

## **Your Pet Insurance Policy**

**MORE TH>N®**



# Welcome to MORE THAN

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Thank **you** for choosing MORE THAN for **Pet** Insurance, **your** furry friend is in safe hands.

As a **pet** owner, **you** will know that a healthy **pet** is a happy **pet**. And in the event that **your pet** has an **accident** or becomes ill **you** will want to ensure that they get the very best care.

Of course, **we** hope that **your pet** doesn't have to make too many **vet** visits – not only are they traumatic for most dogs and cats, but they can also be expensive and inconvenient for their owners! To help provide immediate advice and guidance if **your pet** becomes unwell, More Than has teamed up with FirstVet to offer customers unlimited access to video consultations with experienced RCVS-accredited UK **veterinary** professionals through the FirstVet app. Using FirstVet never counts as a claim or affects **your** premiums, doesn't eat up **your vet** fee limit and is available to **you** 24/7. Enjoy medical support with UK-based **vets** from the comfort of **your** own home. If **you** need professional advice, or **you** are not sure if a **vet** is open nearby, **you** can book a consultation with one of **our** FirstVet professionals.



FirstVet are here for **you** 24 hours a day, seven days a week, 365 days a year, so no need to drag **your pet** to the **vets** when **you** can have that important first opinion and check done over video call or phone.

## Welcome to MORE THAN (cont.)

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At MORE THAN our focus is providing the optimum level of **Pet Insurance** to suit **your** needs and ensuring that if **you** do ever need to make a claim, that the process is as smooth and efficient as possible. This allows **you** to focus on the important things – getting **your pet** back onto its paws as quickly as possible.

**Our Pet Insurance** will also help **you** out if **your pet** should go missing, or need emergency boarding if **you** should fall ill . On many policies, **we'll** even cover **vet** care abroad if **your pet** falls ill whilst on holiday.

In order to understand **your pet's** policy cover, and to ensure **you** have the right level of cover, please read this Policy and Schedule. **Your** Policy and Schedule are evidence a contract exists between **you** and **us**, so please read the next few pages carefully to ensure the cover is exactly what **you** need, then keep them in a safe place.

Please also ensure **you** understand **your Excess**. This may be a fixed amount and could also be a percentage based amount depending on the choices **you** made when selecting **your** cover or the age of **your Pet**. This is the amount **you** will need to pay in the event of a claim.

And finally, **we're** here to help if **you** have any questions, so please do call **us** if **you're** unsure about anything or need to amend **your** policy.

## The insurance contract

This Policy is a legal contract between **you** and **us**. The Policy and Schedule make one document and must be read together.

Please keep them together.

The contract is based on the information **you** provided when **you** applied for the insurance.

**Our** part of the contract is that **we** will provide the cover set out in this Policy for:

- Those Sections which are shown on the Schedule;
- The **period of insurance** set out on the Schedule.

**Your** part of the contract is **you** must:

- Pay the premium as shown on the policy Schedule;
- Comply with all the conditions set out in this Policy.

If **your** part of the contract is not met, **we** may turn down a claim, increase the premium or **you** may find that **you** do not have any cover.

**We** can choose not to offer renewal of a policy, if **we** do, **we** will let **you** know in advance of **your** renewal date so that **you** have enough time to make alternative insurance arrangements.

**We** are covered by the Financial Services Compensation Scheme (FSCS). More Than, a trading name of EUI Limited, a subsidiary of Admiral Group plc, is a member of the Financial Services Compensation Scheme (FSCS). The FSCS is a safety net for customers of financial services firms if those firms cannot meet their liabilities. If this happens, **you** may be entitled to claim compensation. **You** can get more information from EUI Limited or on the website at [www.fscs.org.uk](http://www.fscs.org.uk)

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## Words with special meanings

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Some words have a special meaning in the policy. They are listed below. Whenever a word with a special meaning is used in the remainder of the policy, it will be printed in bold type.

**Accident:** A sudden, unexpected, specific event that is external to **your pet's** body, that results in **injury** to the **pet**.

**Behavioural:** A change in **your pet's** normal behaviour, directly caused by a medical, mental, or emotional disorder which could not have been avoided by training or medical intervention.

**Complementary medicine:** Acupuncture, hydrotherapy, osteopathy, physiotherapy, or chiropractic therapy recommended by **your vet**.

**Dental:** Any **treatment** of the teeth, gums, or mouth.

**Illness, illnesses:** Changes in **your pet's** state of health that are not caused by an **accident**, or any which may be resulting from gradual or biological causes.

**Injury, injuries:** Clinical sign or symptoms of changes in normal healthy state resulting from one individual **accident**, including directly or indirectly related problems.

**Period of Insurance:** The period of one year (or less if in the first period of a multi **pet** policy) for which the premium has been paid and for which **your pet** is covered as shown on **your policy schedule**.

**Pet:** Your cat or dog named on the **policy schedule**.

**Pre-Existing Condition:** Any **illness, injury** or complication, wherever in the body, directly resulting from an **injury** or **illness**, whether diagnosed or undiagnosed that has been identified or investigated by a **vet** or is otherwise known to **you** prior to the start of the insurance.

**You, Your:** The person or persons named as the policyholder on the schedule.

**Your Family:** **You, your** husband, wife, partner, children, parents, or other relatives who normally live with **you**.

**Vet:** A current, qualified member of the Royal College of **Veterinary Surgeons** or, for **veterinary treatment** outside the UK, the Isle of Man or the Channel Islands, a person registered to practice **Veterinary Surgery** in the country **veterinary treatment** is received. **Vet fees:** Any examination, consultation, tests, x-rays, surgery, prescription medication, as provided by a **vet** at the time of **your** visit or purchased using a prescription a **vet** provides, nursing, care and physiotherapy, provided by a **Veterinary Surgeon** or an employee of a **Veterinary practice** under a **Veterinary Surgeon's** instruction.

**We, Us, Our:** More Than – EUI Limited.

# Policy Conditions Applicable to the whole policy

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These are the conditions **you** will need to keep to as **your** part of this contract. If **you** do not, a claim may be rejected, or payment could be reduced. In some circumstances **your** policy might be invalid if the conditions are not met.

## Fraud

If dishonesty, exaggeration, or false documentation is used by **you** or anyone acting on behalf of **you** to obtain or support:

- A claims payment under **your** policy; or
- Cover for which **you** do not qualify; or
- Cover at a reduced premium;

All benefits under this policy will be lost, the policy may be invalid, **you** may not be entitled to a refund of premium and legal action may be taken against **you**.

## Providing information

**You** must agree that **your** current or previous **vet(s)** may release information or records regarding the medical history, including test results for any **pet** insured with **us**.

## Care of your Pet

**You** must provide proper care and attention to **your pet** at all times and take all reasonable precautions to prevent **accidents, injury** or damage.

