Petplan Equine

# Everything you need to know

## Your Activity Plan Equine Insurance Policy Booklet

Please read this with your Certificate of Insurance and Insurance Product Information Document (IPID) to understand your cover.

**Effective from 11th November 2025**

This booklet contains your:

- Terms and Conditions
- Privacy Notice Summary - how we use personal information

# Welcome

## Dear policyholder,

Thanks for insuring with Petplan Equine, we're delighted you and your horse are part of the Petplan family.

We hope your horse 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 your policy provides are included in this booklet as well as useful information to make claiming as straightforward as possible.

Wishing you and your horse a happy and healthy year ahead.

The Petplan Equine Team

# Contents:



**Please let us know if you'd like a copy of this booklet in large print or Braille**

Petplan Equine doesn't provide advice or any personal recommendation about the insurance products offered.

# Your Equine Insurance Policy Terms and Conditions

### Written in Plain English

**The details of your cover are explained in these Terms and Conditions. Ten sections of cover are explained in this document but please be aware that most sections are optional and may not be included in the cover you've chosen. A section is only included if it's shown on your Certificate of Insurance.**

**It's important that you check your cover and contact us as soon as possible if it's not as you expected.**

These Terms and Conditions are part of **your** insurance contract. The other parts are **your** Certificate of Insurance and **your** insurance application. To understand exactly what **your** insurance contract covers **you** must read **your** Certificate of Insurance and Insurance Product Information Document, together with these policy Terms and Conditions.

## Definitions

These definitions apply throughout the Terms and Conditions. Where **we** explain what a word means, that word appears in bold print and wherever used it has the meaning stated in this section.

**12 months:** 365 days calculated from and including the date an **injury** happened or the first **symptoms** of an **illness** were noticed.

**Activity group:** The purpose for which **your horse** is used and for which he/she is insured. The activities **your horse** is covered for are shown on **your** Certificate of Insurance.

**BEVA Guidelines for the Destruction of Horses:** The guidelines as stated within a British Equine Veterinary Association (BEVA) document named the 'BEVA Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy (1996)'. These state the criteria **your horse**'s condition must meet for a claim for his/her value to be considered following his/her death.
The full Guidelines are on page 16.

**Illness, illnesses:** Any sickness, disease, defect, abnormality and/or change from a healthy state.

**Immediate family:**
- **Your** partner, who's **your** husband, wife, civil partner, girlfriend, boyfriend or other life partner,
- **Your** or **your** partner's child, step-child or dependent, and/or
- **Your** or **your** partner's parent, step-parent or guardian.

**Injury, injuries:** Physical damage or trauma caused immediately by an accident. Not any physical damage or trauma that happens over a period of time.

**Loan:** An agreement where a person other than the owner of the horse is responsible for the horse's stabling, grazing, health and general care.

**Market value:** The price generally paid for:
- A horse of the same age, breed, gender and ability as **your horse** just before the **injury** happened or the **illness** first showed **symptoms**, or
- A horse trailer or horse-drawn vehicle of the same age, type and condition as **your horse trailer or horse-drawn vehicle** just before the theft or damage occurred.

**Maximum benefit:** The most **we**'ll pay in a section of cover as shown on **your** Certificate of Insurance.

**Personal circumstances:** Circumstances about **you**, **your** family or **your horse** that **you** have limited or no control over. Examples of **personal circumstances** are (but not limited to) a lack of transport, **your horse**'s behaviour, **your** or **your** family's working hours, **your** child-care arrangements, **your** family's other commitments etc.

**Policy year:** The time **we** provide cover as shown on **your** Certificate of Insurance. This is normally 12 months but can be less if a section of cover has been added or removed, or a horse has been cancelled from **your** policy.

**Pre-existing condition:** This is any **injury** that happened, or **illness** that showed **symptoms**, before **your horse**'s cover started.
It also includes any **injury/illness** that a) has the same diagnosis or **symptoms** as, or b) is related to/caused by, something **your horse** had before cover started. This applies even if it appears in a different part of the body, **your vet** says the issues are not linked, or **you** didn't expect to make a claim when cover began.

*"Before cover started" means before **your horse**'s policy began and before Veterinary Fees, Permanent Loss of Use, or Disposal following death cover was added*.

**Put to sleep:** Where **your horse** is humanely destroyed following the recommendation of a **vet**.

**Ride, riding:** Riding, driving, mounting and dismounting **your horse**.

**Specialist farriery:** Corrective, remedial, therapeutic and/or surgical farriery.

**Symptom(s):** Any change from a healthy state, bodily function or behaviour.

**Sum insured:** The amount shown on **your** Certificate of Insurance.

**UK:** The United Kingdom, the Isle of Man and the Channel Islands.

**Vet:** *When **your horse** is in the **UK*** - a Veterinary Surgeon who's registered with the Royal College of Veterinary Surgeons (RCVS).
*When **your horse** is in the Republic of Ireland* – a Veterinary Surgeon who's registered with The Veterinary Council of Ireland (VCI).

**Veterinary history:** This is a record of all interactions a **vet** or vet nurse has had with **your horse** and can be obtained from each **vet** or vet practice that **you**'ve consulted with about him/her.

**Veterinary treatment:** The cost of the following when required to treat **illness** and **injury**:
- Any consultation, examination, advice, diagnostic procedure, surgery and nursing carried out by a **vet**, a vet nurse or another member of the vet practice under the supervision of a **vet**, and
- Any medication legally prescribed by a **vet**.

**We, us, our:** Allianz Insurance plc.

**Your horse(s):** The horse, pony, donkey or other equine named on **your** Certificate of Insurance.

**Your horse trailer or horse-drawn vehicle:** The horse trailer or horse-drawn vehicle described on **your** Certificate of Insurance.

**Your saddlery and tack:** **Your** saddles, bridles, leathers, irons, harnesses and riding tack normally used on **your horse**.

**You, your:** The person named on **your** Certificate of Insurance.

## How your premium can change

**Your** premium is likely to increase at each policy renewal. The biggest influence on **your** renewal premium is increased veterinary costs as well as advancements in veterinary medicine. Other factors that may impact **your** premium at renewal include **your horses** claims history, age and breed. Changing **your horses** cover, **activity group**, **sum insured** and/or **your** address could also impact **your** premium.

## Renewing your policy

**Your** policy runs for 12 months providing **you** continue to pay **your** premium. Every 12 months **you** need to renew this insurance contract to continue with **your** cover. **We**'ll contact **you** before **your** renewal date with full details of **your** premium, excesses, policy cover and Terms and Conditions for the next **policy year**.

*If **you** pay by Direct Debit instalment* - when **your** policy is due for renewal **we**'ll renew it for **you** automatically. If **you** don't want to renew **you** need to let **us** know before **your** renewal date.

*If **you** pay by any other means* - if **you** want to renew **your** policy **you** need to contact **us** to renew and arrange to pay **your** premium. **You** can do this by calling **us** on 0345 072 8899.

At the renewal of **your** policy **we** can change the:

- Premium,
- Excesses **you** pay,
- Terms and Conditions of **your** policy, and/or
- The cover **we**'ll provide.

**We**'ll always tell **you** before **your** renewal date of any changes so **you** can consider if **your** policy still meets **your** needs.

**We** can also place exclusions because of **your horse**'s claims and **veterinary history**. It's important to read '*Extra exclusions that can apply to the cover for your horse*' on page 8 which explains this in more detail.

At renewal, **we** can limit or remove *Third Party Liability* and *Personal Accident* cover based on a review of **your horse**'s behaviour and the answers to **our** questions. For example (but not limited to), any aggressive tendencies shown, any incidents where **your horse** has caused injury to a person/animal or any health conditions that result in **your horse** being dangerous to **ride** and/or handle.

When **your** policy is due for renewal, **we** have the right not to offer the renewal. If this happens **we**'ll give **you** 21 days' notice in writing, either by email or letter to the address **you** gave **us**.

**Your horse's cover will change to injury only at the renewal after his/her 25th birthday**

At the renewal after **your horse**'s 25th birthday, **your** cover will automatically move to the **injury** only Veteran plan and all cover for **illness** will stop. **We**'ll remind **you** of this change in the two renewals before it happens.

## Where we'll provide cover – the geographical limits

The below table shows where **we**'ll provide cover. This table shows all sections of cover but most sections are optional and a section is only included in **your** cover if it's shown on **your** Certificate of Insurance.

| Section | Where we'll provide cover |
| --- | --- |
| **Third Party Liability** | When **your horse** or **your horse trailer/horse-drawn vehicle** is in the **UK** only |
| **Death from Illness/Injury**<br>**Disposal following death**<br>**Veterinary Fees**<br>**Personal Accident**<br>**Permanent Loss of Use** | When **your horse** is in the **UK** or the Republic of Ireland* |
| **Saddlery and Tack**<br>**Horse Trailer and Horse-Drawn Vehicle** | When the insured items are in the **UK** or the Republic of Ireland* |

* Cover in the Republic of Ireland is for a maximum of 30 days in each **policy year**. If **your horse** and/or insured items will be in the Republic of Ireland for longer than this **you** must let **us** know as soon as possible as this will affect the cover **we** provide.

# Your horse's Activity group

**You need to make sure your insurance covers all of the activities your horse takes part in.** Don't leave this until **you**'re considering a new activity, check regularly to make sure **you**'ve always got the cover **you** need. The activities **your horse** is covered for are shown on **your** Certificate of Insurance.

This is important as **your** policy doesn't cover anything that:

- Happens when **your horse** is being used for an activity that isn't covered by **your** policy,
- Is in any way related to **your horse** carrying out an activity that isn't covered by **your** policy. For example, **your horse** carried out an activity that isn't listed as covered on **your** Certificate of Insurance and is found to be lame the following morning. **We** won't consider any costs for **your horse**'s lameness if **we** believe it's related to **your horse** carrying out the activity that isn't covered.
- Happens during the transportation or warming up/ cooling down of **your horse** for an activity that's not covered by **your** policy. For example, if cross-country's listed, **your** policy provides cover when **you**'re transporting **your horse** by vehicle and warming up/ cooling down for the purpose of cross-country.

