insuring with Petcover, 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 Petcover 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; and
- Other important information.

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

### Information About Petcover'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 Petcover Aust Pty Ltd ABN 97 117 476 990 AFSL No. 507143 of 1-3 Smolic Court Tullamarine Vic 3043 telephone 1300 731 324 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 Petcover Aust Pty Limited (**Petcover**) 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 Petcover Aust 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.petcovergroup.com/au](http://www.petcovergroup.com/au).

### Who do We act for?

As an Agent acting under a binder from the Insurer, Sovereign Insurance Australia Pty Ltd ABN 85 138 079 286 AFS License Number 342516 **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 the Insurer's 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.

### 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 **Petcover** 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 Financial Services Reform requirements. This enables them to provide **You** with meaningful advice and assistance when **You** need it.

## The people who provide Our services

**We** provide **Our** services using **Petcover** 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 **Us** 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 allow **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 **Petcover'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 **Petcover** 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 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; and
- **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 currency. **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 **Petcover** 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 by **Us**, 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 monies 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.

**Petcover** and its staff may also receive non-monetary benefits from Insurers such as sponsorships of **Petcover** client functions and meals and entertainment. **Petcover** 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** local **Petcover** office.

### 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 **Petcover** 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

**Petcover** 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, Petcover Aust 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 Petcover Aust Pty Ltd and Sovereign Insurance 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 **Petcover** website at [www.petcovergroup.com/au](http://www.petcovergroup.com/au), or Sovereign Insurance Australia's website at [www.sovereignaustralia.com.au/wp-content/uploads/2019/01/JHG-Combined-Privacy-Policy-December-Final.pdf](http://www.sovereignaustralia.com.au/wp-content/uploads/2019/01/JHG-Combined-Privacy-Policy-December-Final.pdf) or alternatively, a copy can be sent to **You** on request. Please contact **Your Petcover** office or visit **Our** website at: [www.petcovergroup.com/au](http://www.petcovergroup.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, European Union 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 **Us** 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.

## 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.

**Petcover** 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.

**Petcover** may use or disclose information about its clients, if it is required to do so by:

- Foreign or Australian law;
- **Petcover** 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 **Petcover's** clients, these databases also may be accessed by other **Petcover** 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** local **Petcover** office.

### General Insurance Code of Practice

The General Insurance Code of Practice was developed by the Insurance Council of Australia to further raise standards of practice and service across the insurance industry by promoting better communication between **Insurers** and customers and outlining a standard of practice and service to be met by **Insurers**.

We keenly support the standards set out in the Code.

**You** can obtain more information on the Code of Practice and how it assists **You** by contacting **Us**. Contact details are provided on the back cover of this document. For more information on the Code of Practice and Code Governance Committee (CGC) visit [insurancecode.org.au](http://insurancecode.org.au).

### Insurance Brokers Code of Practice

Petcover Aust Pty Ltd is a member of the Steadfast Group Ltd. Both **Petcover** 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 **Petcover** have with **You** and **Your** rights relating to any breach of the Code by **Petcover** are limited to remedies available under the Code.

## Telephone Call Recording

**We** may record incoming and/or outgoing telephone calls for training or verification purposes. This allows **Us** to check information **You** give **Us** and to verify information **We** have given **You**. Where **We** have recorded a telephone call, **We** can provide **You** with a copy at **Your** request, where it is reasonable to do so.

## 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.

## Making a Complaint

**We** treat complaints very seriously and believe **You** have the right to a fair, swift, prompt and courteous service at all times. If **You** are dissatisfied with any aspect **Our** relationship, **You** may lodge a complaint. **Our** complaints process has three steps:

### 1. Immediate Response & Resolution

Many concerns can be resolved immediately, or within a short amount of time. 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 731 324 during normal office hours.

### 2. Internal Dispute Resolution

If **We** are unable to resolve **Your** concern, immediately or within 2 days, we will escalate your concerns as a complaint to Petcover's Internal Dispute Resolution Team. **Your** complaint will be handled by a person with appropriate authority, knowledge and experience. **You** will be provided with the contact details of the person assigned **Your** complaint. **We** will make a decision about **Your** complaint within 30 calendar days, however **We** will aim to resolve **Your** complaint within 15 business days. If **We** are not able to resolve your complaint within 15 business days, **We** will escalate the matter to Sovereign Insurance Australia or give **You** the option to contact them yourself. Both these internal review processes will be completed within the 30 calendar days.

**You** may also contact the Internal Dispute Resolution team directly on: 1300 731 324 or via email [idr.au@petcovergroup.com](mailto:idr.au@petcovergroup.com).

**You** may also contact Sovereign Insurance Australia, 263 Albany Highway, Victoria Park, WA 6100 or via email: [complaints@sovereigninsurance.com.au](mailto:complaints@sovereigninsurance.com.au).

### 3. External Dispute Resolution

In the unlikely event that **Your** complaint is not resolved to **Your** satisfaction following **Petcover's** Internal Dispute Resolution Process, **You** may be able to take **your** matter to the 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 for AFCA:

Australian Financial Complaints Authority Telephone: 1800 931 678

Email: [info@afca.org.au](mailto:info@afca.org.au)

GPO Box 3, Melbourne VIC 3000

Petcover Aust 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. **Petcover** 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 **Petcover** on 1300 731 324.

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

This Product Disclosure Statement ('PDS') which includes the **Policy** Wording contains important information about **You** Economy Pet Insurance for Dogs and Cats 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 **You** 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 **You** 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?

Sovereign Insurance Australia (ABN 85 138 079 286 AFS License Number 342516) with its registered address at 263 Albany Highway, Victoria Park, WA 6100 is the Insurer of the **Policy**.

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

### Who is the Administrator

Petcover Aust Pty Ltd ABN 97 117 476 990 AFSL No. 507143, is the sole Administrator of the **Policy**, acting under a binding granted by the Insurer that authorise it to issue, varying and dispose of this Insurance and to manage and settle claims and deal with complaints.

### 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) specified before entry into the contract or where required or permitted by law. 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; and
- Of the verbal and/or written information provided by **You** which **You** gave after having been advised of **Your** Duty not to make a Misrepresentation either verbally or in writing.

If **You** failed to comply with **Your Duty not to make a Misrepresentation** 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** to the extent **We** are prejudiced by **Your** failure. If **You** have told **Us** something which is fraudulent and it is related to **Your Policy** and the cover provided, **We** may also have the option of avoiding the **Policy** (i.e. treating it as if it never existed).

## Some words have special meanings

Certain words used in the **Policy** have special meanings. The definitions section of this document on pages 22 - 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 not to make a Misrepresentation

**You** must take reasonable care not to make a Misrepresentation to **Us**. This responsibility applies until **We** issue **You** with a **Policy** for the first time or agree to renew, extend, vary/change, or reinstate **Your Policy**.

You must answer **Our** questions honestly, accurately and to the best of **Your** knowledge. A Misrepresentation includes a statement that is false, partially false, or which does not fairly reflect the truth. It is not Misrepresentation if **You** do not answer a question or if **Your** answer is obviously incomplete or irrelevant to the question asked.

The responsibility to take reasonable care not to make a Misrepresentation applies to everyone who will be insured under the **Policy**. If **You** are answering questions on behalf of anyone, **We** will treat **Your** answers or representations as theirs.

Whether or not **You** have taken reasonable care not to make a Misrepresentation is to be determined having regard to all relevant circumstances, including the type of insurance, who it is intended to be sold to, whether **You** are represented by a broker, **Your** particular characteristics and circumstances **We** are aware of.

If **You** do not meet the above **Duty**, **We** may reject or not fully pay **Your** claim and/ or cancel **Your** Policy. If the Misrepresentation was deliberate or reckless, this is an act of fraud, and **We** may treat **Your Policy** as if it never existed.

## Who does the duty apply to?

The Duty not to make a Misrepresentation 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 not to make a Misrepresentation is not complied with?