**You** must arrange for a **vet** to examine and treat **your pet** as soon as possible after it shows signs or symptoms of **illness** or **injury**.

**You** must follow the advice provided by **your vet** and carry out **treatment** recommended. Failure to carry out **treatment** recommended by **your vet** could affect **your** claim.

## Policy Exclusions

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### We will not pay claims:

For any condition, **accident**, **illness** or benefit resulting where the condition happened prior to the start of the policy;

For malicious or wilful **injury** or gross negligence to **your pet** which is caused by **you** or members of **your family**;

For medication that is not prescribed by a **vet** or purchased using a prescription a **vet** provides;

For **pets** which are not dogs or cats;

When **your premium** has not been paid and/or **your policy** is not in force.

### Notifiable diseases

**We will not pay claims** for any **pet** which suffers from a notifiable disease as named in the Animal Health Act, such as rabies and foot-and-mouth disease.

### We will not pay:

For slaughter, by order from any government, local authority or any person having jurisdiction in the matter, except in the case of destruction for humane reasons to stop incurable suffering;

The cost and compensation for euthanasia of **your pet** under a court order of the Animal Health Act.

### Worrying livestock

**We will not pay claims** for the cost and compensation in respect of euthanasia of **your pet** under a court order following its destruction for the protection of livestock.

### Dangerous dogs

**We will not pay claims** for any dog that is an American Pit Bull Terrier, Dogo Argentino, Fila Brasileiro, Japanese Tosa, Pit Bull, Pit Bull Terrier (including all derivatives such as XL Bully, Bully, and Pocket Bully), wolf or wolf hybrid, or a dog crossed with these, or any animal registered under the Dangerous Dogs Act 1991 and The Dangerous Dogs (Northern Ireland) order 1991 or Dangerous Dogs (amendment) Act 1997 or any subsequent amendments or a dog crossed with any of these.

### Territorial limits

**We will not pay** for claims outside the territorial limits of the United Kingdom, Channel Islands or Isle of Man. For **Pets Abroad** cover, **we will not pay** for claims outside of EU Countries of the **PETS Travel Scheme**.

### Infringement of animal health importation legislation

**We will not pay** for any claim as a result of restrictions put on **your pet** by the Department for Environment, Food and Rural Affairs (DEFRA) or the Department of Agriculture, Food and Rural Development in the Republic of Ireland.

### Fines and penalties

**We will not pay** for legal expenses, fines and penalties connected with or resulting from a criminal court case or an Act of Parliament made in the United Kingdom.

## Policy Exclusions (cont.)

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### War risks

We will not pay for any loss, damage, liability, cost, or expense of any kind caused directly or indirectly by war, invasion, or revolution.

### Transferring your interest in the policy

You cannot transfer **your** interest in this policy to anyone else without **our** written permission.

### Financial sanctions:

We shall not provide any cover or be liable to provide any indemnity, payment, or other benefit under this policy to the extent that the provision of such cover, indemnity, payment, or other benefit would expose **us** to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom, United States, or other country of policy issue. If any such resolution, sanction, law, or regulation takes effect during the **period of insurance** we may cancel this policy immediately by giving **you** written notice at **your** address.

### Changes in your circumstance

You must tell **us** within 30 days of any of the following changes. These changes may affect the price of **your** pet insurance and the cover **we** can provide. If **we** are not told, **your** claim payment may be reduced or not be made. **Your** policy may be cancelled; and **you** may not receive a refund of premium.

### About you and your pet:

- You have moved home;
- Are no longer the owner of the pet;
- Your pet stops living with **you** at **your** home;

### Dogs only:

Your pet is used for racing;

- Your pet has had complaints made about its behaviour (aggression, attacking or biting);
- Your pet has been the cause of an accident or legal action;
- Your pet has been trained to attack;
- Your pet is used for security purposes or as a guard dog;

### Both dogs and cats:

Your pet is used for breeding (this means bred more than 2 times in its life) or to make money, earn an income or as a business;

- Become aware that **your** pet is not the breed **you** thought;
- Your pet is no longer correctly described on **your** schedule.

## Policy Exclusions (cont.)

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### Law applicable

Under the laws of the United Kingdom (England, Scotland, Wales, and Northern Ireland) both **you** and **we** may choose the law which applies to this contract, to the extent permitted by those laws. Unless **you** and **we** agree otherwise, **we** have agreed with **you** that the law which applies to this contract is the law which applies to the part of the United Kingdom in which **you** live.

**We** and **you** have agreed that any legal proceedings between **you** and **us** in connection with this contract will only take place in the courts of the part of the United Kingdom in which **you** live.

### Cancelling the policy

#### Within 14 days

**You** may cancel the policy within 14 days of the start or renewal date. **We** will refund any premiums already paid, except when **you** have already made a claim under **your** policy, where **you**'ll have to pay **your** full annual premium and no refund will be available.

#### Cancellation after 14 days

Provided there has been no claim or incident likely to give rise to a claim during the current **period of insurance** and **you** cancel **your** policy, **we** will charge **you** for the time **you**'ve been on cover and charge/ refund any balance.

If a claim has been submitted or there has been any incident likely to give rise to a claim during the current **period of insurance**, no premium refund will be given.

If **your** **pet** dies or is reported as lost or stolen and **you** need to make a claim, the remaining premiums for the full policy year will not be charged.

### Monthly payment

If **you** pay by monthly instalments and **you** cancel this insurance because **your** **pet** has died, has been stolen or strays and **you** make a claim for this, **we** will not deduct outstanding instalments for the remainder of the current **period of insurance** from any claim payment.

If **you** pay by monthly instalments and **you** cancel this insurance for any other reason other than those stated above and **you** make a claim, **we** will deduct outstanding instalments for the remainder of the current **period of insurance** from any claim payment.

### Annual payment

If **you** pay the full annual premium and **you** cancel this insurance and **you** have not made a claim, **we** will refund the proportion of the premium already paid for the remainder of the current **period of insurance**.

If **you** pay the full annual premium and **you** cancel this insurance because **your** **pet** has died, has been stolen or strays, and **you** make a claim for this, **we** will refund the proportion of the premium already paid for the remainder of the current **period of insurance**.

## Policy Exclusions (cont.)

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If **you** pay the full annual premium and **you** cancel this insurance for any other reason other than those stated above and **you** make a claim, **we** will not refund the proportion of the premium already paid for the remainder of the current **period of insurance**.

Cancelling the monthly premium instalment agreement: **Your** policy has a normal **period of insurance** of 12 months and **your** legal contract with **us** is for this period.

**You** may have asked, and **we** may have agreed for **your** annual premium to be paid on a monthly basis.

**We** have the right to terminate the policy in the event that there is a default in instalment payments.

If **you** want to cancel payments by monthly instalment but not **your** policy, **we** can tell **you** how much **you** will have to pay for the rest of the **period of insurance**. If this amount is not paid by the date given in **our** reply to **you**, then all cover under **your** policy will be cancelled from this date.