If **we** state the **injury**, **illness** or incident is related to an activity that isn't covered by **your** policy and **you** disagree, **you** can request that **we** appoint a mutually agreed independent **vet** for their opinion. If **you** ask for this, **you** agree to accept the independent opinion and **we**'ll do the same. **We**'ll pay any costs relating to this.

### The activities that we can cover

The current list of all activities that can be covered is below so **you** can see what's available and check that **you** have the cover **you** need. Groups 3-6 cover schooling **your horse** for the activities listed in the **activity group**. To be covered for schooling for an activity **you** must choose the group for that activity.

The activities **your horse** is covered for are shown on **your** Certificate of Insurance.

| Activity group | Activities covered |
|---|---|
| 1 | Breeding, horses at grass and retired horses |
| 2 | Group 1 activities plus hacking and rides up to 25 miles |
| 3 | Group 2 activities plus backing and breaking-in, flatwork and ground work, mounted games, riding and pony club activities, trec, unaffiliated showing, unaffiliated show jumping, unaffiliated dressage and vaulting |
| 4 | Group 3 activities plus affiliated showing, cross country and hunter trials, affiliated dressage below elementary, eventing – unaffiliated, BE80 and BE90, jump cross, non-competitive driving, affiliated show jumping and team chasing below 90cm |
| 5 | Group 4 activities plus competitive driving, affiliated dressage - elementary and above, endurance rides over 25 miles, eventing BE100 to Intermediate and hunting |
| 6 | Group 5 activities plus advanced eventing, horse ball, point to pointing, polo, polocrosse and team chasing 90cm and above. |

### When you can change your horse's activity group

**You** can increase or reduce **your horse**'s **activity group** at any time, by calling **us** on 0345 072 8899.

# Your horse's value

**At all times you need to insure your horse for his/ her current market value, even if you feel this isn't important for the cover you've chosen.**

It's **your** responsibility to make sure **your horse**'s **sum insured** accurately reflects his/her current value. A horse's value can change over time so make sure **you** review **yours** regularly and contact **us** if it changes. When **you** tell **us your horse**'s value has changed **we** may need **you** to explain why, such as what activities **your horse** now does that he/she didn't before.

If **your horse** dies and his/her **market value** is:

- *Lower than the **sum insured*** - **we**'ll only pay the **market value** and won't refund any premium for the difference between the **sum insured** and the amount **we** pay.
- *Higher than the **sum insured*** - **we**'ll only pay the **sum insured**.

## If your horse was unwell before your cover started – pre-existing conditions

*When **we** state 'before cover started' in this section, **we** mean both before **your horse**'s cover started and before Veterinary Fees, Permanent Loss of Use or Disposal following death cover was added to **your** insurance.*

**Your** policy doesn't cover any **pre-existing condition**. This is any **injury** that happened, or **illness** that showed **symptoms**, before **your horse**'s cover started.

It also includes any **injury**/**illness** that a) has the same diagnosis or **symptoms** as, or b) is related to/caused by, something **your horse** had before cover started.

Some examples:

- **Your horse** was diagnosed with colic before cover started, the colic is a **pre-existing condition**.
- Before cover started, **your horse** was lame and the **vet** decided to carry out some tests. In the meantime, **you** start a policy with **us**. The tests find **your horse** has arthritis. Anything related to this arthritis is classed as a **pre-existing condition** as the **symptoms** were shown before **your horse**'s policy started.

It's important to read **our** definition of '*Pre-existing condition'* on page 5 as this will be used to assess any claims **you** submit to determine if an **illness**/**injury** is pre-existing.

## Extra exclusions that can apply to the cover for your horse

**We** can place exclusions on **your** policy based on **your horse**'s individual **veterinary history** and **your** answers to **our** questions. Exclusions are specific to an individual horse and may refer to one or more health conditions, an entire part of **your horse**'s body or an incident. They show when something isn't covered for **your horse**, when it would usually be covered under **our** policy.

The Terms and Conditions combined with any specific exclusions clearly show what **your** policy doesn't cover. If any specific exclusions have been added to **your horse**'s cover, they'll be stated on **your** Certificate of Insurance and **your** policy won't cover any claim that falls under any exclusion placed.

**Exclusions can be placed:**

| | |
|---|---|
| **At the start of your policy** | **We** can place exclusions at the start of a policy for any **pre-existing conditions**.<br><br>For example, **our** policies cover **veterinary treatment** for arthritis, however if a horse has arthritis before his/her cover starts, this is a **pre-existing condition** and exclusions can be placed stating claims for arthritis and related conditions won't be covered.<br><br>Please read *'If your horse was unwell before your cover started – pre-existing conditions'* for more information about pre-existing conditions. |
| **At renewal** | • When **you** claim, and<br>• Based on the answers to **our** questions about **your horse**'s health and behaviour. **We** ask certain questions about **your horse** at renewal because the **12 month** time limit for claiming begins when **your horse** is **injured** or the first **symptoms** of an **illness** are seen. This is regardless of whether **you** claim for treatment or not. If **we** haven't received a claim for the treatment, **we** still need to be told about the **illness**/**injury** so **we** can advise **you** how this will affect **your** cover.<br><br>Any exclusions will be placed at renewal, but **we**'ll continue to assess any ongoing claims under the terms of **your** policy. This means that **you** can continue to claim for treatment up to **your maximum benefit**, or within the **12 months** after the **injury** happened or the first **symptoms** of the **illness** were noticed, whichever is reached first.<br><br>The exclusions will show the date **your** 12 month limit will be reached and **we**'ll stop covering the **injury**/**illness**. For example, if a horse starts to suffer from arthritis during cover, exclusions can be placed at the next renewal and will show the date cover for arthritis (and any related conditions) stops.<br><br>**We** can also limit or remove *Third Party Liability* and *Personal Accident* cover from renewal. Please read '*Renewing your policy'* on page 6, for more details. |

If **we** find out, that when **we** asked **you** for information (during **your** original application or at **your** renewal) **you**:

- Didn't tell **us** about something, or
- Provided inaccurate information (regardless of whether or not **you** thought it was accurate at the time)

**We** can add exclusions based on the new information **we** have. These will be added from the time they would've been placed had **we** been aware at **your** application or renewal.

**Exclusions can be temporary or permanent:**

| | |
|---|---|
| **Temporary exclusions** | If exclusions are temporary, while the exclusion remains on the policy, **we** won't cover any claim that results from an **injury**, **illness** or incident that falls under the exclusions. However, **we**'re happy to remove the exclusions if a certain criteria is met. |
| **Permanent exclusions** | If exclusions are permanent, **we**'ll never cover any claims for an **illness**, **injury** or incident that falls under the exclusions. |

**We** can tell **you** if **your** exclusions are permanent or temporary, and if temporary, what's needed to remove them. If **we** haven't explained this to **you** already, or if **you**'d like to understand more, please contact **us**.

## Symptoms of an illnesses in the first 14 days of cover

**We** won't cover any **illness** that showed **symptoms** in the first 14 days of the cover starting. This is the time at the very start of **your horse**'s first year of cover. It also applies if *Veterinary Fees, Loss of Use cover* or *Disposal following death* are added at a later point.

If **your horse** shows **symptoms** of an **illness** in this timeframe, **we**'ll never cover any costs related to that **illness**, whether treatment is needed immediately or later. **We** also won't cover **illnesses** with the same **symptoms** or diagnosis, regardless of:

- Where the **illness** appears in **your horse**'s body.
- When the **illness** develops, whether weeks, months, or years later.
- Whether **your vet** says the **illnesses** are not linked.

An example is, if **your horse** shows **symptoms** of a cataract in his/her left eye in the first 14 days of the first **policy year**, that cataract is not covered and the policy will also not cover any other cataracts that develop in either the left or right eye.

## If you want to change your cover

| | |
|---|---|
| **Adding a new section of cover/ Changing to a higher level of cover** | **You** can request changes at any time, and **we**'ll let you know if they're possible. Some changes may require additional information, such as a vetting. |
| **Removing an optional section of cover** | **Your** cover for *Death from Injury and Illness*, *Theft or Straying* and the *Lawphone Legal Advice Helpline* are included in **your** cover as standard and can't be removed. All other sections are optional and can be removed any time. If **you** remove a section, all cover will stop from that date and no further claims will be paid. |
| **Changing to a lower level of cover** | **You** can do this at any time (where a reduction is available). |
| **Changing your horse's activity group and sum insured** | **You** can do this at any time. When **you** tell **us** the value of **your horse** has changed, **we** may need **you** to explain why, such as what activities **your horse** now does that he/she didn't before. *For more details please read the sections 'Your horse's value' on page 7.* |

If **you**'d like to discuss changing **your horse**'s cover please call **us** on 0345 072 8899. Changing **your** cover will impact the price **you** pay.

## Making a claim

It's distressing when an incident happens or a much loved horse is ill or injured, so **we** do all **we** can to make the claims process as quick and easy as possible. This section tells **you** how to make a claim. Don't forget if **you** have a valid claim under the *Veterinary Fees* section **we** can usually pay the vet practice direct.

### Telling us about a claim or potential claim

If the *Third Party Liability* section is shown on **your** Certificate of Insurance and an incident happens that could lead to a claim, for example **your horse** causing injury to a third party or damaging third party property, **you** need to tell **us** as as soon as possible. **You** must tell **us** about an incident even if **you** don't believe that a claim will be made against **you**. **You** can call **our** specialist liability teams on:

- 01483 218 781 for injury to a third party.
- 01483 218 782 for damage to third party property.

The lines are open Monday to Friday, 9am to 5pm, excluding Bank Holidays.

**You** can also email: casualtyclaims@allianz.co.uk.

For any other section of cover **you** don't need to tell **us** about a potential claim or let **us** know **you**'ll be making a claim. Of course, if **you**'d like to discuss **your** claim **we**'re always happy to help.

| | |
|---|---|
| **Getting a claim form** | • Most claim forms can be downloaded from **our** website petplanequine.co.uk.<br>• Most vet practices will have a supply of Veterinary Fees claim forms.<br>• If **you**'d like **us** to send **you** a claim form please contact **us**. |
| **When to send us your claims** | **You** must send **us your** *Veterinary Fees* claims within 12 months of **your horse**'s treatment. **We** won't cover any claims received after this time. For all other claims, refer to that section of cover to understand what **we** need. |
| **Completing the claim form** | Please make sure **your** claim is completed fully by both **you**, and **your vet** (If needed). If any information is missing, this can delay **your** claim. **You** need to send any supporting documentation stated in the '*Making a claim*' part of the relevant section with **your** fully completed claim form.<br>**You**'ll need to pay any charges made for the completion of claim forms or the cost of any supporting documentation as **we** don't cover these. |
| **Claims decisions over the telephone** | **We** won't guarantee on the phone if **we**'ll pay a claim. Once **we**'ve received a fully completed claim form and all of the supporting information, **we**'ll assess **your** claim and only then will **we** be able to let **you** know if **we**'ll pay the claim. |

# Veterinary Fees

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*
This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance**.**

## What we'll pay

The cost of **veterinary treatment your horse** receives during the **policy year** to treat **injury** and **illness**.