If the Duty not to make a Misrepresentation 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. Each **Illness** or **Injury** will be covered for **twelve (12) months** starting from the date the

**Injury** first happened after **You** obtained cover, or the date the **Illness** first showed **Clinical Signs**, after **You** obtained cover and the conclusion of the **twenty-one (21) day Waiting Period**.

### When does my Policy begin?

The Policy will begin at **11:59 PM** on the day you sign up to the policy.

### 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**. The Policy will end or renew at **11:59 PM** on the same date, **twelve (12) months** later, that the policy began or was renewed.

## 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 8 weeks and before their ninth (9th) birthday. **Select Breeds**, as defined under Definitions, are eligible for cover from the age of 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 State or Territory 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

<b>Veterinary Fees</b>	<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 or Illness</b> , including <b>Veterinary Fees</b> incurred during <b>Journeys</b> in the <b>Agreed Countries</b> . <b>We</b> will also cover the cost Physiotherapy provided during the <b>Period of Insurance</b> when carried out by a registered Physiotherapist with post-graduate qualifications in animal/veterinary physiotherapy or a member of the Australian Physiotherapy Association (APA) Animal Physiotherapy Group (APG), following a veterinary referral.	The <b>Maximum Benefit</b> <b>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> .
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<p><b>Alternative or Complementary Treatment</b></p>	<p>We 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 and Illness</b> during the <b>Period of Insurance</b>:</p> <ul style="list-style-type: none"> <li>• <b>Acupuncture and Homeopathy</b></li> <li>• carried out by a <b>Vet.</b></li> <li>• Herbal medicine 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></li> </ul> <p>or one of <b>Our</b> recognised associations.</p> <ul style="list-style-type: none"> <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 per- son 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</b> We will pay for <b>Injury and 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>) up to the benefit limit shown on <b>Your Certificate of Insurance.</b></p>	<p>The <b>Maximum Benefit</b> We will pay for this benefit is shown on <b>Your Certificate of Insurance.</b></p>
<p><b>Third Party Liability (Dogs only)</b></p>	<p>We will cover <b>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</b> We will pay for this benefit is shown on <b>Your Certificate of Insurance.</b></p>
<p><b>Excesses</b></p>	<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.**



PLAN	Economy
Umbrella for Life	X
Veterinary Fees (for Treatment of Injury, Accident or Illness)	Up to \$7,000 (As shown in the <b>Certificate of Insurance.</b> )
Alternative or Complementary Treatment	Up to \$1,000 (Any amounts paid under this benefit are part of the <b>Policy Aggregate of Veterinary Fees</b> as shown above).
Third Party Liability (Dogs only)	\$1 million (Any one loss occurrence.)
Death from Illness	Up to \$1,000 Optional Extra Benefit
Death from Injury	Up to \$1,000 Optional Extra Benefit
Boarding Fees	Up to \$1,000
Advertising & Reward	Up to \$1,000
Loss by Theft or Straying	Up to \$1,000 Optional Extra Benefit
Holiday Cancellation	Up to \$1,000
Quarantine expenses and Loss of Documents	Up to \$1,000
Emergency Repatriation	Up to \$500
Multi-pet Discount	✓ 3+ eligible pets

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

\*\*Please note, **Your Pet** will only be covered under 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**.

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**):

Death from Injury or Illness	If <b>Your Pet</b> dies during the <b>Period of Insurance</b> in <b>Australia</b> due to an <b>Injury</b> or <b>Illness</b> until the age of <b>eight (8)</b> or <b>five (5)</b> for a <b>select breed</b> .	The maximum amount <b>We</b> will pay in relation to these benefits is shown on <b>Your Certificate of Insurance</b> .
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# Excesses and Contributions

## Fixed excess

A fixed excess is the amount, as listed on **Your Certificate of Insurance (COI)**, which is withheld by **Petcover**, for claims made against each condition, in each separate policy period.

If the condition is ongoing and spans across multiple policy periods, the fixed excess will need to be paid again for any treatment which was performed in the new policy period.

## Age Contribution

The age contribution is a percentage of the claimable amount, applied after the fixed excess and the co-payment/share excess (if applicable), that is withheld by **Petcover** when the claim is settled.

An age contribution of 20% is automatically applied to the policy upon renewal after you pet turns 8 years for our standard breeds and 4 years of age for our select breeds.

An age contribution of 35% is automatically applied to the policy upon renewal after you pet turns 10 years for our standard breeds and 7 years of age for our select breeds.

## 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 cost 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 **Petcover**. If a person has referred **You** to **Us**, **We** may pay them an 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 fourteen (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.

To exercise **Your** cooling off rights **You** must advise **Us** of **Your** intention to cancel by contacting us: **Petcover Aust Pty Ltd**, 1-3 Smolic Crt, Tullamarine VIC, 3043 or email to [info.au@petcovergroup.com](mailto:info.au@petcovergroup.com) or by calling us 1300 731 324.

**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 28 and 29 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 communicate **Our** decision with **You**.

Where requested **You** may need to provide a complete medical history and clinical notes relating to the treatment,

**You** can obtain a claim form online at [www.petcovergroup.com/au/claims](http://www.petcovergroup.com/au/claims) or by contacting **Us** on either 1300 731 324 or [claims.au@petcovergroup.com](mailto:claims.au@petcovergroup.com). **You** can email the completed claim form to [claims.au@petcovergroup.com](mailto:claims.au@petcovergroup.com) or post it to:

Petcover Aust Pty Ltd, Claims Centre 1-3 Smolic Court

Tullamarine, VIC 3043

If **You** post **Your** claim **We** recommend **You** keep a copy of the claim.

### 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** (for example Certificate of Insurance, Supplementary PDSs and/or endorsements). If they do **We** will tell **You** in the relevant document. **We** may also issue other documents forming part of **Our** PDS and the **Policy** where required or permitted by law.

### 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>12 months</b>	means a consecutive period of 365 days.																			
<b>Accident</b>	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. 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).																			
<b>Acupuncture or Homeopathy</b>	means <b>Acupuncture or Homeopathy</b> which is carried out by a <b>Vet</b> .																			
<b>Age Contribution</b>	<p>means the additional % excess that will apply to each and every claim once <b>Your Pet</b> is over a specified age. The <b>Age Contribution</b> is in addition to any Fixed <b>Excess</b> and Pet % Share. The <b>Age Contribution</b> excesses and the relevant ages for which it applies are:</p> <table border="1"> <thead> <tr> <th></th> <th>Age of Pet</th> <th>Age Contribution</th> </tr> </thead> <tbody> <tr> <td rowspan="3"><b>Dogs</b></td> <td>8+ years</td> <td>20%</td> </tr> <tr> <td>10+ years</td> <td>35%</td> </tr> <tr> <td><b>Select Breed</b></td> <td>4+ years</td> <td>20%</td> </tr> <tr> <td rowspan="3"><b>Cats</b></td> <td>7+ years</td> <td>35%</td> </tr> <tr> <td>8+ years</td> <td>20%</td> </tr> <tr> <td>10+ years</td> <td>35%</td> </tr> </tbody> </table> <p>For detailed information please refer to <b>Page XX – Age Contributions</b>.</p>			Age of Pet	Age Contribution	<b>Dogs</b>	8+ years	20%	10+ years	35%	<b>Select Breed</b>	4+ years	20%	<b>Cats</b>	7+ years	35%	8+ years	20%	10+ years	35%
	Age of Pet	Age Contribution																		
<b>Dogs</b>	8+ years	20%																		
	10+ years	35%																		
	<b>Select Breed</b>	4+ years	20%																	
<b>Cats</b>	7+ years	35%																		
	8+ years	20%																		
	10+ years	35%																		
<b>Agreed Countries</b>	means any Australian Quarantine & 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).																			
<b>Alternative or Complementary Treatment</b>	<p>means the cost of any examination, consultation, advice, test or 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> <ul style="list-style-type: none"> <li>• <b>Acupuncture or Homeopathy</b> carried out by or herbal medicine prescribed by a <b>Member of a Veterinary Practice</b>.</li> <li>• <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>• <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>• <b>Osteopathy</b> carried out by a <b>Member of a Veterinary Practice</b> providing the member is a qualified animal Osteopath.</li> </ul>																			