If **you** need to cancel **your** policy for any of the reasons given above, please contact **us** on **0333 777 7389**.

## Multi Pet

If **you** remove a **pet** from **your** multi **pet** policy, **you** will no longer be entitled to the discount for this **pet**, and the premium will be adjusted for each remaining **pet**.

## Our right to cancel

**We** can cancel this policy by giving **you** at least 14 days notice at **your** last known address if **we** identify serious grounds for doing so, including but not limited to:

Failure to provide **us** with information **we** have requested that is directly relevant to the cover provided under this policy or any claim;

The use of foul or abusive language, threats of violence, nuisance, disruptive or aggressive behaviour against **our** staff, contractors or property; or

Making a claim knowing it to be false, dishonest or exaggerated in any way.

In these circumstances **we** would where possible, contact **you** and seek to resolve the matter with **you**.

**You** will be entitled to a refund of a proportion of any unexpired premium, providing no claims had been made for the current **period of insurance**.

**We** may also cancel the policy if a change in **your** circumstances (page 9) means that **you** or **your** **pet** no longer meet the eligibility for this policy or due to the fraud condition on page 9

**Your** policy will also be cancelled if **you** do not pay **your** premium.

## Changing cover

If **we** offer and **you** accept a change in **your** **vet** fee limit, any change will apply from the renewal date of the cover start date of **your** insurance policy. Any change made to **your** **vet** fee limit will not apply to claims which started before the change was made unless **you** downgrade the cover limit or type.

## What you pay towards the cost of a claim (policy excess)

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### Vet fees

This is the part of the claim that **you** have to pay.

Please refer to your **Policy Schedule** for details of the policy **excess** applicable to your **Pet(s)**. Your co-insurance amount will be applied at the renewal following **your pets** 9th birthday.

Third party liability: The first £250 of any claim.

**Accidental damage:** The first £250 of any claim.

## Policy cover levels

The limits shown will apply to each **pet you** insure.

Benefit/Product	Premier
Vet Fee Limit	£12,000
Vet Fee Terms	Per Year
Treatment Period	Until the vet fees limit is used up for each policy period
Complementary treatments	£1,500 (within Vet Fee Limit)
Dental care for accidents	£2,000
Dental care for illness	£2,000
Behavioural Problems	£1,000
Treatment Food	£500

Accident Damage	£2,000
Third Party Liability - Dogs only (Excess £250)	£3,000,000
Death from Accident	£2,000
Death from Illness ( pets under 9)	£2,000
Emergency Boarding	£1,000
Emergency Minding	£1,000
Reward	£1,000
Cost of Advertising	£1,000
Loss by theft or straying	£2,000
Vet fees abroad - extension of vet fees	Included as extension of vet fees
Emergency Expenses up to	£1,000
Holiday Cancellation up to	£2,000
Quarantine cots up to	£1,000
Loss of healthcare certificate/Passport up to	£250
Repeating the tapeworm	£250
Farewell cover (Euthanasia/Cremation/Burial)	£200

## Premier: Vet Fees Cover

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Your schedule will show if you have chosen the Premier cover level.

### How premier cover works

Premier provides cover for **treatment** costs for ongoing or one-off **accidents** and **illnesses**. Your schedule will show you the limit that applies to your pet for all **accidents** or **illnesses** in the policy year.

As long as you renew your policy with us and there's no break in cover, your limit for the next year becomes available to use again at each new policy year. There is no limit to the number of **accidents** or **illnesses** your pet can claim for, but all benefits will come from the one benefit limit for the year.

So, if while insured with us, your pet starts to develop an ongoing **illness**, like diabetes or arthritis, or a reoccurring **illness** like an ear infection, we do not put a time limit on how long **treatment** can last. Once you use up your limit for the year, you have to pay **treatment** bills for all additional **accident** or **illness** yourself until your policy renews.

### WHAT IS COVERED

We will pay **vet** fees up to the limit that is shown on your schedule for all **accident** or **illness** your pet has in the policy year.

Your schedule will show you the limit that applies to your pet for the whole year.

There is no limit to the number of **accidents** or **illnesses** you can claim for.

Once you use up your limit for the year you have to pay **treatment** bills yourself until your policy renews.

Your **accident** or **illness** limit includes:

- Complementary treatment up to £1,500 to use when your pet is treated with acupuncture, homeopathy, chiropractic manipulation, hydrotherapy, osteopathy, and physiotherapy which is carried out by the treating vet or on the recommendation of the treating vet. This is included within your total vet fee limit and is not a separate amount.
  - Dental care for teeth and gums from an illness - up to £2000
1. If your pet has a **dental** check every 12 months. Once it has had its first check and your vet has done any necessary work, should your pet suffer from tooth decay or gum disease before the next 12 month check or if tooth decay or gum disease are seen at the time of the next check, we pay for the **treatment**. If your pet doesn't have a check every 12 months, or if the work required is not done we will only pay:
  2. For teeth or gums if they are damaged in an **accident**;
  3. If an underlying **illness** causes tooth decay or gum disease;
  4. To remove teeth to treat an **illness**
- Behavioural – up to £1000
  - Food developed to dissolve urinary crystals or stones or to treat renal and thyroid conditions when given as well as or instead of medication up to £500. No other food is covered.

## Premier: Vet Fees Cover (cont.)

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### FOR ALL COVER LEVELS

Your premium, **excess**, benefits and policy terms and conditions can change, if they do, **we** will always provide full details to **you** before **your** renewal date.

Like **us**, as **pets** get older, sadly they're more likely to get ill, that's why **your** renewal price increases each year, and **your** co-insurance amount will be applied at the renewal following **your** **pets** 9th birthday.

Unfortunately, once a **pet** has been taken ill, in general they're more likely to get ill again. That's why, if a claim is paid, the price **you** will pay next year can double.

It's important **you** budget for renewal prices to increase as **your** **pet** gets older. How much they go up is different for everyone and depends on things like **your** **pet's** breed, their age and health, and there is no limit to how much **your** renewal price can increase over time.

Please refer to **your** **Policy Schedule** for details of the policy **excess** applicable to **your** **Pet(s)**. **You** will be able to claim for **vet** fees in the UK. Under **Pets** Abroad Cover **you** will also be able to claim for **vet** fees whilst travelling with **your** **pet** to countries that are EU members, provided as **you** comply with the terms and conditions of the relevant overseas Travel Scheme.

# We will not pay

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## Medication

This policy does not provide cover for all medication that **you** or a **vet** may give to **your pet**. Medication for **pre-existing conditions** or conditions not covered by **your policy** may not be covered.