## How long we'll cover each injury and illness

**Your** cover has two limits:

- A *time-limit* for how long **you** can claim for each **injury** or **illness**, and
- A *monetary limit* for how much **we**'ll pay for each **injury** or **illness** (this is called the **maximum benefit**).

**We**'ll keep paying for an **injury** or **illness** until one of these limits has been reached.

| | |
|---|---|
| **The time-limit** | **Your** policy covers the treatment of each **illness** and **injury** for **12 months**. The **12 months** start when the **injury** happens or when the first **symptoms** of the **illness** are noticed. After this time all cover for that **injury** or **illness** will stop. |
| **The monetary limit** | **Your** policy provides a maximum amount of money for **you** to claim for each separate **injury** and **illness**. This is called the **maximum benefit**. For each **injury** and **illness** **you** have one **maximum benefit** and the amount **you** can claim for each **injury** and **illness** is shown on **your** Certificate of Insurance. |

To fully understand how **we**'ll apply the *time-limit* and *monetary limit*, **you** need to read the below parts of this section, on page 12:

- *Your 12 month time-limit and the maximum benefit*
- *After your policy limits have been reached*
- *The maximum benefit that we'll pay*
- *The cost of medicines and materials*

## Complementary treatments

The Veterinary Fees section also covers the cost of the following complementary treatments and the amount **we** pay for these will be taken out of **your** *Veterinary Fees* **maximum benefit**.

| | | |
|---|---|---|
| Acupuncture | Chiropractic manipulation | Herbal medicine |
| Homeopathy | Nutraceuticals | Physiotherapy |
| Specialist farriery | Hydrotherapy | Osteopathy |

**We** don't cover any other complementary/alternative treatments.

## Who’s covered to carry out your horse’s treatment?

This table below explains who needs to carry out the treatments covered by **your** policy. The treatment will only be covered if this criteria is met. Where it’s noted someone other than a **vet** can treat **your horse**, **we** need confirmation a **vet** referred **your horse** to that professional.

| | |
|---|---|
| Veterinary treatment | A **vet**, a vet nurse or another member of a vet practice under the supervision of a **vet**. |
| Acupuncture, Nutraceuticals, Homeopathy | A **vet**. |
| Dental treatment | A **vet** or a qualified equine dentist. |
| Herbal medicine | This must be prescribed by a **vet** or member of a vet practice. |
| Specialist farriery | A farrier registered with the FRC (Farriers Registration Council). |
| Physiotherapy | A **vet** or someone who holds a **UK** recognised qualification in their subject. |
| Hydrotherapy | A **vet** or a **vet** recommended therapist. |
| Chiropractic manipulation | A **vet** or a qualified animal chiropractor who is a member of the General Chiropractic Council (GCC). |
| Osteopathy | A **vet** or a qualified animal osteopath who is a member of the General Osteopathic Council (GOsC). |

## What you pay

**Your excess –** This is the amount **you** pay when **you** claim and this is deducted from **your** claim settlement(s). The excess **you** pay under this section is explained on **your** Certificate of Insurance.

## Making a claim

**You** must send **us your** claim no later than 12 months after **your horse** received treatment. **We** won’t cover any claims received after this time.

**We**’ll need:

- A fully completed claim form.
- The invoices from the vet practice or professional that show what **you**’re claiming for.
- *If it’s the first claim **you**’re making for **your horse*** - his/her full **veterinary history**.
- *If it’s a claim for a new condition* - the **veterinary history** for the treatment **you**’re claiming for. There are claims for certain conditions where **we**’ll also need this, but **we**’ll let **you** know in these cases once **we**’ve received **your** claim.
- *If it’s a continuation claim* - the **veterinary history** for the treatment being claimed.
- If **you**’re claiming for items that haven’t been purchased from a vet practice:
  - The invoices showing the items **you**’re claiming for.
  - For prescription only medications – a prescription medication claim form. If it’s the first claim **you**’re making for the medication, **we** need a copy of the prescription.
  - For anything else - **your vet** needs to tell **us** that the items were needed to treat the **illness**/**injury** being claimed and the quantities required.

## We won’t pay for:

1. The cost of any treatment to prevent **injury** or **illness**.
2. Stabling, bedding, grazing, feeding or any changes in the way **you** look after **your horse**.
3. Treatment, diagnostics or procedures **you** choose to have carried out, that:
   - The **vet** confirms are not necessary, or
   - Are not related to an **injury** or **illness**.

   **We** also won’t pay for any complications that arise from these treatments/procedures.
4. Treatment needed because of a vice or from **your horse**’s behaviour.
5. Transporting **your horse** to or from his/her place of treatment.
6. A post-mortem examination and/or report.
7. Treatment that’s part of a clinical trial. For the purpose of this insurance, a clinical trial is a research project testing new treatment.

**Your 12 month time-limit and the maximum benefit**
Please read *'How long we'll cover each injury and illness'* in this section before reading the wording below.

| | |
|---|---|
| **For injuries** | The **12 months** cover and the **maximum benefit** start from the date the **injury** happened. If **your horse** has more than one **injury** and they're:<br>• Diagnosed as the same **injury**, or<br>• Happen at the same time, or<br>• Related or caused by one another,<br>Then a single **maximum benefit** and 12 month period apply to all **injuries**, starting from the date of the first **injury**.<br>For example, if a horse is hit by a car and has multiple **injuries**, the **12 months** cover for all **injuries** starts from the date of the accident, and only one **maximum benefit** applies. |
| **For illnesses** | The **12 months** cover and the **maximum benefit** start from the date the **illness** or **symptoms** were first noticed. If **your horse** had the same **symptoms/illness** in the past, if they're:<br>• Diagnosed as the same **illness**, or<br>• Related or caused by one another,<br>Then a single **maximum benefit** and **12 months** period applies for all of the **symptoms/illnesses**.<br>The **12 months** cover and the **maximum benefit** starts from the very first time the **symptoms/illness** were seen, regardless of whether:<br>• **Your vet** says the **illnesses** are not linked, or<br>• **Symptoms** show in the same or different parts of **your horse**'s body.<br>For example, if a horse is lame and diagnosed with kissing spines, and later develops arthritis in the spine as a result, the **12 months** cover for both conditions starts from the date the lameness was first observed, with **one maximum** benefit applying to both kissing spines and arthritis. |

## After your policy limits have been reached
Please read *'How long we'll cover each injury and illness'* in this section before reading the wording below.
If **we**'ve paid for either the cost of treatment for **12 months** or the **maximum benefit we** won't pay for any more treatment for that **injury** or **illness**. **We** also won't pay for any **injury** or **illness** that are:
- Diagnosed as the same **injury/illness**, or
- Related or caused by the **injury/illness**.

This applies in all cases regardless of whether:
- **Your vet** says the **illnesses** are not linked.
- **Symptoms** show in the same or different parts of **your horse**'s body.

For example, if a horse has navicular syndrome in the left fore foot, after **we**'ve paid for treatment for either **12 months** or the **maximum benefit**, **we** won't cover any treatment for navicular syndrome in any of the horse's feet.

## The maximum benefit that we'll pay
Please read *'How long we'll cover each injury and illness'* in this section before reading the wording below.

The most **we**'ll pay for each **illness** and **injury** is the **maximum benefit** that applies on the date the **injury** happened or the date the **symptoms** of the **illness** were first noticed.

## If your horse was unwell before your cover started
*When **we** state 'before cover started', **we** mean both before **your horse**'s cover started and before Veterinary Fees cover was added to **your** insurance.*

**Your** policy doesn't cover any **pre-existing condition**. This is any **injury** that happened, or **illness** that showed **symptoms**, before **your horse**'s cover started. It also includes any **injury/illness** that a) has the same diagnosis or **symptoms** as, or b) is related to/caused by, something **your horse** had before cover started.

It's important to read '*If your horse was unwell before your cover started – pre-existing conditions*' on page 8 and **our** definition of '*Pre-existing condition*' on page 5 as these will be used to assess any claims **you** submit to determine if a condition is pre-existing.

## Symptoms of an illness in the first 14 days of cover
**We** won't cover any **illness** that showed **symptoms** in the first 14 days of the cover starting. This is the time at the very start of **your horse**'s first year of cover. It also applies if *Veterinary Fees* cover is added at a later point.

If **your horse** shows **symptoms** of an **illness** in this timeframe, **we**'ll never cover any costs related to that **illness**, whether treatment is needed immediately or later. **We** also won't cover **illnesses** with the same **symptoms** or diagnosis, regardless of:
- Where the **illness** appears in **your horse**'s body.
- When the **illness** develops, whether weeks, months, or years later.
- Whether **your vet** says the **illnesses** are not linked.

It's important to read '*Symptoms of an illness in the first 14 days of cover*' on page 9 for more information.

## The cost of medicines and materials
**We**'ll cover the cost of any medicines or materials that'll be used during the **12 month** time-limit. This is **12 months** after the date the **injury** happened or the **illness** first showed **symptoms**. Any medicines/materials used after this time are not covered by **your** policy.

### When we cover dental treatment

- **We**'ll cover the treatment for a dental **injury** or **illness** as long as:
  - **Your horse**'s teeth were checked by a **vet** or qualified equine dentist in the 12 months before the first **symptoms** of the **injury** or **illness** were seen, and
  - Any treatment they recommend during the check takes place within the timescales they recommended.
- **We** don't cover the cost of teeth rasping or removing wolf teeth. However, if **your horse** suffers from complications after the procedure, **we**'ll cover the cost of treatment needed to deal with the complications.