<b>Australia</b>	means Commonwealth of <b>Australia</b> .
<b>Behaviour modification programme</b>	means a programme written by an <b>Animal Behaviourist</b> 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.
<b>Behavioural Illness</b>	means any change to <b>Your Pet's</b> normal behaviour, resulting from a mental or emotional disorder diagnosed by a <b>Vet</b> .
<b>Certificate of Insurance</b>	means the relevant <b>Certificate of Insurance We</b> 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 a change(s) in <b>Your Pet's</b> normal healthy state, its bodily functions or behaviour.
<b>Condition</b>	<p>means any <b>condition</b> that causes discomfort, dysfunction, distress, including Injuries, 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.</p> <p>Conditions are separated based on the body system affected and the treatment provided.</p> <p>If multiple parts of the body have been affected secondary to an illness, we may split these secondary conditions into their own separate claims if the treatments required for the secondary conditions do not overlap.</p> <p>For an injury, all body systems directly affected as a result of the injury will be considered under the single condition.</p>
<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 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> . <b>Treatment</b> or <b>Surgery</b> includes, but is not limited to, de-sexing, spaying or castration, microchipping, grooming and de-matting, cosmetic or aesthetic surgery, or <b>Elective</b> 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</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> is considered <b>Elective Treatment</b> .

<b>Excess</b>	<p>means the amount(s) shown on <b>Your Certificate of Insurance</b> that <b>You</b> must pay for each unrelated <b>Condition</b> for a claim made under <b>Your Policy</b>.</p> <ul style="list-style-type: none"> <li>• <b>Veterinary Fees</b> and <b>Alternative or Complementary Treatment Excesses</b> may be either: <ul style="list-style-type: none"> <li>• the Fixed <b>Excess</b> only; or</li> <li>• the Fixed <b>Excess</b> and the Optional Pet % Share <b>Excess</b>;</li> </ul> </li> </ul> <p>An additional <b>Age Contribution</b> may also apply and where applicable will be shown on <b>Your Certificate of Insurance</b>.</p> <ul style="list-style-type: none"> <li>• Separate <b>Excesses</b> apply for <b>Veterinary Fees</b> and Alternative or Complimentary <b>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>Experimental Therapies &amp; treatments</b>	<p>Means any medication and / or treatment that is either:</p> <ol style="list-style-type: none"> <li>a. Not registered by the Australian Pharmaceuticals and Veterinary Medicines Authority (APVMA), or</li> <li>b. Registered with the Therapeutics Goods Administration (TGA) only, and the efficacy and safety of the medication has not been established in the species of animal it is being used in by the veterinarian.</li> </ol>
<b>Family</b>	<p>means <b>Your Immediate Family</b> and, grandparents, brothers, sisters, grandsons, and/or granddaughters including <b>Family</b> of step and defacto relationships.</p>
<b>Herbal Medicine</b>	<p>means <b>Herbal Medicine</b> prescribed by a <b>Member of a Veterinary Practice</b>.</p>
<b>Home</b>	<p>means the place in <b>Australia</b> where <b>You</b> usually live.</p>
<b>Hydrotherapy</b>	<p>means the <b>Treatment</b> of <b>Injury</b> and <b>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> <ul 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 <b>twenty-one (21) days</b> of: <ul style="list-style-type: none"> <li>• <b>Your Pet's</b> first <b>Policy Year</b>, or</li> <li>• Any additional section being added to <b>Your</b> insurance.</li> </ul> </li> </ul> <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 <b>twenty-one (21) day Waiting Period</b> will cease at 00.01 on the <b>twenty-second (22) day</b> 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>	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.
<b>Journey</b>	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 <b>journeys</b> 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 to Your Home</b> .
<b>Market Value</b>	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> .
<b>Maximum Benefits</b>	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> .
<b>Member of a Veterinary Practice</b>	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 under this <b>Policy</b> .
<b>Osteopathy</b>	means <b>Osteopathy</b> which is carried out by a <b>Member of a Veterinary Practice</b> who is a qualified animal Osteopath.
<b>Our Vet</b>	means any <b>Vet</b> appointed or engaged by <b>Us</b> to carry out <b>Treatment to Your Pet</b> or discuss <b>Your Pet's Treatment with 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 two <b>Optional Extra Benefits</b> in <b>Petcover Limited Economy Cover</b> : a. Death from <b>Illness</b> b. Death from <b>Injury</b> . 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>Petcover<sup>®</sup></b>	means the Administrator of this Policy with <b>You</b> and who acts on behalf of the <b>Insurer</b> . <b>Petcover</b> Is a Registered Trademark, and products sold under this Trade Mark in Australia are sold exclusively by Petcover Aust. Pty Ltd under Licence from Petcover 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 during 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 the <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 <b>twelve (12) months</b> , 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 period of insurance 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> renew with <b>Us</b> upon renewal. Each <b>Period of Insurance</b> is treated as separate. This is normally <b>twelve (12) months</b> but may be less if <b>Your Pet</b> has been added to <b>Your</b> Insurance 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.
<b>Pre-Existing Condition(s)</b>	<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> <ul 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;</li> <li>• Before <b>Your Pet's</b> cover started, or prior to the <b>Policy</b> commencement date;</li> <li>• During the <b>twenty-one (21) day Waiting Period</b>; or</li> <li>• Before the section was added to <b>Your</b> insurance.</li> </ul> <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>.</p> <p>For the avoidance of doubt when referring to Pre- Existing Conditions, where <b>Your Pet</b> has a Condition affecting a part of its body of which it has two, including, but not limited to eyes, ears, patella's (knees), cruciate ligaments, both instances of the <b>Condition</b> will be excluded from cover if either of the parts of the <b>Pet's</b> body were affected by the <b>Condition</b> before <b>Your Pet's</b> cover started, or prior to the <b>Policy</b> commencement date.</p>
<b>Routine Treatment or Preventative</b>	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; tick treatment; flea treatment; and other internal/external parasite prevention; dental check-ups and dental scale & polish or teeth cleaning, removal of misaligned or retained deciduous teeth



<b>Related Conditions</b>	<p>means a <b>Condition</b> that even though it has shown first signs or symptoms during the <b>Policy Period</b> (outside of the <b>Waiting Period</b>), it is considered to be a <b>Pre-existing Condition</b> if it has the clinical symptoms, diagnostic classification or results from the same disease process as a <b>Pre-existing Condition</b> regardless of the number of areas of <b>Your Pet's</b> body affected.</p> <p>For example: if <b>Your Pet</b> suffers from arthritis in its legs prior to the Commencement Date of the <b>Policy</b> or during the <b>Waiting Period</b>, all future occurrences of arthritis for example in the back or neck, will be considered to be <b>Related Conditions</b> and will not be covered.</p>
<b>Select Breed(s)</b>	<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).</p> <p>Please refer to the '<b>Select Breed</b>' section on <b>Your Certificate of Insurance</b> to find out if <b>Your Pet</b> is a <b>Select Breed</b>.</p>
<b>Therapist</b>	<p>means a Certified Clinical Animal Behaviourist who is a <b>Member of a Veterinary Practice</b>.</p>
<b>Travel Documents</b>	<p>means <b>Your Pet's</b> Import Permit issued by AQIS, any Vaccination Certificates and/or Certificate for treatment against parasites issued for <b>Your Pet</b> under the Regulations for taking a pet to <b>Australia</b>.</p>
<b>Treatment</b>	<p>means <b>Veterinary Treatment</b> or <b>Alternative or Complementary Treatment</b>.</p>
<b>Treatment of a Behavioural Illness</b>	<p>means the <b>Treatment</b>, by <b>Therapist</b> who is a <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>	<p>means a registered Veterinarian, Specialist Veterinarian, <b>Vet</b> 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.</p>
<b>Veterinary Fees</b>	<p>means the amount <b>Vets</b> charge for the care and treatment they provide.</p>
<b>Veterinary Practice</b>	<p>means any veterinary service provided by a veterinary organisation or business.</p>
<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 Member of the <b>Veterinary Practice</b> under the supervision of a <b>Vet</b>; and</li> <li>• Any medication legally prescribed by a <b>Vet</b>; and</li> <li>• <b>Physiotherapy</b> and <b>Treatment</b> of a <b>Behavioural Illness</b>.</li> <li>• Not otherwise excluded under this <b>Policy</b>.</li> </ul>