1. The **excess** or co-insurance, this is the first part of the claim that **you** have to pay. The **excess** or co-insurance will be shown on **your policy schedule**;
2. Any voluntary co-insurance as **your** first part of any claim.
3. A separate **vet** fee limit for;
  - cruciate ligaments in each leg – **we** will not pay the vet fee limit for each leg, both legs are treated as one health issue;
  - Each spinal disc – **we** will not pay the vet fee limit for each disc, disc problems to one or more discs are treated as one health issue;
  - Any other health issue that causes **your** pet to suffer from a number of injuries or **illnesses** will be considered to be one health issue treated under one single vet fee limit.
4. For health issues, concerns, **illnesses** and **injuries** which **you** or **your vet** were aware of before **you** took out the policy, they are known as **pre-existing conditions**,

They are:

- Signs or symptoms of diagnosed or undiagnosed injuries or **illnesses**;
- Existing **illnesses** or injuries;
- Existing physical abnormalities;
- Existing **illnesses**, injuries or physical abnormalities which lead to other health issues or injuries;
- **Illnesses** or injuries which are medically linked to existing **illnesses**, injuries, or physical abnormalities.

Examples of linked health issues;

- If **your** pet is identified as suffering from diabetes, and the diabetes causes **your** pet to suffer from cataracts these and any future health problems which occur due to the diabetes or cataracts will be paid as one health issue.
- If **your** pet suffers repeatedly from symptoms of the same type of skin or ear issue, such as those caused by underlying allergy, **we** will pay the vet fee limit once for all symptoms linked to the same skin or ear issue.

**We will not pay:**

**We consider the following to also be pre-existing conditions:**

- Treatment of cruciate ligaments in the second leg if one leg has shown signs, been diagnosed or been treated for cruciate ligaments before **you** took out the policy;
- Treatment of spinal disc problems if any disc has shown signs, been diagnosed, or been treated for spinal disc problems before **you** took out the policy.
- For **illnesses** which **you** or **your vet** were aware of in the first 14 days of **your** policy first starting or any illness that develops from them.

## We will not pay (cont.)

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By **illness** we mean:

1. Diagnosed **illness**;
2. Signs or symptoms of **illness** (undiagnosed **illness**); For **accidents** within the first 48 hours of **your** policy first starting, or any **illness** or **injury** that develops from them;
3. For any cruciate ligament problems which **you** or **your vet** were aware of in the first 14 days of **your** policy first starting, however caused, or any arthritis, **illness** or **injury** that develops from them;
4. For supplements and probiotics, these are products **you** can purchase over the counter or online without prescription. They are made from foods or biological products. Joint supplements, nutraceuticals, vitamin and mineral supplements, and organ supplements are all examples of these products;
5. For vaccinations, homeopathic vaccinations, flea tick or worming prevention or **treatment** (except under **Pets Abroad Cover** where repeat tapeworm **treatment** is provided);
6. For the cost of any **treatment**, tests or procedures, that **you** choose to have carried out, that do not treat an **illness** or **injury**, or that are preventative or cosmetic, including routine spaying and castration. **We** also do not pay for complications that result from any of these;
7. Bathing, grooming, nail clipping or de-matting **your pet(s)** regardless of **your** personal circumstances;
8. For **treatment** of behavioural problems except where **you** have selected the premier level of cover up to the limit shown in **your policy schedule**;
9. Any costs due to breeding, pregnancy or giving birth, this applies to both accidental and intentional pregnancies or cost of rearing puppies or kittens;
10. The cost of **vet** fees outside normal surgery hours except where a **vet** considers **your pet** cannot wait until normal surgery hours;
11. Non-essential hospitalisation and/or house calls unless the **vet** declares that to move **your pet** would seriously endanger its health;
12. For having **your pet** put to sleep, the cost of cremation or disposing of **your pet's** remains as this will be provided under the farewell cover benefit;
13. For the removal of dew claws unless as a result of an **accident** or where there is infection;
14. Post mortem costs;
15. The cost of transplant surgery, including pre and post operative care;
16. For retained/undescended testicles (cryptorchidism);
17. The cost of prosthesis, including any **veterinary treatment** needed to fit the prosthesis, other than the cost of hip, knee and/or elbow replacement(s);
18. Stem-cell or gene therapy;
19. Any claim as a result of a notifiable disease (full details on page 8);
20. **We** will not pay for parvovirus, hepatitis, distemper, leptospirosis in dogs or feline leukaemia, cat flu or infectious enteritis in cats if **you** have not had **your pet** vaccinated against them and kept the vaccinations up to date; or as directed by **your vet**. With reference to the particular needs or circumstances of **your pet(s)** **you** acknowledge that there is no cover provided for diseases in the event that the available vaccinations have not been administered to **your pet(s)**. Homeopathic vaccines are not acceptable.
21. Any **treatment** costs incurred after the limit shown on **your** schedule is reached until such time that renewal has occurred and the next years premium has been paid.
22. For costs charged by a **vet** to fill or provide a prescription or to complete claim forms or any costs charged to obtain receipts, invoices or reports required as part of a claim.

# Accidental Damage

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## WHAT IS COVERED

**We** will pay if, while visiting someone else's property **your pet** causes accidental damage to personal property.

**You** do not have to be legally liable for the damage to make a claim under this cover.

The most **we** will pay is up to the amount shown on **your policy schedule** for each **pet** for each **period of insurance** up to a maximum of the limit shown on **your** schedule of insurance.

**We** will not pay for:

Damage to personal property owned by or in the control of **you**, **your** family, employee or guest;

1. Damage to any personal property belonging to any person entrusted with the care, control and custody of **your pet**;
2. Any damage occurring when **your pet** is left in a home where no person aged 18 or over is present;
3. Damage to any motor vehicle or its contents;
4. Damage caused by **your pet** fouling, vomiting or urinating on/in any items;

# Death from Accident

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## WHAT IS COVERED

We will pay the purchase/donation price of **your pet** if it dies or is put to sleep by a **vet** as a result of an **accident**.

If **you** are unable to provide proof of what **you** paid, **we** will pay the cost of a similar **pet** based on the breed, sex, and date of birth at the time **you** became the owner of **your pet**.

The most **we** will pay is up to the amount shown on **your policy schedule** for each **pet** up to a maximum of the limit shown on the cover level table on page 5.

## WHAT IS NOT COVERED

We will not pay for:

1. Death as a result of an **accident** that happens within the first 48 hours of the first **period of insurance** of **your policy**;
2. Having **your pet** put to sleep, the cost of cremation or disposing of **your pet's** remains as this is provided under the Farewell cover option;
3. The purchase/donation price unless as a result of an **accident**, **your pet** was put to sleep for humane reasons and to stop incurable suffering;
4. The purchase/donation price if **your pet** was put to sleep due to aggression, unless it can be linked to an **accident** covered by this policy;

## Death from Pet illness

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### WHAT IS COVERED

We will pay the purchase/donation price of **your pet** if it dies or is put to sleep by a **vet** as a result of **illness**.