### When we cover the cost of castrating your horse

**We** cover the cost of castrating **your horse** if the procedure is carried out when he's suffering from an **injury**/**illness** and castration is an essential treatment. **We** won't pay castration costs for any other reason. Regardless of why **your horse** is castrated, if he suffers from complications during or after the procedure, **we**'ll cover the cost of treatment needed to deal with the complications.

### Out of hours treatment

**We**'ll cover the cost of **your horse** being treated outside of the vet practice normal opening hours if **your vet** confirms **your horse** needed urgent veterinary care. **We** won't cover any costs if this was needed because of **your personal circumstances**. **Your vet** will need to confirm this when **you** claim. If not, **we**'ll only cover the charges that would've applied during normal opening hours.

### When your horse is staying at a vet practice or hospital

If **your horse** stays at a vet practice or hospital, **we**'ll cover the cost of veterinary and nursing care. **We** won't cover any charges made by the practice/hospital for livery, stabling, grazing, bedding and feeding.

### The costs relating to putting your horse to sleep

**We** won't cover the cost of:

- Putting **your horse** to sleep, including any **vet** consultations/visits or prescribed medications needed to carry out the procedure.
- Having **your horse** cremated, buried or any other form of disposal. This cover is provided in the optional *'Disposal following death'* section, which is only included in **your horse**'s cover if it's shown on **your** Certificate of Insurance.

### The cost of procedures you can carry out

There can be times when a **vet** or a professional asks **you** to provide treatment on **your horse**. For example, carrying out controlled exercise and/or physiotherapy, giving medication, using a horse walker/treadmill etc.
If another person or professional does this for **you** (regardless of **your personal circumstances**), **we** won't cover their charges.

### The cost to vaccinate your horse

**We** won't cover the cost of vaccinations; however, if **your horse** suffers complications during, or after, a vaccination, **we**'ll cover the cost of treatment needed to deal with the complications. *This doesn't apply if **your horse** must be vaccinated against an **illness** as part of a compulsory mass vaccination programme, for details of this please see the General Exclusions section.*

### Pregnancy and giving birth

If **your horse** suffers from a complication during pregnancy or while giving birth, **we**'ll cover the cost of the treatment needed to deal with the complications. **We** won't cover the cost of any other treatment related to abortion, pregnancy, foaling or fertility.

### The cost of equipment or machinery

**We** won't cover the cost of buying or hiring any type of equipment or machinery. These costs are never covered by the policy and this is regardless of whether:

- A **vet** advises the item is required as part of treatment for an **illness** or **injury**, or
- The item is required due to **your personal circumstances**.

Examples of equipment and machinery are tens machines, equiband, leg boots etc.

### The cost of sedation

**We**'ll cover the cost of sedating **your horse** for the following reasons:

- **Your horse** needs to be sedated to safely travel to his/her place of treatment and not sedating him/her is likely to worsen the **illness** or **injury**.
- The sedation is needed for the **vet** to safely carry out the treatment.
- The **vet** has recommended box rest as part of treatment for the **illness** or **injury** and **your horse** needs sedation for this.
- Where sedation is needed to safely turn **your horse** out following a period of box rest. For this purpose, **we**'ll cover the cost of sedation for up to 7 days.

**Your vet** needs to confirm which of the above applies when **you** claim. **We** won't cover the cost of sedating **your horse** for any other reason.

### Specialist farriery

**We**'ll pay for **specialist farriery** when needed to treat an **illness** or **injury**. The amount **you** normally pay for shoeing and/or the care of **your horse**'s feet will be deducted from the amount **we** pay.

### The cost of transplant surgery

**We** cover the cost of stem cell therapy. Any other type of transplant surgery (for example, an organ transplant etc) isn't covered by the policy. **We** don't cover any costs related in any way to any other transplant surgery (including any pre and post-operative care).

### Your horse's activity group

**You** need to make sure **your** insurance covers all of the activities **your horse** takes part in. **Your** policy doesn't cover any **illness** or **injury** that:

- Happens when **your horse** is taking part in, or
- Is in any way related to **your horse** taking part in,

An activity that isn't shown as covered on **your** Certificate of Insurance.
**You** can find more information about how **your horse**'s **activity group** affects **your** cover, in *'Your horse's activity group'* on page 7.

### Administration fees and other charges

**We** don't cover the cost of any administration fees or charges. This includes:

- Fees for the completion of claim forms or claim submission.
- Fees for supplying supporting documentation.
- Late payment fees or interest.
- Any amount for postage and packaging.

**We**'ll deduct these from the claim settlement.

### Another vet reviewing your horse's details

**We** can refer **your horse**'s **veterinary history** to a **vet** that **we** choose. If **we** request, **you** must arrange for **your horse** to be examined by this **vet**. **We**'ll pay any costs for this.

### Dealing with your vet practice

- If a vet practice asks **us** for information about **your** insurance cover, **we**'ll only give this to them if they:
  - Recently treated **your horse**, or
  - Have spoken with **you** about treating **your horse** in the near future.

In these cases, **we**'ll only tell the vet practice if **you** have an active insurance policy with **us** for **your horse**, and if **you** do – the date cover started, the type of cover in place, the monetary limits of **your** policy, the excesses **you** pay and if any exclusions have been placed on **your** cover.

- **We** can usually pay the vet practice directly; however, if **you** ask **us** to do this, **we** can decline **your** request.

**Your horse's cover will change to injury only at the renewal after his/her 25th birthday**

**Your** cover will automatically move to the injury only Veteran plan and all cover for **illness** will stop. **We**'ll remind **you** of this change in the two renewals before it happens.

# Death from Injury or Illness

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*

## What we'll pay

The **sum insured** shown on **your horse**'s Certificate of Insurance (or his/her **market value**, whichever is less) if, during the **policy year**, he/she dies or is **put to sleep** due to an **injury/illness**.

### Important information if your horse is put to sleep

If **your horse** is **put to sleep**, cover under this section is only in force if his/her condition has met the **BEVA Guidelines for the Destruction of Horses**. These state both of the following requirements must be met:

1 The insured horse must have suffered from an **illness/injury** that was so severe that immediate euthanasia was needed to relieve his/her incurable and excessive pain, and

2 No other options of treatment were available at that time.

To understand more about this, it's important that **you** also read '*Your horse's condition must have met the BEVA Guidelines for the Destruction of Horse's*' on page 16 and the full BEVA guidelines at the end of this section.

If **you** want to know if **your** claim will be considered before **your horse** is **put to sleep we** strongly recommend **you** ask **your vet** if **your horse**'s condition meets the criteria to understand if **you**'re able to submit a claim under this insurance.

**We** understand that as a horse owner **you** may choose to put **your horse** to sleep knowing that the BEVA criteria isn't met (and therefore a claim can't be considered under **your** insurance) because it's the correct decision for both **your horse** and **you.** To help with **your** understanding of this criteria, **we**'ve provided two examples of when **we** won't consider a claim for **your horse**'s death.

| | |
|---|---|
| **A horse becomes lame and is diagnosed with severe degenerative joint disease.** | The vet advises that some treatment is available. However, after discussing the horse's individual situation, the owner and vet decide the right approach for this horse is to put him/her to sleep to stop the suffering. As treatment is available, the horse's condition hasn't met the **BEVA Guidelines for the Destruction of Horses** and therefore there's no cover under this section. |
| **A horse becomes lame and is diagnosed with a ruptured tendon.** | The vet advises there are no further treatment options available, and the horse will not return to ridden work, but after a period of box rest can live a retired life. After discussing the horse's individual situation, the owner and vet decide the right approach for this horse is to put him/her to sleep. As immediate euthanasia was not required to relieve incurable and excessive pain, the horse's condition hasn't met the **BEVA Guidelines for the Destruction of Horses** and therefore there's no cover under this section. |

## Making a claim

**You** must send **us your** claim no later than 12 months after **your horse**'s death. **We** won't cover any claims received after this time.

**We**'ll need:

- A fully completed claim form.
- **Your horse**'s full **veterinary history**.
- If **your horse** was **put to sleep** - confirmation from **your vet** (in the **veterinary history** or a report) that **your horse**'s condition has met the **BEVA Guidelines for the Destruction of Horses**.
- The post-mortem report (if required) - **we** explain when **we** require a post-mortem examination to be carried out on page 16.
- If the **veterinary history** confirms the death of **your horse**, **we** don't need any additional information from **you**. If it doesn't, please contact **us** and **we** can advise depending on the circumstances.

## We won't pay any amount:

1. If **your horse** is **put to sleep** and his/her condition didn't meet the **BEVA Guidelines for the Destruction of Horses**.
2. If **your horse**'s death is caused by a **pre-existing condition**. Please read *'If your horse was unwell before your cover started – pre-existing conditions*' on page 8 and **our** definition of '*Pre-existing condition*' on page 5 for further information.
3. If **your horse**'s death is due to an **illness** that has **symptoms** in first 14 days of cover. Please read *'Illnesses that showed symptoms in the first 14 days of cover'* on page 9.
4. Towards the cost of having **your horse put to sleep**.
5. For having **your horse** cremated, buried or any other form of disposal. This cover is provided in the optional *'Disposal following death'* section, which is only included in **your horse**'s cover if it's shown on **your** Certificate of Insurance.
6. If **your horse**'s death is deliberately caused by **you**, a member of **your immediate family** or the person looking after him/her.
7. If **your horse**'s death is caused by a vice or from a behavioural illness or problem.
8. For a post-mortem examination and/or report.
9. If **your horse**'s death is caused by medication that wasn't given by a **vet** or under the direction of a **vet**.
10. For a mare's unborn foal, embryo or foetus.

### Your horse's condition must have met the BEVA Guidelines for the Destruction of Horses

If **your horse** is **put to sleep**, to claim under this policy his/her condition must have met the **BEVA Guidelines for the Destruction of Horses**. These can be found on page 16.

If **you** want to know if **your** claim will be considered before **your horse** is **put to sleep**, **we** strongly recommend (unless **your horse** needs to be **put to sleep** immediately) **you** ask **your vet** if **your horse**'s condition meets the criteria to understand if **you**'re able to submit a claim under this insurance.