<b>Waiting Period</b>	means a <b>Period of twenty-one (21) days</b> starting from the commencement date of the <b>Policy</b> (excluding renewals) as shown on <b>Your Certificate of Insurance</b> of the initial <b>Period 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 <b>twenty-one (21) day Waiting Period</b> will cease at 00.01 on the <b>twenty-second (22) day</b> of cover.
<b>We, Us, Our</b>	means <b>Petcover</b> Aust Pty Ltd acting on behalf of Sovereign Insurance Australia, the Insurer of the <b>Policy</b> .
<b>You, Your</b>	means the person(s) named as the insured 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 comply with 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 You</b> have not complied with relates to a claim, <b>We</b> may refuse or reduce the amount <b>We</b> pay under the claim.
<b>Caring for Your Pet (Dental, Vaccinations)</b>	<p>Throughout the <b>Period of Insurance</b>, <b>You</b> must take all reasonable steps to maintain <b>Your Pet's</b> health and to prevent <b>Injury</b>, <b>Illness</b> and loss.</p> <ol style="list-style-type: none"> <li>a. <b>You</b> must provide <b>Routine or Preventative Treatment</b> normally recommended by a <b>Vet</b> to prevent <b>Illness</b> or <b>Injury</b>. If there is a disagreement between <b>You</b> and <b>Us</b> as to what reasonable steps are, the details will be referred to an independent national Welfare body or an independent <b>Vet</b> mutually agreed upon.</li> <li>b. <b>You</b> must arrange and pay for <b>Your Pet</b> to have a yearly dental examination and to receive any oral <b>Treatment</b> normally recommended by a <b>Vet</b> to prevent <b>Illness</b> or <b>Injury</b>. Any <b>Treatment</b> recommended as a result of the dental examination must be carried out as soon as possible. If <b>You</b> do not comply with this obligation then any claims which relate to dental issues <b>We</b> may refuse or reduce the amount <b>We</b> pay under the claim for dental <b>Treatment</b>, to the extent that <b>Your</b> non-compliance caused or contributed to the loss or contributed to the loss or damage</li> <li>c. <b>You</b> must keep <b>Your Pet</b> vaccinated against the following Conditions: <ul style="list-style-type: none"> <li>• Dogs – Distemper, hepatitis, parvovirus, kennel cough and leptospirosis (in areas where it is prevalent, all ticks (including those which cause paralysis) and Vets recommend vaccination) and any other vaccination recommended to <b>You</b> by a <b>Vet</b>.</li> <li>• Cats – Feline infectious enteritis, feline leukaemia and cat flu and any other vaccination recommended to <b>You</b> by a <b>Vet</b>.</li> </ul> <p>If <b>You</b> do not keep <b>Your Pet</b> vaccinated, <b>We</b> may refuse or reduce the amount <b>We</b> pay under the claim that result from any of the above <b>Illnesses</b>, to the extent that the unvaccinated <b>Illnesses</b> caused or contributed to the loss or damage.</p> </li> <li>d. <b>You</b> must take reasonable steps to arrange for a <b>Vet</b> to examine and treat <b>Your Pet</b> as soon as possible after it shows <b>Clinical signs</b> of an <b>Injury</b> or <b>Illness</b>. <b>You</b> must follow the advice and recommendations of the treating <b>Vet</b> so as not to prolong or aggravate the <b>Illness</b> or <b>Injury</b>. If <b>You</b> do not follow the <b>Vet's</b> advice <b>We</b> may refuse or reduce the amount <b>We</b> pay relating to that <b>Injury</b> or <b>Illness</b>. And if <b>We</b> decide, <b>You</b> must take <b>Your Pet</b> to a mutually agreed upon independent <b>Vet</b> damage.</li> </ol>

<b>Claims Pre-Authorisation</b>	<p><b>We</b> do not provide pre-claim authorisation, nor guarantee that <b>We</b> will pay a claim prior to the completed claim being submitted. <b>We</b> will assess <b>Your</b> claim when submitted and contact <b>You</b> with <b>Our</b> decision. See page 48 of this <b>Policy</b> for details on how to make a claim.</p>
<b>Vet Information, Other Insurance</b>	<p>When <b>You</b> make a claim <b>You</b> agree to give <b>Us</b> any information <b>We</b> may reasonably ask for.</p>
<b>Legal rights against others</b>	<p>a. If there is any other insurance under which <b>You</b> are entitled to make a claim <b>You</b> must report the incident to that insurance company and tell <b>Us</b> their name and address and <b>Your Policy</b> and claim number with them. To the extent permitted by law, <b>We</b> will only pay <b>Our</b> share of the claim.</p> <p>b. If <b>You</b> have any legal rights against another person in relation to <b>Your</b> claim, <b>We</b> may take legal action against them in <b>Your</b> name at <b>Our</b> expense. <b>You</b> must give <b>Us</b> all the help <b>You</b> can and provide any documents <b>We</b> ask for.</p>
<b>Claims - Vet Fee Charges</b>	<p>If the <b>Veterinary Fees 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 an independent <b>Vet</b> as to whether the fees are reasonable. If the independent <b>Vet</b> does not agree that the <b>Veterinary Fees</b> charged are reasonable, <b>We</b> may decide, for future claims, to pay only the <b>Veterinary Fees</b> usually charged by a general or referral practice in a similar area as determined by an independent <b>Vet</b>.</p>
<b>Claims – Over treatment</b>	<p>If <b>We</b> consider the <b>Veterinary Treatment</b> or <b>Alternative</b> or <b>Complementary Treatment 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 an independent <b>Vet</b>. If the independent <b>Vet</b> does not agree that the <b>Veterinary Treatment</b> or <b>Alternative</b> or <b>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</b> or <b>Complementary Treatment</b> that was necessary to treat the <b>Injury</b> or <b>Illness</b>, as advised by the independent <b>Vet</b> from whom <b>We</b> have requested the second opinion.</p>
<b>Claims – Veterinary information</b>	<p><b>You</b> agree that any <b>Vet</b> or <b>Therapist</b> has <b>Your</b> permission to release any reasonable 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>
<b>Claims – Settlement</b>	<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>
<b>Cancelling Your Policy</b>	<p><b>You</b> can cancel <b>Your Policy</b> by contacting <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>

## Cancellation rights

- a. In addition to **Your** cooling off rights detailed earlier,
- b. **You** may cancel the **Policy** at any time by notifying **Us**.
- c. Cancellation by **You** will be effective from 16:00 (4:00pm) AEST on the day **We** receive **Your** notice of cancellation.
- d. **We** have the right to cancel the **Policy** where permitted by and in accordance with law. For example, **We** may cancel:
  - i. If **You** failed to comply with **Your** Duty not to make a Misrepresentation; or
  - ii. Where **You** have made a misrepresentation to **Us** during negotiations prior to the issue of the **Policy**; or
  - iii. Where **You** have failed to comply with a provision of the **Policy**, including the term relating to payment of premium; or
  - 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**.
- e. 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.
- f. If **You** or **We** cancel the **Policy** **We** may deduct a pro
- g. rata proportion of the premium for time on risk, and any government taxes or duties **We** cannot recover.
- h. 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 **You** do not pay an instalment on time, **We** will let **You** know and **We** will try to deduct the overdue amount along with **Your** next regular payment on the next instalment due date. If the next attempt to deduct the outstanding amount and the next instalment amount fails, **We** will cancel **Your Policy** for non-payment. **We** will send **You** a notice advising **You** of cancellation and cancellation will be effective 14 days from the date on this notice. So it's important that **You** pay **Your** instalments on time. If **You** can't, **You** should get in touch with **Us** immediately.
- b. If the **Policy** is cancelled by **Us** because **You** have not paid the premium **We** may agree to reinstate the **Policy** if **You** pay all premiums due.