If **you** are unable to provide proof of what **you** paid, **we** will pay the cost of a similar **pet** based on the breed, sex, and date of birth at the time **you** became the owner of **your pet**.

The most **we** will pay for each **pet** is up to the purchase/donation price shown on **your policy schedule**, up to a maximum of the limit shown on the cover level table on page 5.

### WHAT IS NOT COVERED

We will not pay for:

1. Death as a result of **illness** that happens within the first 14 days of the first **period of insurance** of **your policy**;
2. Having **your pet** put to sleep, the cost of cremation or disposing of **your pets** as this is provided under Farewell cover ;
3. Any claim for any **pets** aged 9 years and above;
4. The purchase/donation price unless as a result of an **illness**, **your pet** was put to sleep for humane reasons and to stop incurable suffering;
5. The purchase/donation price if **your pet** was put to sleep due to aggression, unless it can be linked to an **illness** covered by this policy.

# Emergency Pet Minding

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## WHAT IS COVERED

We will pay the cost of paying someone to look after **your pet** if **you** or a member of **your** family has to stay in hospital on medical advice for a period of more than 4 days in a row and no other member of **your** family is able to look after **your pet**.

We will pay for the cost of the **pet minder** for the whole of **your** hospital stay.

The most we will pay for each **pet** for each **period of insurance** is shown on **your** schedule of insurance.

## WHAT IS NOT COVERED

We will not pay:

1. For any stay in hospital that is not as a result of medical advice;
2. For any stay in hospital **you** knew **you** needed before the cover start date;
3. For convalescent or nursing home care;
4. For **treatment** that is not related to an **injury** or **illness**;
5. The person caring for **your pet** unless we have agreed to do this;
6. Anyone that is a member of **your** family;
7. **Pet** minding fees if **you** stay in hospital for less than 4 days in a row;
8. For **treatment** of alcohol or solvent abuse, drug abuse, drug addiction, attempted suicide, or self-inflicted **injury** or **illness**;

If **you** make a claim for a **pet** under Emergency **Pet Minding**, **you** cannot also make a claim for the same **pet** at the same time under Emergency boarding.

# Emergency Boarding

---

## WHAT IS COVERED

We will pay the cost of boarding **your pet** in a licensed kennel or cattery if **you** or a member of **your** family has to stay in hospital on medical advice for a period of more than 4 days in a row and no other member of **your** family is able to look after **your pet**.

We will pay for the boarding fees for the whole of **your** hospital stay.

The most we will pay for each **pet** for each **period of insurance** is shown on **your policy schedule**.

## WHAT IS NOT COVERED

We will not pay:

1. For any stay in hospital that is not as a result of medical advice;
2. For any stay in hospital **you** knew **you** needed before the cover start date;
3. For convalescent or nursing home care;
4. For **treatment** that is not related to an **injury** or **illness**;
5. For **treatment** of alcohol or solvent abuse, drug abuse, drug addiction, attempted suicide, or self-inflicted **injury** or **illness**;
6. Boarding fees if **you** stay in hospital for less than 4 days in a row;

If **you** make a claim for a **pet** under Emergency Boarding Fees **you** cannot also make a claim for the same **pet** at the same time under Emergency **Pet Minding**.

## Third Party Legal Liability Cover (Dogs only)

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Someone might bring a legal action against **you**, if for example, **your pet** caused an **accident** or injured someone. This section of cover could pay for the costs that could result.

### WHAT IS COVERED

Damages and legal costs to others which **you** become legally liable to pay if **your dog** causes:

Death or **injury** to a person;  
or  
loss or damage to their property.

If someone who is not a member of **your** family is looking after **your dog** when the **injury** or damage happens, **we** will still pay as long as **you**:

- Asked them to look after **your dog**;
- Did not agree to pay them to look after **your dog**;
- And the death, injury, loss, or damage was not to them or their property.

The most **we** will pay for any claim or series of claims arising from any one event during the **period of insurance** is shown on the cover level detail on page 5.

### WHAT IS NOT COVERED

**We** will not pay for:

1. The **excess**, this is the first part of a claim that **you** have to pay. This is paid for each incident. The **excess** will be shown on **your policy schedule**;
2. Anything owned by or the legal responsibility of **your** family, **your** domestic employees who normally live with **you** or anyone looking after **your dog** with **your** permission.
3. Liability arising from:
4. Any employment, trade, profession or business of any of **your** family or anyone looking after **your dog** with **your** permission;
5. The use of **your dog** for trade, profession or business;
6. Death, **injury**, loss, or damage to any of **your** family, **your** domestic employees who normally live with **you**, anyone employed under contract of service by **you** or anyone looking after **your dog** with **your** permission;
7. Liability accepted by any of **your** family under any agreement, unless the liability would exist without the agreement;
8. Liability covered by any other policy unless all the cover under that policy has been used up;
9. Any incident that occurs while **your dog** is in the care and or control of someone who carries out the following activities as their profession: dog minder, dog sitter, dog walker, dog groomer, or dog day care provider;
10. Fines, penalties or breach of quarantine restrictions or import or export regulations;

# Lost and Found Cover

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## WHAT IS COVERED

**We** will pay for the cost of advertising locally and for offering a reward for the recovery of **your pet** if it is lost or stolen.

The most **we** will pay for advertising costs for each **pet** for each **period of insurance** is shown on **your** schedule of insurance.

Some local authorities do not allow posters to be put up on lamp posts or trees for example. **You** might want to check what is allowed in **your** area before any posters are put up.

**We** will pay the purchase/donation price of **your pet** if it is permanently lost or stolen, ('permanently' means lost or stolen for 90 days) and is not recovered despite the use of the advertising and offering a reward cover.

The most **we** will pay for any one claim is the purchase/donation price shown on **your** Schedule of insurance.

## WHAT IS NOT COVERED

**We** will not pay for any reward:

1. Given to any person who lives with **you**;
2. Paid to anyone who was looking after **your pet** when it was lost or stolen;
3. Not supported by a signed receipt which shows the full name and address of the person who finds **your pet**;
4. That **we** have not agreed to before **you** advertised it;
5. To the person who stole **your pet**, or any person who is in collusion with the person who stole **your pet**.

**We** will not pay for:

6. Any claim made after 121 days from the date **your pet** was lost or stolen;

# Pets Abroad Cover

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As a resident of the United Kingdom, **you** are able should **you** wish, under the United Kingdom Government **Pet** Travel Scheme, take **your pet** temporarily to certain countries and return home without putting **your pet** into quarantine.

This cover is subject to the regulatory environment allowing **pet** travel to continue.