If **your vet** and **our vet** don't agree that **your horse**'s condition meets/met the **BEVA Guidelines for the Destruction of Horses**, **you** can request that **we** appoint an independent **vet**, mutually agreed upon for their opinion. If **you** ask for this, **you** agree to accept the independent opinion and **we**'ll do the same. **We**'ll pay any costs relating to this.

### Changes to the BEVA Guidelines for the Destruction of Horses

If the **BEVA Guidelines for the Destruction of Horses** change, the 1996 version applies to any claim. **We**'ll notify **you** at renewal if the **BEVA Guidelines for the Destruction of Horses** have changed and this impacts **your** cover.

### Your 12 month time-limit

**Your** policy has a time limit for how long **you** can claim; this is **12 months** for each **illness** and **injury**. After this time all cover for that **injury** or **illness** will stop. This means that this section will only provide cover if **your horse** dies or is **put to sleep** within this **12 month** time limit.

| | |
|---|---|
| **For injuries** | The **12 months** cover starts from the date the **injury** happened. If **your horse** has more than one **injury** and they're:<br>• Diagnosed as the same **injury**,<br>• Happen at the same time, or<br>• Related or caused by one another,<br>Then a single **12 months** period applies to all **injuries**, starting from the date of the first **injury**. |
| **For illnesses** | The **12 months** cover starts from the date the **illness** or **symptoms** were first noticed.<br>If **your horse** had the same **symptoms/illness** in the past, if they're:<br>• Diagnosed as the same **illness**, or<br>• Related or caused by one another,<br>The **12 months** cover starts from the very first time the **symptoms/illness** were seen regardless of whether:<br>• **Your vet** says the **illnesses** are not linked, or<br>• **Symptoms** show in the same or different parts of **your horse**'s body. |

### Contacting us before your horse is put to sleep

**We** understand how difficult this time can be and **we** don't need **you** to contact **us** before **your horse** is **put to sleep**. If **you**'d like to know if **your** claim will be paid before **your horse** is **put to sleep**, please contact **us**. As **your horse**'s condition must meet the **BEVA Guidelines for the Destruction of Horses** to have a valid claim, **we** (or **our vet**), will need to speak with **your vet** before **we** can let **you** know if **your** claim will be paid.

### When we require a post-mortem examination

**We** understand how difficult this time can be. **We** only need a post-mortem examination and report if:

- **Your horse** dies, or is **put to sleep**, in the first 14 days of cover and there have been no investigations carried out or diagnosis made, to confirm that **your horse**'s death was caused by an **injury**.
- **You**, or **your vet**, has contacted **us** to understand if **you**'re able to submit a claim and **our vet** has advised that a post-mortem examination is necessary.

**You** must pay any costs for this. If **you**'re unsure whether **we** require a post-mortem examination, please call **us**. **Our** details are in the section titled '*How to contact us*' at the back of this booklet.

### Your horse's activity group

**You** need to make sure **your** insurance covers all of the activities **your horse** takes part in. **Your** policy doesn't cover any **illness** or **injury** that:

- Happens when **your horse** is taking part in, or
- Is in any way related to **your horse** taking part in,

An activity that isn't shown as covered on **your** Certificate of Insurance.

**You** can find more information about how **your horse**'s **activity group** affects **your** cover, in *'Your horse's activity group'* on page 7.

### Another vet reviewing your horse's details

**We** can refer **your horse**'s details and **veterinary history** to a **vet** that **we** choose and if **we** request, **you** must arrange for **your horse** to be examined by this **vet**. **We**'ll pay the costs for this.

### Cover following a claim

If **we** pay a claim under this section, **we**'ll automatically cancel **your horse** from the policy from the day after his/her death. **We**'ll refund any premium **you**'ve paid for cover after this time.

**Your horse's cover will change to injury only at the renewal after his/her 25th birthday**

**Your** cover will automatically move to the **injury** only Veteran plan and all cover for **illness** will stop.
**We**'ll remind **you** of this change in the two renewals before it happens.

## BEVA Guidelines for the Destruction of Horses Under an All Risks of Mortality Insurance Policy (1996)

This section states the wording as it appears in the British Equine Veterinary Association (BEVA) document, the BEVA Guidelines for the Destruction of Horses Under All Risks Mortality Insurance Policy. *Source: BEVA.* If **you** need any more information please visit the BEVA website – www.beva.org.uk

1. *BEVA considers that the decision to advise an owner to destroy a horse on humane grounds must be the responsibility of the attending veterinary surgeon, based on his or her assessment of the clinical signs at the time of examination, regardless of whether or not the horse is insured. The veterinary surgeon's primary responsibility is to ensure the welfare of the horse.*
2. *BEVA recognises that there may be occasions when the attending veterinary surgeon will advise euthanasia but that such a decision may not necessarily lead to a successful insurance claim. It is important that all parties are aware of this potential conflict of interests before a horse is destroyed. It is the owner's responsibility to ensure compliance with any policy contract with an insurer.*
3. *As a guide, BEVA considers that an affected horse will need to meet the following requirements to satisfy a claim under a mortality insurance policy: "That the insured horse sustains an injury or manifests an illness or disease that is so severe as to warrant immediate destruction to relieve incurable and excessive pain and that no other options of treatment are available to that horse at that time."*

   *If immediate destruction cannot be justified then the attending veterinary surgeon should provide effective first aid treatment before:*

   *(i) Requesting that the insurance company be contacted or, failing that,*

   *(ii) Arranging for a second opinion from another veterinary surgeon.*
4. *Insurance companies frequently require some form of examination after death. Owners should be made aware that it is in their best interests to retain the carcass, or appropriate parts, for this purpose. The horse should be positively identified.*
5. *It should be stressed that in the event of a horse being destroyed on grounds which justify a claim it is still the responsibility of the insured to prove that all policy terms and conditions are complied with and were current at the time of the incident.*

## Disposal following death

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*

This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance.

### What we'll pay

Up to £400 to remove and dispose of **your horse**'s body if, during the **policy year**, he/she dies or is **put to sleep** due to **injury**/**illness** that's covered under the *Veterinary Fees* section.

### Making a claim

**You** must send **us your** claim no later than 12 months after **your horse**'s death. **We** won't cover any claims received after this time.

**We**'ll need:

- A fully completed claim form.
- The disposal receipt.

**Your horse's cover will change to injury only at the renewal after his/her 25th birthday**

**Your** cover will automatically move to the **injury** only Veteran plan and all cover for **illness** will stop. **We**'ll remind **you** of this change in the two renewals before it happens.

## Lawphone Legal Advice Helpline

### What we'll provide

Access to Lawphone that provides advice, 24 hours a day, 365 days a year, on any personal legal matter. The advice **you** get from Lawphone will always be according to the laws of Great Britain and Northern Ireland.

### What we won't provide

Legal advice for business issues.

### How to get advice

The contact telephone number for Lawphone is 0344 209 0516. When **you** call Lawphone, please quote the policy reference number 36945. **You**'ll then be asked for a brief summary of the problem and these details will be passed on to an advisor who will return **your** call.

**We** may record the calls for **your** and **our** mutual protection and **our** training purposes.

## Third Party Liability

*Cover in this section applies when **your horse** or **your horse trailer or horse drawn vehicle** is in the **UK** only.*

The Third Party Liability section is an optional benefit that's only included in **your** cover if it's shown on **your** Certificate of Insurance.

In this section:

- '**You'** and '**your'** mean **you** or any person **riding** or handling **your horse** with **your** permission.
- **'Your horse trailer or horse drawn vehicle'** means the horse trailer or horse-drawn vehicle described on **your** Certificate of Insurance.

### What we'll pay

If property is damaged or someone is killed, injured or falls ill, as a result of an incident involving **your horse** or **your horse trailer or horse-drawn vehicle** during the **policy year** and **you**'re legally responsible, **we**'ll pay:

- Compensation and claimant's costs and expenses, and
- Legal costs and expenses for defending a claim against **you**.

*For incidents involving **your horse**:* The **maximum benefit we**'ll pay for each incident is shown on **your** Certificate of Insurance 'Horse details'. If **you** have more than one horse insured under this policy please read 'Where there's more than one horse insured under the policy' on page 19.
*For incidents involving **your horse trailer or horse-drawn vehicle**:* The **maximum benefit we**'ll pay for each incident is shown on **your** Certificate of Insurance 'Trailer details'.

### What you pay

**Your excess** – this is the amount **you** pay for each incident where property has been damaged. The excess is £250 for each incident.

### There's no cover in this section when you're paying a business or professional for a service

This section doesn't provide any cover if an incident or injury happens when a service is being carried out by a business or professional and **you**'re paying for it. For example, when a professional is being paid to clip or exercise **your horse**, when someone's caring for **your horse** as part of a livery service or a transporter is being paid to move **your horse**. To make sure **you**'re protected **you** may want to check that the business or professional has the relevant insurance cover in place (which covers **your horse**'s actions). It's also important that **you** tell them if **your horse** has any behavioural problems or requires any special handling so they're able to handle **your horse** appropriately.

### There's no cover in this section when your horse, your horse trailer or your horse-drawn vehicle is being used for a business activity

This section doesn't provide any cover when **your horse** or **your horse trailer or horse-drawn vehicle** is being used for any business activity, either by **you** or any other person or business. Examples of business activities are **your horse** being used by a riding school/riding establishment for activities such as lessons, pony handling/grooming or pony parties or someone paying to use **your horse trailer or horse-drawn vehicle**. To make sure **you**'re protected **you** may want to check that the person (which may be yourself) or business responsible for the business activity has the relevant insurance cover in place.

### Other people riding your horse

If **you**'ve given someone permission to **ride**/handle **your horse**, this section also covers third party incidents involving **your horse** that they're legally responsible for. Under this section, the person **riding**/handling **your horse** won't be covered for their own injuries, illness or death. **You** need to tell **us** if anyone who rides/handles **your horse** has a health condition or is aged 75 and over. This can affect the cover **we** provide.

For more details please read '*When we may need information from you*' in this section.

### Useful information if an incident occurs

**We** understand that if **you** or **your horse** are in an incident it can be a difficult experience. There are steps **you** can take to help **us** with any claim, including:

- Note the time, date and location
- In as much detail as **you** can remember, note down the circumstances and what happened
- Take down details of the property damaged or the injuries that occurred
- Obtain third party contact and insurance details
- Take pictures
- Obtain the details of any witnesses

### You need to follow the below, or we can refuse the claim

**Don't admit responsibility and/or negotiate**:
**You**, or anyone acting on **your** behalf, must not admit responsibility, agree to pay any amount (including any third party vet bills or expenses) or negotiate with any person following an incident.