## Renewing Your Policy

If **You** pay **Your** premium by Direct Debit instalment, when the **Policy** is due for renewal and **We** have agreed to renew the **Policy**, **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 not to make a Misrepresentation before each renewal (see above).

**We** have the right not to invite renewal and **We** will notify **You** in writing of any such action.

## Changes at renewal

This document also applies for any offer of renewal **We** may make, unless **We** tell **You** otherwise. If **We** offer renewal **We** may:

- Change the premium, **Excesses** and **Policy** Terms and Conditions;
- Place exclusions because of **previous** claims made by
- **You** and **Your Pet's Veterinary** history; and/or
- Limit or withdraw **Third Party Liability** cover based on a review of **Your Pet's** behaviour. For example, any aggressive tendencies shown or any incidents where **Your Pet** has caused **Injury** to a person or another animal.

## Changes during the Period of Insurance

Changes will only be made to the **Policy** at renewal, **We** will not change the cover **We** provide for **Your Pet** during the **Period of Insurance**, unless:

- **You** decide to change **Your Pet's** cover;
- **You** did not tell **Us** about something when **We**
- previously asked; and/or
- **You** provided **Us** with inaccurate information when previously asked, regardless of whether or not **You** thought it was accurate at the time.

If **You** transfer **Your Pet** to a plan with additional or higher benefit limits, the additional or higher benefits will not apply if the **Condition** being claimed for first occurred prior to the change in the level of cover.

## Upgrading cover

If a higher plan is available for **Your Pet** **You** can apply for an upgrade at renewal of **Your Policy** and at this time the request will be subject to an underwriting review of **Your Pet's** veterinary history

<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> <ul style="list-style-type: none"> <li>• Any <b>Illness which starts in the first twenty-one (21) days of cover (Waiting Period)</b>. The <b>twenty-one (21) day Waiting Period</b> will cease at 00.01 on the <b>twenty-second (22) day</b> of cover.</li> <li>• In addition to the exclusions set out in these Terms and Conditions, 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>• If, after <b>We</b> have offered a further <b>Period of Insurance</b>, <b>You</b> make a claim that relates to a <b>Period of Insurance</b> before the one <b>We</b> have offered, <b>We</b> may, based on the details of the claim, place exclusions backdated to the start of the further <b>Period of Insurance</b>.</li> </ul>
<p><b>Policy Limits</b></p>	<p>Limits do apply to some items covered by the <b>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>
<p><b>Travel Cover</b></p>	<p>Some sections of <b>Your Policy</b> provide cover whilst <b>Your Pet</b> is on a <b>Journey</b>.</p> <p>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 Australia <b>You</b> must follow the <b>conditions</b> of the Australian Pet Immigration Regulations. Full details can be found on the Department of Agriculture and Water and Environment's Website, <a href="https://www.agriculture.gov.au/cats-dogs">https://www.agriculture.gov.au/cats-dogs</a> or Contact National office: GPO Box 858, Canberra ACT 2601. Phone: +61 2 6272 3933.</p> <ul style="list-style-type: none"> <li>• <b>You</b> agree to pay translation costs for any claim documentation not written in English.</li> </ul>
<p><b>Jurisdiction</b></p>	<ul style="list-style-type: none"> <li>• Australian law applies to this insurance contract.</li> <li>• Unless <b>We</b> agree otherwise the language of the <b>Policy</b> and all communications relating to it will be in English.</li> </ul>
<p><b>Your Residence</b></p>	<ul style="list-style-type: none"> <li>• <b>Your Pet</b> must live in <b>Australia</b>.</li> <li>• 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.</li> </ul>
<p><b>False information</b></p>	<p>If <b>You</b> have intentionally provided false information or make a false or exaggerated claim, or any claim involving <b>Your</b> dishonesty, <b>We</b> may cancel or <b>Void</b> this <b>Policy</b> and <b>We</b> may decline further claims and their associated payments under the policy.</p>
<p><b>Fraudulent Claims</b></p>	<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>
<p><b>Lost Pets</b></p>	<p>If <b>Your Pet</b> is lost or missing when <b>You</b> first take the <b>Policy</b>, the cover under the <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>
<p><b>Your Rights</b></p>	<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 **Petcover**, **We** are proud of the insurance cover **We** provide for pets – in fact, every **Pet** deserves **Petcover**. 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**.

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**.

**Illness** and **Injury** is covered for:

- **Twelve (12) months**, starting from the date during the **Policy Year** the **Injury** happened or the **Clinical Signs** of the **Illness** first occurred, or
- Until the **Maximum Benefit** is reached, whichever happens first.

#### You must pay:

**You** must pay the **Excess** shown on **Your Certificate of Insurance** 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**.

### 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**. **Illness** and **Injury** is covered for:

- **Twelve (12) months**, starting from the date during the **Policy Year** the **Injury** happened or the **Clinical Signs** of the **Illness** first occurred, or
- Until the **Maximum Benefit** is reached, whichever happens first.

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

#### You pay:

**You** must pay the **Excess** shown on **Your Certificate of Insurance** 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**.

## 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:
  - An **Injury** that happened or an **Illness** that first showed **Clinical signs** before **Your Pet's** cover started;
  - 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
  - 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:
  - An **Illness** that first showed **Clinical signs** within **twenty-one (21) days** of **Your Pet's** cover starting;
  - 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
  - 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 **Treatment** to prevent **Injury** or **Illness**.
7. The cost of treating an umbilical hernia if the condition first shows clinical signs within the first 13 weeks (91 days) of the policy.
8. 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.
9. The cost of any screening tests performed without any clinical signs suggestive of an active condition which is negatively affecting your pet.
10. The cost of any **Treatment**, or complications arising from the **Treatment**, that **You** choose to have carried out that is not directly related to an **Injury** or **Illness**.
11. The cost of killing and controlling any internal or external parasites.
12. The cost of any **Treatment** in connection with breeding, pregnancy, or giving birth, including any complications arising from the treatment.
13. The cost of any vaccinations, spaying and castration, or routine dental treatment, other than the cost of treating any complications arising from these procedures.
14. The costs of:
  - Euthanasia, including any **Veterinary** consultation/visit or prescribed medication specifically needed to carry out the euthanasia; or
  - Cremation, burial, or any other disposal of your pet.
  - Any post-mortem examination, or any other tests or procedures performed once your pet is deceased.
15. For the cost any treatment during 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.
16. The cost of having your pet transported.
17. 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.
18. For any additional cost required to handle, diagnose, or treat your pet due to your pet's behaviour or your personal circumstances.
19. 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.