The scheme is administered by DEFRA (the Department for Environment, Food and Rural Affairs) and **you** need to comply with the criteria set out by them. Details can change, so **you** will need to check when **you** intend to travel, the phone number for DEFRA is shown on the back page.

This cover only includes travel to the European Union (EU); if **you** wish to travel with **your pet** to countries outside of the EU, please contact the customer service line using the details on the back page.

## WHAT IS COVERED

Three trips in any **period of insurance**.

No trip can last longer than 60 days.

Each trip must start and end in the United Kingdom.

**We** will not pay for:

1. Non-compliance with the Travel Scheme. Countries that are non-EU members of the **PETS** travel scheme as defined by DEFRA;
2. More than 3 trips in any **period of insurance**. Any trip which lasts more than 60 days;
3. Any claim as a result of **you** failing to meet any of the conditions of the **Pet** Travel Scheme (this applies to conditions set by the UK Government, a carrier or other countries involved in the scheme);
4. Any costs that the carrier may charge to carry out checks;
5. **Your** costs in meeting the conditions of the **Pet** Travel Scheme unless **we** specifically cover them in this policy;
6. **You** to bring **your pet** home if it dies;
7. Any loss as a result of changing money;

## Vet fees in the EU

---

Your UK **vet** fees cover is extended, and **you** can use it to pay for **vet** fees while **you** and **your pet** are in the EU.

This extension does not increase the limit **we** provide for **your UK vet** fees.

The same one overall limit for **vet** fees applies for claims that occur in both the UK and EU.

**We** will not pay for:

1. Anything that is not covered under **your vet** fees in the UK section of cover;
2. Any claim resulting from an **accident** or **illness** or signs or symptoms of an **accident** or **illness** that **you** or **your vet** were aware of before **you** booked **your** holiday/trip or before **your** cover start date.

**Your** carrier must be a transport company approved by the United Kingdom Government to carry animals in accordance with the **Pet** Travel Scheme.

The most **we** will pay for each **pet** for each **period of insurance** is shown on **your Policy Schedule**

# Repeat tapeworm treatment (for the countries now applicable)

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## WHAT IS COVERED

We will pay for the cost of repeat tapeworm **treatment** if **your** departure home is delayed by **your** carrier or **your treatment** failing to meet the terms for entry to a country that has a mandatory requirement for tapeworm **treatment**.

As at 01/01/2024 the countries currently requiring worming **treatment** for direct entry are;

- Finland
- Ireland
- Malta
- Northern Ireland

The **treatment** must have been given no less than 24 hours and no more than 120 hours (5 days) before **you** arrive.

**Your** carrier must be a transport company approved by the United Kingdom Government to carry animals in accordance with the **Pet** Travel Scheme.

The most we will pay for each **pet** for each **period of insurance** is shown on the cover level table on page 5.

## WHAT IS NOT COVERED

We will not pay for:

1. Obtaining the initial worming **treatment**;
2. Fees incurred if the initial and repeat worming **treatment** was not performed in the timescale required by the travel scheme;

## Loss of healthcare certificate

---

We will pay the cost of replacing **your pet's** health certificate; this is the official Travel Scheme Health certificate issued by a **vet** authorised by the United Kingdom Government should the original certificate be lost, stolen or destroyed during a trip;

or

a microchip fail, meaning a new certificate is required.

The most we will pay for each **pet** for each **period of insurance** is shown on **your Policy Schedule**

We will not pay for:

Any health certificate that is lost, stolen, or destroyed:

- Prior to departure;
- Not reported to the issuing vet within 24 hours of discovering the loss.

Claims for microchip failure if the microchip was:

- Not fitted;
- Not tested and/or it was established that the microchip was not functioning prior to departure.

## Quarantine costs

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We will pay the cost of quarantine kennelling costs **you** have to pay if **your pet** is unable to travel due to **illness** despite **you** complying with the relevant travel regulations.

As part of travel regulations, **you** need to have **your pet** microchipped before **you** can travel.

We will pay the cost of quarantine kennelling if **your pet** is unable to travel due to failure of the microchip.

The most we will pay for each **pet** for each **period of insurance** is shown on **Your policy schedule**.

We will not pay for:

1. Any costs incurred where **you** or **your vet** were aware that **your pet** was suffering from an **accident** or **illness** or signs or symptoms of an **accident** or **illness** prior to departure.
2. Claims for microchip failure if the microchip was:
  - Not fitted;
  - Not tested and/or it was established that the microchip
  - Was not functioning prior to departure.

## Emergency expenses abroad

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### Delayed return home

**We** will pay additional costs **you** have to pay for extra accommodation, the cost of returning home and other expenses while **you** are away on a trip in the EU if **your** return home is delayed due to:

- **Your** pet needing emergency veterinary treatment;
- **Your** pet needing repeat worming treatment;
- The healthcare certificate being lost, stolen or destroyed while **you** are on a trip;
- **Your** pet becoming lost before **your** return home.

The most **we** will pay for each **pet** for each **period of insurance** is shown on **Your Policy Schedule**.

**We** will not pay for:

1. Bringing **your pet** home if it should die while **you** are on a trip;

## Holiday cancellation/cutting a trip short

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This cover includes travel if **you** or **your** family are on holiday in the European Union (EU), the UK, Channel Islands, and the Isle of Man or elsewhere in the world. **We** will pay the cost of any lost travel and accommodation expenses if **you** or **your** family have to cancel a trip or cut a trip short because, before **you** and **your** family leave or while **you** and **your** family are away, **your pet**:

Has gone missing; or

Dies or has to be put to sleep by a **vet**; or

Requires life-saving **treatment**.

The most **we** will pay for each **pet** for each **period of insurance** is shown on **Your Policy Schedule**

### WHAT IS NOT COVERED

**We** will not pay for:

1. Costs that **you** or **your** family can recover elsewhere;
2. Holiday cancellation if life-saving **treatment** is given or **your pet** dies or has to be put to sleep more than 7 days before **you** leave;

# Farewell Cover

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## WHAT IS COVERED

We will pay for the cost if **your pet** is put to sleep by a **vet**.

We will pay for the cost of cremation or burial if **your pet** dies or is put to sleep by a **vet**.

The most we will pay for each **pet** is shown on **your Policy Schedule**.

We will not pay for:

1. Putting **your pet** to sleep as a result of health issues, concerns, **illnesses** and **injuries** which **you** or **your vet** were aware of before **you** took out the policy, they are known as **pre-existing conditions**. They are explained in detail on pages 8, 11 & 13;
2. Putting **your pet** to sleep as a result of **illness** that happens within the first 14 days of **your** policy first starting;

By **illness** we mean:

Diagnosed **illness**;

Signs or symptoms of **illness** (undiagnosed **illness**);

3. Putting **your pet** to sleep as a result of an **accident** that happens within the first 48 hours of **your** policy first starting; or any **illness** or **injury** that develops from them;
4. Putting **your pet** to sleep unless it was necessary for humane reasons and to stop incurable suffering; putting **your pet** to sleep due to aggression, unless it can be linked to an **accident** or **illness** covered by this policy;

# How to make a claim

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Our aim is to provide a fast and efficient claims service to ensure payments are issued to **you** or **your vet** as quickly as possible for any valid claim.