**Contact our specialist liability team as soon as possible if**:

– An incident happens that could lead to a claim under this section. For example (but not limited to) **your horse** causing injury to a third party or damaging third party property. **You** must tell **us** about an incident even if **you** don't believe that a claim, will be made against **you**.

– **You**, or any other person, are advised of any prosecution, inquest or enquiry that could lead to a claim under this section.

Call 01483 218 781 for injury to a third party and 01483 218 782 for damage to third party property. The lines are open Monday to Friday, 9am to 5pm, excluding Bank Holidays. **You** can also email casualtyclaims@allianz.co.uk.

**You**'ll need to give **us** a description of the circumstances as well as the details of any other insurance cover that may apply, for example, **your** home and contents insurance.

**Report the incident to any other insurance company under which you're entitled to claim**.
**You** must tell **us** their name and address and **your** policy and claim number with them. **We** won't make any payment for any claim that results from an incident covered by any other insurance.

**Immediately send us any writ, summons or legal documents you receive**.
**You** or any other person must not respond to any of these documents.

**Assist us with your claim**

- Give **us** any information connected with the claim **we** ask for (including details of **your horse**'s history)
- 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.
- Allow **us** to take charge of **your** claim and to prosecute in **your** name for **our** benefit.

### We won’t pay any compensation, costs and expenses:

1. For defending **you** that **we** have not agreed beforehand.
2. Resulting from an incident that involves the profession, occupation or business of anyone who’s employed by **you** or anyone who works for **you** in any way (paid or not).
3. If **you**’re legally responsible only because of a contract **you**’ve entered into.
4. For the death, injury or illness of **you**, an **immediate family** member or anyone who lives with **you** or is employed by **you**.
5. If the property damaged belongs to, or is the responsibility of, **you**, any person who lives with **you**, a member of **your immediate family** or any person who’s employed by **you**.
6. That result from an incident if **you** have not followed instructions or advice given to **you** by a **vet** or a qualified behaviourist about **your horse**.
7. If the incident happens in an area or place where horses are specifically prohibited, unless **your horse** escapes and enters the area outside of **your** control.
8. For an incident that occurs when **your horse** is tethered or when **your horse** had escaped from, or has been purposefully released from, a tether.
9. If all or part of a fence, a wall, a gate or an agricultural crop is damaged while **you**’re **riding** or handling **your horse**.
10. For a horse-drawn vehicle on the public highway if **your horse** is not drawing it.
11. If the incident or injury that takes place is a result of **your** profession, **your** occupation or while **you**’re working for someone, whether **you**’re paid or not.
12. If the incident results from a stallion serving or attempting to serve a mare or from any activity involving artificial insemination.
13. For any disease **your horse** transmits to any other animal.
14. If **you**’re responsible under the laws of any country, other than the **UK** or members of the European Union.
15. If **you**’re responsible for air, water or soil pollution, unless it can be proven that the pollution took place immediately after and as a result of an incident caused by **your horse** or **your horse trailer or horse-drawn vehicle**.

### We can remove cover for Third Party Liability at renewal

At renewal **we** can limit or remove this cover based on a review of **your horse**’s behaviour and the answers to our questions. For example, any aggressive tendencies shown, any incidents where **your horse** has caused **injury** to a person/another animal or any health conditions that can affect how **your horse** behaves. If there‘s a change to **your** cover, **we**’ll contact **you** explaining the change **we**’ve made.

At each renewal, **we** ask **you** about **your horse**’s behaviour and any heath conditions **you** have that may impact **your** ability to **ride** and handle a horse. The things **you** need to tell **us** about are detailed in **your** Certificate of Insurance. **You** must give **us** full and accurate information, if **you** don’t it can affect **your horse**’s cover and whether **we** pay claims.

### Where there’s more than one horse insured under the policy:

If more than one of the horses insured under this policy are involved in, or contribute towards, an incident only one **maximum benefit** will apply to the incident for all of the horses. This means that if:

- The horses involved all have the same **maximum benefit**; the most **we**’ll pay for the incident is that **maximum benefit**. For example, if all of the horses insured each have a **maximum benefit** of £1million, **we**’ll pay no more than £1million for the incident.
- The horses involved have different **maximum benefits**; the most **we**’ll pay for the incident is the highest of the **maximum benefits**. For example if one horse has a **maximum benefit** of £1million, and another of £3million, **we**’ll pay no more than £3million for the incident.

### Your horse’s activity group

**You** need to make sure **your** insurance covers all of the activities **your horse** takes part in. **Your** policy doesn’t cover any incident that:

- Happens when **your horse** is taking part in, or
- Is in any way related to **your horse** taking part in,

An activity that isn’t shown as covered on **your** Certificate of Insurance.

**You** can find more information about how **your horse**’s **activity group** affects **your** cover, in *‘Your horse’s activity group’* on page 7.

### When we may need information from you

Before **we** provide cover for Third Party Liability, **we** can ask for information to assess if **we**’re able to provide the cover requested. This may include confirmation of a driving licence or a letter from **your** doctor following examination. **We** can do this:

- If **you** have a health condition.
- At the renewal following **your** 75th birthday and every three years from then on.

If **we**’ve asked for information to provide Third Party Liability cover, **we** won’t be able to cover **you** for this while **you**’re riding or handing **your horse** until **we** receive it. **We**’ll contact **you** before **your** renewal to let **you** know when this is needed.

If a charge is made for this, **you** must pay the charge.

### Keeping your policy running after the incident that has led to a claim

**You** can keep **your** policy running for as long as **you** like after the incident that has led to a claim. If **you** decide to cancel **your** policy, **we**’ll continue to pay up to the **maximum benefit** for the incident that occurred while **your** cover for Third Party Liability was in place.

### Incidents involving your horse trailer while it’s attached to (or becomes detached from) a vehicle

This section doesn’t cover any incident that happens while **your** horse trailer is attached to (or becomes detached from) a vehicle. For example while **your** trailer is being towed by **your** car. It’s **your** responsibility to make sure **your** horse trailer has the appropriate insurance to cover Third Party Liability while it’s attached to any vehicle that needs Third Party cover under any road traffic law.

## Permanent Loss of Use

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*

This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance. It's available for horses with a sum insured of £2,000 or over and who are in Activity group 3 or higher.

### What we'll pay

If, during the **policy year**, **your horse** first shows **symptoms** of an **illness** or **injury** which permanently and physically prevents them for participating in one of the insured activities, **we**'ll pay:

1 If **your horse** can never be ridden again - the **sum insured** shown on **your** Certificate of Insurance (or their **market value**, whichever is less).

2 If **your horse** can still be ridden – the above, minus £500 towards the amount **your horse** is now worth.

To claim under this section, **your horse** must have been trained to do, or have participated in, the activity that he/she can never participate in again.

To help with **your** understanding of this section, **we**'ve provided an example of when **we**'d pay a Permanent Loss of Use claim. A horse competes in Eventing and is diagnosed with arthritis. The **vet** confirms that the horse's arthritis is so severe it permanently prevents them from being ridden and competing in Eventing. **We**'d pay the horse's sum insured (or their **market value**, whichever is less).

### When we'll automatically remove this section of cover

**We**'ll automatically remove this section of cover:

- At the renewal after **your horse**'s 17th birthday,
- If **you** reduce **your horse**'s **sum insured** to less than £2,000 and/or change their **activity group** to 1 or 2.

All cover in this section will stop from the date it's removed.

### Making a claim

**You** must send **us your** claim within 12 months of first noticing the **illness** or **injury** that caused **your horse**'s Permanent Loss of Use. **We** won't cover any claims received after this time.

**We**'ll need:

- A fully completed claim form.
- Details of the activities **your horse** participated in before the **illness** or **injury**.
- **Your horse**'s full **veterinary history**.
- A report from **your vet** giving details of **your horse**'s **illness** or **injury** and any treatment given to date, their opinion about his/her future ability and the reasons why this permanently prevents them for participating in one of the insured activities they did before.

### We won't pay any amount if:

1. The permanent loss of use is caused by a **pre-existing condition**. It's important to read '*If your horse was unwell before your cover started – pre-existing conditions'* on page 8 and **our** definition of '*Pre-existing condition'* on page 5 for further information.
2. The permanent loss of use is caused by an **illness** that has **symptoms** in the first 14 days of cover. It's important to read '*Symptoms of an illnesses in the first 14 days of cover*' on page 9.
3. The permanent loss of use results from a vice or from a behavioural illness or problem.
4. **Your horse** was less than 2 at the beginning of the **policy year** as shown on **your** Certificate of Insurance.
5. **Your horse** isn't allowed to participate in any competition because of any blemish or scar.

### Your 12 month time-limit

**Your** policy has a time limit for how long **you** can claim; **you** can claim for each **illness** and **injury** for **12 months** only. After this time all cover for that **injury** or **illness** will stop. This means a **vet** must confirm **your horse** meets the Permanent Loss of Use criteria within this **12 month** limit.

| | |
|---|---|
| **For injuries** | The **12 months** cover starts from the date the **injury** happened. If **your horse** has more than one **injury,** and they're:<br>• Diagnosed as the same **injury**, or<br>• Happen at the same time, or<br>• Related or caused by one another,<br>Then a single **12 months** period applies to all **injuries**, starting from the date of the first **injury**. |
| **For illnesses** | The **12 months** cover starts from the date the **illness** or **symptoms** were first noticed.<br>If **your horse** had the same **symptoms/illness** in the past, if they're:<br>• Diagnosed as the same **illness,** or<br>• Related or caused by one another,<br>Then a single **12 months** period applies for all of the **symptoms/illnesses**.<br>The **12 months** cover starts from the very first time the **symptoms/illness** were seen, regardless of whether:<br>• **Your vet** says the **illnesses** are not linked, or<br>• **Symptoms** show in the same or different parts of **your horse**'s body. |

### Your horse must be freeze marked loss of use

Once **your** claim is approved, **your horse** must be freeze-marked for Loss of Use. **We**'ll pay for this and will release **your** claim payment after **we** receive confirmation it's done. **Our** freeze mark provider will contact **you** to arrange an appointment.