20. 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.
21. For costs resulting from an **Injury** or **Illness** that are excluded under the **Policy**.
22. 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, periodontal surgery, or dental sealants.
23. The cost of prosthodontics, the removal or repair of misaligned or retained deciduous teeth, orthodontic appliances, crowns, caps or splints, root canal, luxation, horizontal bone loss, impacted teeth or embedded teeth.
24. Any cost relating to orthodontics, malocclusion, linguoversion, wry bite, supernumerary teeth, reverse scissor bite, posterior cross bite, anterior crossbite, overbite, brachygnathia, open bite or level bite.
25. Any cost of **Treatment** for dental disease if an annual dental examination by a **Vet** has not been undertaken within the twelve (12) months preceding the problem requiring **Treatment**.
26. Any cost of treatment for dental disease if an annual dental examination was performed, and the veterinarian recommended treatment, but you did not follow the veterinarian's advice in pursuing the treatment.
27. 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**.
28. The cost of experimental **Treatments** or therapies, prosthetics or orthopaedic supports or braces, open heart surgeries, cancer vaccinations, therapeutic antibody for dog and cat cancers, stem cell therapy, organ transplants, gene therapies, probiotics, dental vaccines, cold laser treatments, 3D printing, Juvenile Pubic Symphysiodesis (JPS) surgery, or any drugs not used in accordance with the manufacturers recommendations.
29. Any costs for **Alternative or Complementary Treatment** or **veterinary Treatment** that does not improve the health or wellbeing of **Your Pet**.
30. Any prolonged course of veterinary medicines, **Alternative or Complementary Treatments** for more than three (3) months if there is a veterinary operation that is recommended by a **Vet**, 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.
31. The cost for **Your Vet** to write a prescription or charge a dispensing fee.
32. Administrative fees, which include but are not limited to, postage fees, payment processing fees, courier fees, travel charges, or pet transport charges.
33. The cost of any shampoo, conditioner, Elizabethan collar (or any similar device to prevent access to a wound or surgery site), ear cleaners, supplements, or merchandise.
34. The cost of any medication that can be legally obtained without a prescription from a veterinarian, or by being dispensed directly by the veterinarian.
35. Any medicines that have not been approved by the Australian Pesticides and Veterinary Medicines Authority (APVMA), or any medicines that have been approved by the Therapeutic Goods Administration (TGA) but is no evidence to support the usage of this medicine for a **Condition in non-human animals**.
36. 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.
37. 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**.
38. For life long **Conditions You** are required to obtain an annual **Treatment** report from **Your Vet**.
39. Any bulk purchase of medicines that cannot be used in full by the end of the current **Policy** period.
40. Any claim where the full medical history is not provided when requested.
41. The cost of cutting nails/claws, expressing anal glands, ear cleaning 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.

42. For the cost of any food, including food prescribed by a **Vet**, unless it is:
- Used to dissolve existing bladder stones or 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 or crystals; and/or
  - Liquid food provided through a feeding tube, 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.
43. 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 for the life of the pet**.
44. For the cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.
45. For the cost of spaying or castration for the **Treatment of a Behavioural Illness**.
46. For the cost of spaying (including spaying following a false pregnancy) or castration, unless:
- The procedure is carried out when **Your Pet** is suffering from an **Injury** or **Illness affecting the ovaries, uterus, or testicles** for which cover is provided under Section 1A and it is essential to treat the **Injury** or **Illness**; or
  - The costs claimed are for the **Treatment** of complications arising from this procedure.
47. 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.
48. For the cost of any **Treatment** in connection with false pregnancy if **Your Pet**
49. has received **Veterinary Treatment** for a false pregnancy previously.
50. For the cost of any prosthesis, including any **Veterinary Treatment** needed to fit the prosthesis, other than hip, knee and/or elbow replacement(s).
51. 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**.
52. For the cost of treating any **Injury** or **Illness** deliberately caused by **You**, or anyone living with **You**, or by anyone travelling with you while on a **Journey**.
53. For the cost of treating any injury or illness which has resulted from you delaying treatment for a condition, where a veterinarian would recommend timely attention, regardless of your circumstances.
54. For the cost of any transplant surgery, or stem cell transplants, including any pre and post-operative care.
55. For the cost of any **Treatment** while on a **Journey** if a **Vet** believes it can be delayed until **Your Pet** returns **Home**.
56. For the cost of any **Treatment** if the **Journey** was made to get **Treatment** outside of **Australia**.
57. For the cost of hiring a swimming pool, **Hydrotherapy** pool or a other pool or **Hydrotherapy** equipment.
58. For the cost of buying or hiring equipment or machinery or any form of housing, including cages.
59. For the cost of any surgical items that can be used more than once.
60. 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.
61. In relation to any pandemic disease that causes widespread **Illness**, death or destruction affecting dogs and cats.
62. For the cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.
63. Any cost of treating any condition where a vaccine exists, and the vaccine is recommended by a veterinarian, if the pet has not been vaccinated against the condition.
64. Any cost of treating your pet for tick paralysis if the pet was not actively protected with an Australian Pesticides and Veterinary Medicines Authority (APVMA) approved parasite control product which has a label claim of protection against paralysis ticks.
65. In relation to any pandemic disease that causes widespread **Illness**, death or destruction affecting dogs and cats.

### Please also read

1. What We will not pay under Section 1A – applying to Veterinary Fees only
2. What 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:
3. 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.
4. 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.
5. 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.
6. The cost of **Treatment** for a **Behavioural Illness** if **Your Pet's** behaviour is caused by **You** failing to provide training.
7. The cost of spaying and castration for the **Treatment of a Behavioural Illness**.
8. 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.
9. 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.
10. For the cost of any **Treatment** in connection with false pregnancy if **Your Pet**
11. has received **Veterinary Treatment** for a false pregnancy previously.
12. 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**.
13. For the cost of a post-mortem examination.
14. For the cost of any prosthesis, including any **Veterinary Treatment** needed to fit the prosthesis, other than hip, knee and/or elbow replacement(s).
15. 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**.

### 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. The period of **twelve (12) months** and the **Maximum Benefit** will always start or be calculated from the date in the **Policy Year**:
  - a. the **Injury** first happened after **Your Pet's** cover started, or the first **Clinical Sign** of the **Illness** or **Condition** occurring or existing in any form, after the conclusion of the **twenty-one (21) day Waiting Period**, or
  - b. An **Illness** with the same diagnosis or **Clinical Signs** first occurred. No matter how many times the same **Injury, Illness** or **Clinical Signs** occur or happen in, or on, any part of **Your Pet's** body.
  
3. If a number of injuries, **Illnesses** or **Clinical Signs** are:
  - a. Diagnosed as one **Injury** or **Illness**, or
  - b. Caused by, relate to, or result from, another **Injury, Illness, or Clinical Sign**, One period of **twelve (12) months** or one **Maximum Benefit** will apply to the **Treatment** received for all the **Injuries, Illnesses** or **Clinical Signs**.

In this case the period of **twelve (12) months** and the **Maximum Benefit** will start or be calculated from the first date in the **Period of Insurance**;

  - Any of the **Clinical Signs** or any of the **Illnesses** occurred, after the conclusion of the **twenty-one (21) day Waiting Period**; or
  - Any of the injuries happened, after **Your Pet's** cover started.
  
4. After **We** have paid the cost of **Treatment** for **twelve (12) months** or the **Maximum Benefit** for an **Injury, Illness, or Clinical Sign(s)**, **We** will not pay the cost of any more **Treatment** for:
  - a. The same **Injury** or **Illness**;
  - b. The same **Clinical Sign(s)**;
  - c. An **Injury** or **Illness** with the same diagnosis or **Clinical Sign(s)** as the **Illness**
  - d. or **Clinical Sign(s)** **We** have paid the limit for, or
  - e. An **Injury** or **Illness** that is caused by, relates to, or results from, an **Injury**,
  - f. **Illness** or **Clinical Sign** that **We** have paid the limit for; or
  - g. No matter where the **Injury, Illness** or **Clinical Sign(s)** occur or happen in, or on, any part of **Your Pet's** body.
  
5. 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.
  
6. If **We** receive a request to pay the claim settlement direct to a **Veterinary Practice**, **We** reserve the right to decline this request.
  
7. We may refer **Your Pet's** case history to an independent Vet mutually agreed upon and if **We** reasonably request, **You** must arrange for **Your Pet** to be examined by the independent **Vet**.
  
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 the independent **Vet** or **Therapist** **We** agreed upon, providing it is reasonable to do so. 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 optional and only applies if it is shown as covered on **Your Certificate of Insurance**.

*\*This Optional Extra Benefit applies until Your Pet reaches the age of eight (8) or five (5) for a Select Breed.*

### We will pay:

We will pay 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 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 optional and only applies if it is shown as covered on **Your Certificate of Insurance**.

*\*This Optional Extra Benefit applies until Your Pet reaches the age of eight (8) or five (5) for a Select Breed.*

### We will pay:

We will pay 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 pay

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

### What 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 **Your Pet** dies or is put to sleep more than **twelve (12) months** after the date during the **Period of Insurance** the **Injury** happened or the **Illness** first showed **Clinical Signs**.
7. Any amount if the death is caused by, relates to or results from an **Injury** or **Illness**, if the **Clinical Signs** are the same as the **Clinical Signs** of an **Injury** which happened or an **Illness** which first showed **Clinical Signs** more than **twelve (12) months** before **Your Pet's** death, no matter where the **Injury**, **Illness** or **Clinical Sign(s)** occurred or happen in or on **Your Pet's** body.
8. Any amount if the death results from breeding, pregnancy or giving birth.
9. 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.
10. 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.
11. 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.