To help **us** achieve this please read this section carefully, note the information **we** require for each type of claim and send **your** claim to **us** promptly if it is a Third- Party claim form **you** need.

**We** do not cover the cost of completing claim forms, obtaining receipts, invoices or reports required as part of the claim.

**We** do not pay the cost charged by a **vet** to fill or provide a prescription.

Always quote the policy number printed on **your Policy Schedule** every time **you** contact **us**.

## Vet fees

If **your vet** tells **you** that **treatment** will happen all at once or over a few visits, **you** can send the completed claim form along with all the information detailed above to **us** once all the **treatment** is completed.

Or if **your vet** is treating an **accident** or **illness** that is going to require long term **treatment**, please send **us** a claim form completed by **you** and **your vet**, along with all the supporting information detailed above within three months of the **treatment** starting, after that **you** can then send **us** claims for any ongoing **treatment** including updated medical records showing the **treatment** **your pet** has received, invoices and receipts every three to six months. If any information **we** have asked for is not provided it will delay **your** claim.

Don't forget **we** do not pay **vet** invoices that are 12 months older than the last date of **treatment**.

**We** can arrange to pay most **vets** directly. The claim form can be fully edited and completed online, allowing **you** to forward to **your vet** for completion. Ongoing claims, including those for repeat medication can be submitted quickly and easily using **our** online claims portal which can be found at

<https://www.morethan.com/pet-insurance/make-pet-claim>

**You** or **your vet** can submit claims using the portal, and payments can also be made to either **you** or **your vet**.

Please ask **your vet** if they are happy to offer a direct claim, and if **we** are able to, **we** will take care of the rest.

**You** must keep all invoices and receipts that **your vet** gives **you** in connection with **your** claim and send these along with a complete medical history for **your pet** to **us**. This must be a record of all visits **your pet** has made to a **vet** and this information can be obtained from each **vet** practice **your pet** has attended.

**We** will need **you** to agree that **your** current, previous or referral **vet** may release information or records regarding the medical history, including test results for any **pet** insured with **us**.

**We** do not pay any **excesses** as those are the parts of the claim **you** must pay. **Your policy schedule** will tell **you** what this amount is. If there is any amount other than the **excess** that **we** cannot pay because the costs are not covered by **your** policy, **we** will tell **you**. **You** must settle with **your vet** any amount not covered by the policy. **We** may ask **your vet** to provide additional information regarding **your** claim.

## How to make a claim (cont.)

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### Accidental damage

You will need to provide a letter to us detailing the exact circumstances of the claim including photos and a description of the damaged items, the original purchase price, and the cost of replacing or repairing the item(s).

### Death from accident/Death from illness

We will need you to provide a **veterinary** certificate stating the date and cause of death. If **your pet** was put to sleep, we will need a **veterinary** certificate stating that this was necessary for humane reasons to stop incurable suffering.

We will also need a pedigree certificate if you have one and receipt for the original purchase/donation price paid for **your pet**.

### Emergency boarding/Emergency pet minding

We will need you to provide receipts detailing dates, daily costs of boarding and expenses you have paid. For daily minding, we will need you to provide written confirmation that the person caring for **your pet** has been paid the amount agreed by us.

You must also provide confirmation of the period you or your family members were in hospital. We will need a medical certificate or written confirmation from the treating doctor or the hospital that confirms the dates of the hospital admission and later discharge from hospital.

### Third-party legal liability

Please notify us immediately that you become aware, if **your pet** is involved in an incident, which may give rise to a Third-Party claim.

If you receive any correspondence, writ, summons or any other legal document from or on behalf of the Third Party you must not answer any of these, but they should be forwarded to us immediately.

### Lost and Found cover

You must also report the loss of **your pet** to your local rescue centres and **veterinary** practices.

If **your dog** is lost you must report this to the police and, if you have one, the dog warden within 24 hours of discovery and provide their reference number to our claims department. We will ask for confirmation that you have done this.

You must not pay the finder any reward yourself; any reward amount must be agreed with us first before the amount is advertised. Please provide us with the finder's details to allow payment to be made directly to them.

We will require receipts for all advertisements placed and materials you wish to claim for along with details of the amount of reward that you advertised.

We will also need a pedigree certificate if you have one and receipt for the original purchase/donation price paid for **your pet**. If you are unable to provide proof of what you paid, we will pay the cost of a similar **pet** based on the breed, sex, and date of birth at the time you became the owner of **your pet** up to the limit shown.

## How to make a claim (cont.)

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Lost or stolen **pets** – if there is no recovery of **your pet** after 90 days, **you** will then need to provide a covering letter and provide the information detailed above.

In the happy event that **your pet** is found or returns after **we** have paid **your** claim, **you** must refund to **us** the full amount **we** paid **you** for the purchase/donation price.

## Pets abroad cover

If **you** incur costs while temporarily travelling on a trip in the EU, **you** will need to make payment yourself first.

Settlement will then be made to **you** in sterling at the current rate of exchange.

## Repeat worming treatment

**We** will need confirmation that:

- The initial worming treatment was completed and carried out in the timescale required by the Pet Travel Scheme;
- The repeat worming treatment was necessary in order to comply with the Pet Travel Scheme.

Plus, written confirmation from **your** carrier (or their handling agents) of the delay. Any claims that are not supported by all relevant receipts and confirmation of expenditure including documentary evidence that the initial worming **treatment** was administered, will not be paid.

## Loss of healthcare certificate

**We** will need receipts and proof of purchase for the replacement healthcare certificate.

## Quarantine costs

**We** will need confirmation that **your pet** was microchipped prior to **your** journey with a microchip of the type required by the travel scheme. Plus, receipts or proof of purchase or bills for any quarantine kennelling or other costs claimed for.

## How to make a claim (cont.)

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### Emergency expenses abroad

We will need receipts or proof of purchase or bills for all costs and expenses claimed for.

### Holiday cancellation/cutting a trip short

We will need cancellation invoices from **your** travel agent, tour operator or other holiday sales organisation. The invoices must show the dates and total cost of **your** holiday, confirmation that payment had been made, the date **you** decided to cancel or cut short **your** trip and details of any expenses that **you** cannot recover.

### Farewell cover

**You** will need to get details from **your vet**, at **your** own expense, showing the date and cause of death. If **your pet** was put to sleep, **you** will need to ask **your vet** to state that this was necessary to stop incurable suffering.