If **your horse** has been **put to sleep**, freeze-marking isn't required; **we**'ll just need this confirmed by **your vet**.

### Our vet will review your claim

Both **your vet** and **our vet** must agree that, even with treatment, **your horse** will never be able to take part in one of the insured activities. They may need to wait until treatment is finished to reach an agreement. This must be confirmed within the 12-month time limit (see "*Your 12 month time-limit*" on page 20). To have a valid claim **your horse** must have previously taken part in the insured activity.

If the **vet**s don't agree, **you** can ask **us** to appoint an independent **vet** (**we**'ll cover the cost) and both sides agree to follow their opinion.

### Your horse's activity group

**You** need to make sure **your** insurance covers all of the activities **your horse** participates in. **Your** policy only covers any **illness** or **injury** that:

- Happen when **your horse** is participating part in, or
- Are in any way related to **your horse** participating in,

An activity that is shown as covered on **your** Certificate of Insurance.

**You** can find more information about how **your horse**'s **activity group** affects **your** cover, in *'Your horse's activity group'* on page 7.

### Cover following a claim

**We**'ll automatically update **your** policy from the day after **your** claim is approved. **We**'ll remove this section and lower the **activity group** and **sum insured**. **Your** premium will be amended to reflect the changes.

## Personal Accident

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*
*This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance.*

In this section, '**you**' also includes anyone **riding** or handling **your horse** with **your** permission.

### What we'll pay

If **you**'re injured, hospitalised or die due to an accident that happens while **you**'re **riding** or handling **your horse**, during the **policy year**, **we**'ll pay up to the amount in the table below.

| Cover | Maximum benefit | |
|---|---|---|
| | Standard | Superior |
| 1. Death | £10,000 | £20,000 |
| 2. Permanent blindness in one or both eyes | £10,000 | £20,000 |
| 3. Loss of one or both hands or arms* | £10,000 | £20,000 |
| 4. Loss of one or both feet or legs* | £10,000 | £20,000 |
| 5. Permanent total disability | £10,000 | £20,000 |
| 6. Temporary total disability | No cover | £100 each week |
| 7. Dental treatment | £1,000 | £1,000 |
| 8. Hospital benefit | No cover | £50 each 24 hours |

* 'Loss of one or both hands or arms' and 'Loss of one or both feet or legs' includes:
- Physical severance at or above the wrist or ankle, or
- The total and permanent loss of use of an entire hand, arm, foot or leg.

**Permanent total disability**

**We**'ll pay up to **your maximum benefit**, if:

- It's been at least 52 weeks since the accident happened, and
- A doctor confirms **you**'ve suffered permanent damage as a result of the accident, which means **you**'ll never be able to carry out any type of work.

To claim under this section, **your** injury must be so severe that **you**'ll never be able to carry out any type of work. **You** can't claim under permanent total disability if **you** can no longer carry out **your** current profession but are capable of carrying out any other type of work. This is the case even if **you** need to retrain to carry out an alternative type of work.

There's no cover under this section if **you**'re retired and have permanently stopped working.

**Temporary total disability**

**We**'ll pay up to 52 consecutive weeks of cover, if, as a result of the accident, **you** can't carry out **your** full work. For example, **you** can't carry out the full duties or days/hours **you we**'re doing when the accident happened.

If **you** don't have a job or **you**'re retired, **we**'ll pay **your** medical expenses due to **your** injury up to the weekly benefit.

If **you**'re self-employed and have had to cancel work due to **your** injury, to claim the weekly benefit **you**'ll need to provide evidence showing:

- The work had been arranged before the injury occurred, and
- The dates of the work that **you** had to cancel due to the injury and the amount **you** would've been paid.

If **you** don't provide this information, **we**'ll only pay **your** medical expenses due to **your** injury up to the weekly benefit.

There's no cover under this section for the first 7 days' of temporary total disability for each accident.

**Hospital benefit**

**We**'ll pay up to the **maximum benefit** for each 24 hours **you**'re hospitalised as a result of the accident, for a maximum period of 30 days.

## Making a claim

**Your** claim must be submitted within the timescales stated below. **We** won't cover any claims received after these timeframes.

- *Dental treatment and/or hospitalisation* – within 12 months of the injury happening.
- *Permanent total disability and/or temporary total disability* – within 18 months of the injury happening.
- *Death or anything else* - within 30 months of the injury happening.

**We**'ll need:

- A fully completed claim form.
- As each claim will be different, please contact **us** and **we**'ll advise what additional documents are needed.

### There's no cover in this section when your horse is being used for a business activity

This section doesn't provide any cover when **your horse** is being used for any business activity, either by **you** or any other person or business. Examples of business activities are, **your horse** being used by a riding school/riding establishment for activities such as lessons, pony handling/grooming or pony parties. To make sure **you**'re protected **you** may want to check that the person (which may be yourself)/business responsible for the business activity has the relevant insurance cover in place.

### Other people riding your horse

This section covers accidents that happen when other people are **riding** and/or handling **your horse** with **your** permission. If other people ride/handle **your horse**, **you** need to tell **us** if they have an injury or health condition, or are aged 75 and over. This can affect the cover **we** provide.

For more details please read '*When we may need medical information from you*' in this section.

### We won't pay any amount if:

1. **Your** death, permanent total disability, permanent blindness or loss of hand(s), arm(s), feet or leg(s) happens more than 24 months after the date **you** were injured.
2. The dental treatment isn't directly related to the **riding** accident.
3. The person injured is under 5 years old.
4. The incident or injury that takes place is a result of any business activity, **your** profession, **your** occupation or while **you**'re working for someone, whether **you**'re paid or not.
5. The injury or death resulted from suicide, attempted suicide or **you** deliberately injuring yourself.
6. The injury or death was caused because **you** deliberately put yourself in danger, unless it was in an attempt to save someone's life.
7. The injury or death results from **you** being under the influence of alcohol.
8. The injury or death results from **you** taking a drug unless it was under proper medical supervision and not to treat any drug addiction.

### We can remove cover for Personal Accident at renewal

At renewal **we** can limit or remove this cover based on a review of **your horse**'s behaviour and the answers to **our** questions. For example, any aggressive tendencies shown, any incidents where **your horse** has caused injury to a person/another animal or any health conditions that can affect how **your horse** behaves. If there's a change to **your** cover, **we**'ll contact **you** explaining the change **we**'ve made.

At each renewal, **we** ask **you** about **your horse**'s behaviour and any heath conditions **you** have that may impact **your** ability to **ride** and handle a horse. The things **you** need to tell **us** about are detailed in **your** Certificate of Insurance. **You** must give **us** full and accurate information, if **you** don't it can affect **your horse**'s cover and whether **we** pay claims.

### If you had an injury or health condition before the accident leading to a claim

If an injury is worse because of an old injury or health condition that **you** had before the accident, **we**'ll only pay a percentage of **your** claim. The percentage will be based on the amount the old injury or health condition affects, or is part of, the new injury.

If **you** disagree with the percentage decided, **you** can request that **we** appoint a mutually agreed independent doctor for their opinion. If **you** ask for this, **you** agree to accept the independent opinion and **we**'ll also do the same. **We**'ll pay any costs relating to this.

### Wearing protective headgear

**You** must wear current BSI/European approved protective headgear at all times when **riding your horse**. **We**'ll only cover a claim related to a head injury if **you** do this.

### Multiple disabilities

If **you** suffer from more than one of the disabilities numbered 1, 2, 3, 4 or 5 in the table on page 21, **we**'ll only pay a maximum of £10,000 for the Standard plan and £20,000 for the Superior plan for all the disabilities.

### Your horse's activity group

**You** need to make sure **your** insurance covers all of the activities **your horse** takes part in. **Your** policy doesn't cover any incident that:

- Happens when **your horse** is taking part in, or
- Is in any way related to **your horse** taking part in,

An activity that isn't shown as covered on **your** Certificate of Insurance.

**You** can find more information about how **your horse**'s **activity group** affects **your** cover, in *'Your horse's activity group'* on page 7.

### When we may need medical information from you

- *After an accident that's led to a claim* - as part of the claims assessment there may be times when **we** need **you** to be examined by a medical advisor or doctor. If **we** advise this is needed, **we** can appoint **our** own medical advisers to examine **you** as often as **we** feel is necessary. **We**'ll pay any costs for this.
- *Before **we** provide cover for Personal Accident* - **we** can ask for information to assess if **we**'re able to provide the cover requested. This may include confirmation of a driving license or a letter from **your** doctor following examination. **We** can do this:
  - If **you** have a health condition.
  - At the renewal following **your** 75th birthday and every three years from then on.

  If **we**'ve asked for information to provide 'Personal Accident' cover, **we** won't be able to cover **you** for this while **you**'re **riding** or handing **your horse** until **we** receive it. **We**'ll contact **you** before **your** renewal to let **you** know when this is needed.

  If a charge is made for this, **you** must pay the charge.

### Keeping your policy running after the accident that has led to a claim

**You** can keep **your** policy running for as long as **you** like after the accident that's led to a claim. If **you** decide to cancel **your** policy, **we**'ll continue to pay up to the **maximum benefit** for the accident that occurred while **your** cover for Personal Accident was in place.

Once **we**'ve paid a claim for any of the disabilities numbered 2, 3, 4 or 5 in the table on page 21, all cover for all of these stop. If **you** have another accident **you** can't claim for any of these disabilities.

**We** won't automatically cancel **your** Personal Accident cover if **we** pay a claim under this section. If **you** want to stop cover **you** need to let **us** know and this benefit can be removed from the date **you** ask **us** to do this. **We**'ll refund any amount **you**'ve paid for cover after the cancellation date. **We** won't refund any premiums paid for cover before the date **you** tell **us you** want cover in this section to stop.

## Theft or Straying

*Cover in this section applies when **your horse** is in the **UK** and the Republic of Ireland.*

### What we'll pay

If **your horse** goes missing or is stolen during the **policy year** and doesn't return within 90 days, **we**'ll pay:

- The **sum insured** shown on **your horse**'s Certificate of Insurance (or his/her **market value**, whichever is less) if he/she isn't found, and
- Up to £300 for the cost of both advertising to try and find **your horse** and the reward **you**'ve paid when he/she is found.