## Special Conditions applying to Sections 2 or 3, Death from Injury and Death from Illness

1. Unless otherwise specified in the **Policy** the calculation of the period of **twelve (12) months** and the **Maximum Benefit** will always start or be calculated from the date in the **Policy Year**:
  - a. The **Injury** first happened after **Your Pet's** cover started, or the first **Clinical Signs** of the **Illness** or **Condition** occurring or existing in any form, after the conclusion of the **twenty-one (21) day Waiting Period**; or
  - b. An **Illness** with the same diagnosis or **Clinical Signs** as the **Illness** or **Clinical Signs** that caused **Your Pet** to be put to sleep or caused its death first occurred;
  - c. No matter how many times the same **Injury, Illness** or **Clinical Signs** occur or happen in, or on, any part of **Your Pet's** body.
2. If a number of injuries, **Illnesses** or **Clinical Signs** are:
  - a. Diagnosed as one **Injury** or **Illness**; or
  - b. caused by, relate to, or result from, another **Injury, Illness, or Clinical Sign**.

The period of **twelve (12) months** and the **Maximum Benefit** will start or be calculated from the first date in the **Period of Insurance**:

- Any of the **Clinical Signs** or any of the **Illnesses** first occurred; or
- Any of the injuries happened.

When lodging a claim under Section 2 or Section 3, please send **Us**:

1. A death certificate from **Your Vet**;
2. The **Pet's** Pedigree Certificate and receipt from when **You** bought **Your Pet**, where applicable; and
3. **Your** claim form.

We will not pay for the provision of this information.

## Section 4 – Theft or Straying

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

### We will pay:

**We** will pay 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 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.

## 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 advertised and paid, with **Our prior agreement**.
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 or all incidents during the **Period of Insurance**.

2. More than \$100 towards sundries to make **You** own posters and advertising material.
3. For any reward that **We** have not agreed to 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. For 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; or
  - 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; and/or
  - Any amount if the cost of accommodation is at a property owned by **You** or **Your Family**.
8. Any amount unless **You** can demonstrate that 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:

1. **You** must immediately take all reasonable steps to find or recover **Your Pet**.
2. **You** must take the following steps:
  - a. As soon as reasonably possible after discovering **Your** dog or cat is stolen **You** must take reasonable steps to 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 a reasonable time 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 as soon as reasonably possible, 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**. At **Our** discretion, and if requested to do so, **You** may reclaim the original pedigree certificate and purchase receipt.

- 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**. **We** will not pay for the provision of 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;
- Physical loss of or damage to property; and/or
- Occurring during the **Period of Insurance** and which is caused by an **Accident** caused by **Your Pet**.

### We will pay:

**We** will also pay the legal costs and expenses **You** incur for a **Third Party Liability** claim covered under this Section with **Our** consent for which **You** are legally liable, plus the cost of any lawyers **We** appoint. Please contact **Us** to confirm approval before authorising any legal costs and expenses.

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 – Legal Liability** for dogs covered is

\$1,000,000 (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 pay

The first \$500 of each claim under this Section 6.

### What 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:
  - Damage to **Your** property;
  - Bodily 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;
  - Bodily injury to **Your** employees or anyone who works for **You**, or for damage to their property,
  - Loss of or damage to property in the care, custody or control of **You**, 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**;
  - 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;
  - Any costs and expenses for defending **You** which **We** have not agreed beforehand; Please contact **Us** to confirm approval before authorising any legal costs and expenses.
  - Because of the terms of an agreement assumed with some other person (unless **You** would have been liable if the agreement did not exist);
  - Claims caused by, arising out of, or in any way connected with asbestos,
  - 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**; and/or
  - The prevention of such contamination or pollution.



3. Claims caused by, arising out of, or in any way connected with
  - Pregnancy; or
  - 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:
  - Statutory or compulsory scheme, fund or insurance;
  - Compensation scheme or workers compensation **Policy** of insurance; or
  - Industrial award, even if the amount recoverable is nil.
6. Where **Your legal liability** is over that recoverable under any:
  - Statutory or compulsory scheme, fund or insurance;
  - **Accident** compensation scheme or workers compensation **Policy** of insurance; or
  - 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, this includes but is 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. If **You** do, **We** may reduce or refuse **Your** claim to the extent **We** are prejudiced.
2. **You** must as soon as possible, 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 any legal proceedings instituted **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:
  - 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 \$1million, **We** will pay no more than \$1million for the **Accident**;
  - 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 \$1 million, and another of \$2 million, **We** will pay no more than \$2 million for the incident; and/or
  - If the dogs involved (all owned by **You**, but some are uninsured) **We** will pay no more than a pro ratio portion for the insured dogs 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:
  - Make sure the business/person has the appropriate third party liability insurance cover; and
  - 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.

1. **ThirdPartyLiability** 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 cat-tery 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 for more than four (4) consecutive days during the **Period of Insurance**.

### You pay:

The **Excess** shown on **Your Certificate 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
5. **Your Family**, or is a Co-Owner of the **Pet**
6. Resulting from **You** being pregnant, giving birth or any treatment that is not related to an **Injury** or **Illness**.
7. Resulting from **You** having to go into a hospital for the treatment of alcoholism, drug abuse, drug addiction, or a self-inflicted **Injury** or cosmetic surgery or other forms of elective surgery.
8. Resulting from care in a Nursing **Home** or from convalescence care that **You** do not receive in a hospital.
9. 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 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**;
  - An **Illness** that first showed **Clinical Signs** before **Your Pet's** cover started;
  - 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
  - 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 happened in or on **Your Pet's** body.
3. To the extent permitted by law, any amount or expense resulting from:
  - An **Illness which starts in the first 21 days of cover**;
  - An **Illness** that first showed **Clinical Signs** within **twenty-one (21) days** of **Your Pet's** cover starting;
  - 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
  - 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 happened 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 continue upon the journey and 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:
  - 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
  - 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 the provision of this information.

## Section 9 – Emergency Repatriation

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

### What 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.

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

3. 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**.
4. Any costs resulting from a **Pre-Existing Condition**.
5. Any costs resulting from an **Illness which starts in the first twenty-one (21) days of cover**.
6. Any costs resulting from an **Injury** that happens or an **Illness** first showing
7. **Clinical Signs** before the start of **Your Journey**.
8. Any costs that can be reclaimed from anywhere else.
9. Any costs unless a **Vet** has certified **Your Pet** is too ill to travel **Home** the same way it travelled to **Your** holiday destination.
10. Any amount if **Your Journey** was made to get **Veterinary** or **Alternative or Complementary Treatment** outside of **Australia**.
11. For more than **seven (7) days'** accommodation costs and more than \$60 for each day's accommodation.
12. The cost of cremation or a coffin, casket or any other container for **Your Pet's**
13. remains.
14. For the cost of food.
15. 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 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 Travel 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, as soon as reasonably possible after 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:

Your Certificate of Insurance	A <b>Condition</b> specifically excluded on <b>Your Certificate of Insurance</b> .
Your Pet's age	Any <b>Pet</b> that is less than <b>eight (8) weeks</b> old at the commencement of cover.
Your Pet's Use	Dogs used for security, guarding, track racing or coursing.
Your Pet's breed	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 Wolfhound, Saarloos Wolfhound/ Wolfhound or any wolf hybrid. (This list may be modified from time to time).
Laws and regulations	<ol style="list-style-type: none"><li>a. Any dog of <b>Yours</b> 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. <b>You</b> breaking Australian laws or regulations, including those relating to animal health or importation regulations.</li><li>c. <b>Your Pet</b> being confiscated or destroyed by any Government or Public or Local Authority or any person or Body having the jurisdiction to do so, including because it was worrying livestock.</li><li>d. 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>e. Legal expenses, fines and penalties connected with or resulting from a criminal court case or an Act of Parliament.</li></ol>
Miscellaneous	<ol style="list-style-type: none"><li>a. 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>b. Radiation, nuclear explosion, nuclear fallout or contamination by radioactivity.</li><li>c. A disease transmitted from animals to humans.</li></ol>