### Claims Conditions

These are the claims conditions that **you** will need to keep to as **your** part of this contract. If **you** do not, a claim may be rejected, or payment could be reduced. In some circumstances **your** policy might be invalid.

### Claim negotiation

We may release information about **your pet** insurance policy to any **vet** who has either treated **your pet** or is about to treat **your pet**.

In respect of Third-party legal liability claims **you** must not settle, reject or negotiate or offer to pay any claim **you** have made or intend to make under this policy without **our** written permission.

### Transferring rights

We have the right, if **we** choose, in **your** name but at **our** expense to:

Take over the defence or settlement of any claim;

Start legal action to get compensation from anyone else;

Start legal action to get back from anyone else any payments that have already been made.

**You** must help **us** to take legal action against anyone or help **us** defend any legal action if **we** ask **you** to.

### Other insurance

If **you** claim under this policy for something which is also covered by another insurance policy, **you** must provide **us** with full details of the other insurance policy. **We** will only pay **our** share of the claim.

# Complaints Procedure

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## Our commitment to customer service

At MORE THAN **we** are committed to going the extra mile for **our** customers. If **you** believe that **we** have not delivered the service **you** expected, **we** want to hear from **you** so that **we** can try to put things right. **We** take all complaints seriously and following the steps below will help **us** understand **your** concerns and give **you** a fair response.

## Our promise to you

**We** will:

- Acknowledge **your** complaint promptly;
- Investigate **your** complaint quickly and thoroughly;
- Keep **you** informed of progress;
- Do everything possible to resolve **your** complaint fairly;
- Ensure **you** are clear on how to escalate **your** complaint, if necessary.

## Step 1

If **your** complaint relates to **your** policy, then please contact the customer service number shown in **your** schedule. If **your** complaint relates to a claim, then please call the claims helpline number shown in **your** policy booklet.

**We** aim to resolve **your** concerns on an informal basis, within three business days. Where **we** have been able to, **we** will send **you** a letter confirming this. **We'll** also explain how **you** may be able to refer the matter to the Financial Ombudsman Service if **you** subsequently decide that **you** are unhappy with the outcome.

## Step 2

In the unlikely event that **we** are unable to resolve **your** concerns through **our** informal complaints process, **our** Customer Relations Team will then review the matter on behalf of **our** Chief Executive. Once **our** Customer Relations Team have reviewed **your** complaint, they will send **you** a final decision in writing within 8 weeks of the date **we** received **your** complaint.

**Our** customer relations team's contact details are as follows:

**Pet** Complaint Manager

**More Than Pet**

**Ty Admiral**

**David Street**

**Cardiff CF10 2EH**

## Complaints Procedure (cont.)

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Phone: **0330 333 5888**

Email: [customerassurance@admiral.com](mailto:customerassurance@admiral.com)

### If you are still not happy

If **you** are still unhappy after **our** Customer Relations Team's review, or **you** have not received a written offer of resolution within 8 weeks of the date **we** received **your** complaint, **you** may be eligible to refer **your** case to the Financial Ombudsman Service. The Financial Ombudsman Service is an independent body that arbitrates on complaints. They can be contacted at:

Post: Financial Ombudsman Service

Exchange Tower

Harbour Exchange

London E14 9SR

Telephone: **0800 023 4567** (free from mobile phones and landlines)

**0300 123 9123** (costs no more than calls to 01 or 02 numbers)

Email: [complaint.info@financial-ombudsman.org.uk](mailto:complaint.info@financial-ombudsman.org.uk)

Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

**You** have 6 months from the date of **our** final response to refer **your** complaints to the Financial Ombudsman Service.

This does not affect **your** right to take legal action, however, the Financial Ombudsman Service will not adjudicate on any case where litigation has commenced.

### Thank you for your feedback

**We** value **your** feedback and at the heart of **our** brand **we** remain dedicated to treating **our** customers as individuals and giving them the best possible service at all times. If **we** have fallen short of this promise, **we** apologise and aim to do everything possible to put things right.

## Complaints Procedure (cont.)

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### Your Personal Information

**Your** privacy is important to **us**, and **we** are committed to keeping it protected. **Our** privacy notice details how **we** collect, use, share, and protect **your** personal information.

It can be found by going to **our** website [www.morethan.com](http://www.morethan.com)

If **you** would like a physical or large print copy of the full notice, please request these online.

**We** obtain **your** personal information and that of any joint policy holders who are covered by **your** policy from **you** or those individuals, **your** insurance broker if **you** have one, claims handling suppliers and third parties such as Credit Reference Agencies, DVLA and Insurance related sources (e.g. Motor Insurance Database, Claims and Underwriting Exchange and fraud prevention databases).

**We** use **your** personal information for a number of different purposes, for example to:

- Manage **your** policy;
- Process claims;
- Prevent and detect fraud and financial crime;
- Develop new products and services; and
- Meet **our** legal and regulatory requirements.

**We** will always keep **your** personal information confidential, however it may be necessary to share **your** personal information with third parties where there is a valid reason to do so, for example **we** may need to share **your** information with:

- Other parties involved in a claim and their representatives;
- **Our** contractors, **partners**, and suppliers who assist **us** in the administration of **your** policy and/or **your** claim; and
- Government agencies, regulators, and fraud prevention agencies to fulfil **our** legal and regulatory obligations.

**We** will retain **your** personal information for as long as **we** have a relationship with **you**. Once **our** relationship has ended (for example, **your** policy has expired, **your** application is declined, or **you** do not go ahead with a quotation) **we** will only retain **your** personal data for as long as is necessary to satisfy any legal, accounting or reporting obligations, or as necessary to resolve disputes.

The General Data Protection Regulation (GDPR) gives **you** various rights over **your** personal information. More details of these rights can be found in **our** privacy notice.

## Complaints Procedure (cont.)

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Whatever the problem, whatever the question, **we're** here to help.

### FirstVet

**We** know how important **your pet's** health is to **you** – they're **your** friend, **your** companion and a big part of **your** family. That's why, as part of **your** policy, **we** provide FirstVet, an online service that **you** can use as often as **you** need. Lines are open 24 hours a day, 365 days a year. For more information please visit [MoreThan.com/pet-insurance/Firstvet](https://www.morethan.com/pet-insurance/Firstvet)

If **your** circumstances change and **you** need to update **your** cover or **you** have a query, just call the Customer Service Line.

Claims helpline **0333 777 7388**

If **you** need to make a claim or enquire about an existing claim, please visit **us** online:

<https://www.morethan.com/pet-insurance/make-pet-claim/>

Email **us** at [claims@morethanpetclaims.com](mailto:claims@morethanpetclaims.com)

Lines are open Monday to Friday 8am–6pm.

[morethan.com/pet](https://www.morethan.com/pet)

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