<p><b>When Your Pet is on a Journey in an Agreed Country</b></p>	<ul style="list-style-type: none"> <li>a. <b>You</b> not following the conditions of AQIS Pet Importation Regulation.</li> <li>b. Any <b>Journey You</b> take <b>Your Pet</b> on against a</li> <li>c. <b>Vet's</b> advice.</li> <li>d. Any animal less than <b>twelve (12) weeks</b> old.</li> <li>e. A foreign government or public authority putting restrictions on <b>Your Pet</b>.</li> <li>f. <b>Your Pet</b> living permanently outside of</li> <li>g. <b>Australia</b>.</li> <li>h. 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> </ul>
<p><b>Preventative or Routine Treatment</b></p>	<p>The cost of <b>Routine</b> or <b>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>
<p><b>Elective Treatment</b></p>	<p>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>.</p>
<p><b>Care &amp; Negligence</b></p>	<p>Cost of treating any <b>Injury</b> or <b>Illness</b> 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 <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.</p>
<p><b>Pandemic Disease</b></p>	<p>Any pandemic disease that causes widespread <b>Illness</b>, death or destruction affecting dogs and cats.</p>
<p><b>Vaccinations</b></p>	<p>Any dog for any of the following <b>Diseases</b> or associated <b>Illnesses</b> not being vaccinated against distemper, hepatitis, kennel cough, leptospirosis (in areas where it is prevalent, and <b>Vets</b> recommend vaccination) and parvovirus.</p> <p>Any cat for any of the following <b>Diseases</b> or associated <b>Illnesses</b> 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.</p>
<p><b>Reasonable Precautions</b></p>	<p><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>.</p>
<p><b>Your Legal Liability</b></p>	<p><b>Your Legal Liability</b> for payment of compensation in respect of:</p> <ul style="list-style-type: none"> <li>a. Death, bodily injury or illness; and/or</li> <li>b. Physical loss or damage to property, 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>.</li> </ul>

## Claiming

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.petcovergroup.com/au/claims](http://www.petcovergroup.com/au/claims) to assist **You** making a claim.

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.petcovergroup.com/au/claims](http://www.petcovergroup.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

### 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.petcovergroup.com/au/claims](http://www.petcovergroup.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 731 324 Monday to Friday 8:30am – 6pm, Saturday 9am – 5pm. 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.
4. Please send **Us** the following supporting documentation related to **Your** claim or incident:

**Veterinary Fees, Alternative or Complementary Treatment**

- For both sections of cover, the **Veterinary Practice** must complete the relevant section of the claim form.
- Please send **Us** legible fully itemised invoices from the **Veterinary Practice** or **Therapist** (for **Alternative or Complementary Treatment** if the **Therapist** is not a **Member of a Veterinary Practice**) which show what **You** are claiming for.
- When **You** make the first claim for **Your Pet**, **We** will obtain its full clinical history. The full clinical history is a record of all visits **Your Pet** has made to a **Vet** and this information will be obtained from each **Veterinary Practice Your Pet** has attended.
- Claims for certain Conditions may also require additional information about **Your Pet's** full clinical history. **We** will advise **You** if **We** reasonably need this once **We** receive **Your** claim form.
- For **Veterinary Fees**, if the claim is for **Treatment** in an **Agreed Country**, **You** need to provide the booking invoice for **Your Journey** or any other official documents which show the dates of **Your Journey**.

**Death from Injury, Death from Illness**

**Sending Us:**

- The death certificate from **Your Vet**;
- The purchase receipt from when **You** bought **Your Pet**; and
- If **Your Pet** is a pedigree, the pedigree certificate.

**Theft or Straying**

**Sending Us:**

- Evidence of the advertising carried out to try and find **Your Pet**;
- The purchase receipt from when **You** bought **Your Pet**; and
- If **Your Pet** is a pedigree, the original pedigree certificate.

**Advertising and Reward**

**You** must phone **Us** on 1300 731 324 and talk to **Our** Claims Supervisor, for the approval of any reward before **You** advertise it.

Please send **Us**:

- The invoices and receipts to show the costs involved, including a receipt for any reward paid, and
- If the loss or theft happened during **Your Journey**, the booking invoice or another official document to show the dates of **Your Journey** and
- If applicable the police or operator's report.

**Boarding Fees**

**Arranging to have 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.

Please send **Us**:

- The fully itemised invoice from the boarding establishment, pet sitter or written confirmation from the person looking after **Your Pet**.

**Holiday Cancellation**

**Sending Us:**

- The booking invoice and cancellation invoice from the holiday sales organisation. The invoices must show the date of the booking, the dates of the **Journey**, the total cost of the holiday, the date **You** decided to cancel or return **Home** and any expenses **You** cannot recover.
- The receipts for **Your** extra travel expenses.



**Emergency Repatriation, Quarantine Expenses and Loss of Documents**

**Sending Us:**

- The booking invoice or another official document showing the dates of **Your Journey**;
- The invoices and receipts to show the costs involved; and
- If applicable the police or operator's report.

**Claims involving Your Pet being attacked by another Animal**

If **Your Pet** has been injured or had to be put down due to being injured by another animal, please contact **Petcover** for an additional form that needs to be completed and be included with **Your Claim Form** along with the following:

- Details of the owner of the other animal;
- Depending on where the attack happened **You** must report the attack to the appropriate authorities in that Shire/Municipality, i.e. The Ranger at the Local Council/Police Station.

**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** 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** and will count towards the calculation of your **Maximum Benefits**.

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

### 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>	\$7,000
Less the Fixed <b>Excess</b>	\$150
Revised claimable amount	\$6,850
Less <b>Age Contribution</b> loading 20% (on revised claimable amount)	\$1,370
<b>Total claimable amount</b>	<b>\$5,480</b>

Or,

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

Claimable <b>Veterinary Fees</b>	\$7,000
Less the Fixed <b>Excess</b>	\$125
Revised claimable amount	\$6,875
Less <b>Age Contribution</b> 20% (on revised claim- able amount)	\$1,375
<b>Total claimable amount</b>	<b>\$5,500</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 20th February 2017.

### Contacting Us

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

Petcover Aust Pty Ltd Customer Service Centre 1-3 Smolic Crt

Tullamarine VIC 3043

Phone 1300 731 324

For information about the insurer and Sovereign Insurance Australia please visit <https://www.sovereignaustralia.com.au/>

### 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 may be served upon the Insurer as follows:

Sovereign Insurance Australia

263 Albany Highway

Victoria Park, WA 6100

### 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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By Telephone	1300 731 324
Calling from overseas:	+61 3 9339 3333
By Email	info.au@petcovergroup.com
In Writing	Petcover Aust Pty Ltd 1-3 Smolic Court Tullamarine VIC 3043
Website	petcovergroup.com/au
Voice Call	1300 557 727
Relay Users and ask for	1300 731 324
TTY Users Call and ask for	133677 1300 731 324
SMS Relay Users	Contact 0423 677 767

### **Administrator**

Petcover Aust Pty Ltd (ABN 97 117 476 990, AFSL No. 507143) is the sole Administrator of the Policy acting on behalf of the Insurer. Petcover® is a registered trademark and products sold under this trademark in Australia are sold exclusively by Petcover Aust Pty Ltd.

### **Head Office**

1-3 Smolic Crt, Tullamarine VIC, 3043 Ph: 1300 731 324  
info.au@petcover.com petcover.com.au

### **The Insurer**

Sovereign Insurance Australia (ABN 85 138 079 286 AFS License Number 342516) with its registered address at 263 Albany Highway, Victoria Park, WA 6100.

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