### Actions you must take:

**If you don't, we can refuse the claim.**

- Tell the police within 24hrs of **your horse** going missing and get a crime reference number.
- Tell **us** within 7 days of **your horse** going missing. **You** can find **our** details at the back of this booklet.
- Try and find **your horse** by advertising his/her loss (this section includes cover for the costs).
- Not freely part with **your horse**.

### Making a claim

**You** must send **us your** claim no later than 12 months after **your horse** went missing. **We** won't cover any claims received after this time.

**You** can send **us your** claim once **your horse** has been missing for more than 90 days.

**We**'ll need:

- A fully completed claim form.
- Evidence of the police being told within 24hrs of **your horse** going missing.
- Evidence of the advertising carried out to try and find **your horse**.
- **Your horse**'s original passport or purchase receipt showing **you** as the owner, or if **your horse** is on **loan**, the legal owners name.

*If **you**'re claiming for advertising or reward please also send **us**:*
- The invoices and receipts to show the costs **you**'re claiming for.
- *If a reward's been given* - a receipt giving the full name, address, telephone number or email address of the person who found **your horse**. If **you** provided a monetary reward, **we**'ll also need their signature.

**We** recommend **you** send any original documents to **us** by recorded delivery.

### We won't reimburse any reward which has been paid to anyone who:
- Is a member of **your immediate family**,
- Has **your horse** on **loan**,
- Lives with **you**,
- Is employed by **you**,
- Was caring for **your horse** when he/she was lost or stolen,
- Stole **your horse**,
- Is in collusion with the person who stole **your horse**,
- Is travelling with **you** and **your horse** in the **UK** or the Republic of Ireland.

### Cover following a claim
If **we** pay a claim under this section, **we**'ll automatically cancel **your horse** from the policy from the date **we** settle the claim. **We**'ll refund any premium **you**'ve paid for cover after this time.

### If your horse returns
If **your horse** is found after **we** pay **your** claim, **you** must tell **us** and repay the full amount within an agreed timeframe.

## Saddlery and Tack

*Cover in this section applies in the **UK** and the Republic of Ireland.*
This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance.

### What we'll pay
If **your saddlery and tack**'s stolen, damaged or destroyed during the **policy year**, **we**'ll pay:
- The cost of repairing the item if it's damaged to bring it back to the same condition it was in before it was damaged, or
- The cost of replacing the item with a new item of the same (or similar) brand, make and type, if the cost of repair is more than the item was worth, or it's stolen or destroyed.

**We**'ll pay up to the **maximum benefit** shown on **your** Certificate of Insurance for each incident.

### What you pay
**Your excess** – the amount **you** pay when **you** claim and is deducted from **your** claim settlement(s). The excess is £100 for each incident.

### Making a claim
**You** must send **us your** claim no later than 12 months after the loss or damage to **your saddlery and tack**. **We** won't cover any claims received after this time.
**We**'ll need:
- A fully completed claim form.
- *If stolen*:
  - Proof **you** notified the police within 24 hours of discovering the theft
  - Two quotes to replace with a new equivalent item
  - Photos showing damage to the place it was stolen from
- *If damaged and repairable*:
  - Two repair estimates
  - Photos of the damage
- *If damaged and not repairable*:
  - A saddler's written confirmation it's beyond repair
  - Two quotes for a new equivalent item
  - Photos of the damage

### Notifying the police
If **your** item is stolen or deliberately damaged, **you** must tell the police within 24 hours and get a crime reference number. If **you** don't, **we** can refuse the claim.

### Security - when your saddlery and tack's left unattended
**Your** items must be kept in one of the below; if not **we** can refuse the claim.
- A locked vehicle - in the boot or a covered luggage area.
- **Your** home - all doors locked with 5 lever mortice deadlocks*.
- A building which **you** don't live in - all doors locked with 5 lever mortice deadlocks*, all windows secured with steel bars/grids and a secure roof.
- A large metal shipping container that can't be moved - only covered if **you**'ve discussed with **us**, **we**'ve confirmed cover in advance and **our** agreement is shown on **your** Certificate of Insurance (agreed before any incident).

**Our standard is 5 lever mortice deadlocks on all doors. If **you** want **us** to consider other locks please contact **us**. Cover only applies if **we**'ve confirmed cover in advance and **our** agreement is shown on **your** Certificate of Insurance (agreed before any incident).*

### We won't pay any amount:
1. If the damage or theft happened before **your saddlery and tack** cover started.
2. For rugs, blankets, clothing or personal effects such as, hats and body protectors.
3. Due to theft if there's no forcible violent entry to the building or vehicle where the item was kept.
4. For damage caused by:
   - Wear and tear,
   - The actions of moths, insects, vermin or pests,
   - Any other cause that happens slowly.
5. For damage that happens during cleaning, dying or repairing.
6. For adjustments to make the item fit **your horse**.
7. If the item is stolen or damaged when being used for a business activity or as part of **your** work (whether **you**'re paid or not). For example, when someone's using the item in a professional lesson or at a riding establishment.

### You must own or be legally responsible for your saddlery and tack to claim under this section

- If **you** own the item - cover under this section will stop immediately if ownership is transferred to another person or organisation.
- If **you**'re legally responsible for its value due to a contract **you**'ve entered into - cover under this section will stop immediately once the saddlery and tack is returned to its owner. When **you** claim, **we**'ll need a copy of the contract that show's **you**'re legally responsible.

### Other insurances

**We** won't make any payment for any claim that results from an incident covered by any other insurance, for example **your** home and contents insurance. If there's any other insurance under which **you**'re entitled to make a claim **you** must report the incident to that insurance company and tell **us** their name and address and **your** policy and claim number with them.

### If your stolen saddlery and tack's found

If **your** stolen item is found after **we** pay **your** claim, **you** must tell **us** and repay the full amount within an agreed timeframe.

# Horse Trailers and Horse-Drawn Vehicles

*Cover in this section applies in the* ***UK*** *and the Republic of Ireland.*
This is an optional section that's only included in **your** cover if it's shown on **your** Certificate of Insurance.

## What we'll pay

If **your horse trailer or horse-drawn vehicle** is stolen or damaged during the **policy year**, **we**'ll pay:

- The cost of repair to bring it back to the same condition it was in before it was damaged, or
- The **sum insured** (or the items **market value**, whichever is less) if the cost of repair is more than it was worth, it's not repairable or it's been stolen.

## What you pay

**Your excess** – this is the amount **you** pay when **you** claim and is deducted from **your** claim settlement(s). The excess is £100 for each incident.

### Making a claim

**You** must send **us your** claim no later than 12 months after the loss or damage. **We** won't cover any claims received after this time.
**We**'ll need:

- A fully completed claim form.
- Proof of value before damage/loss (such as adverts for similar items, a letter from the supplier/repairer etc)
- *If stolen*:
  - Proof **you** notified the police within 24 hours of discovering the theft.
  - Two quotes to replace with an item of the same age, condition, make and model.
- *If damaged and repairable*:
  - Two repair estimates.
  - Photos of the damage.
- *If damaged and not repairable*:
  - A repairer's letter confirming it's beyond repair and the current salvage value.
  - Two quotes to replace with an item of the same age, condition, make and model.
  - Photos of the damage.

### Notifying the police

If **your** item is stolen or deliberately damaged, **you** must tell the police within 24hrs and get a crime reference number. If **you** don't, **we** can refuse the claim.

### Security – when your horse trailer or horse-drawn vehicle isn't in use:

One of the below must be in force, if not **we** can refuse the claim.

- A wheel clamp
- A tow hitch lock
- Stored within a building which has all doors locked with 5-lever mortice deadlocks. If **you** want **us** to consider other locks please contact **us**. Cover only applies if **we**'ve confirmed cover in advance and **our** agreement is shown on **your** Certificate of Insurance (agreed before any incident).

### There's no cover in this section when your horse trailer or horse-drawn vehicle is with a business or professional

This section doesn't provide any cover when **your horse trailer or horse-drawn vehicle** is with a business or a professional for their services and they're being paid. For example, when **your** trailer's with a repairer. To make sure **you**'re protected **you** may want to check that the business or professional has the relevant insurance cover in place.

### We won't pay any amount:

1. If the damage or theft happened before **your horse trailer or horse-drawn vehicle** cover started.
2. For damage caused by:
   - Wear and tear,
   - The actions of moths, insects, vermin, pests, mildew, mechanical or electrical breakdown,
   - Any other cause that happens slowly.
3. If **your** item is in the care of a business or professional and **you**'re paying for their services. For example, a repairer.
4. For damage that happens during cleaning or repairing.
5. For any recovery and/or storage.
6. For damaged tyres.
7. For damage that happens to **your** horse-drawn vehicle while it's being used in, or training for, competitions, trials or cross country events.

### You must own or be legally responsible for your horse trailer or horse-drawn vehicle to claim under this section

- If **you** own the item - when **you** claim, **we**'ll need the original purchase receipt showing **you** as the owner.
- If **you**'re legally responsible for its value due to a contract **you**'ve entered into - when **you** claim, **we**'ll need a copy of this contract.

Cover under this section will stop immediately if ownership is transferred to another person or organisation.

### Salvage value

Where **your horse trailer or horse-drawn vehicle** is damaged beyond repair, **we**'ll deduct the salvage value from the amount **we** pay **you**.

### Cover following a claim

If **we** pay a claim for **your** stolen or destroyed horse trailer or horse-drawn vehicle, **we**'ll automatically cancel this from **your** policy on the date **we** settle the claim. **We**'ll refund any premium **you**'ve paid for cover after this time, or adjust **your** future premiums based on this cover being removed.

### If your stolen horse trailer or horse-drawn vehicle is found

If found after **we** pay **your** claim, **you** must tell **us** and repay the full amount within an agreed timeframe.

## General conditions that apply to all sections of your policy

**You** must keep to these conditions to have the full protection of **your** policy. If **you** don't, and the condition **you** haven't kept to relates to a claim, **we** can refuse the claim.

1. **Where you and your horse live:**
   - **You** and **your horse** must live in the **UK**. The only exception to this are serving members of the **UK** Armed Forces with a British Forces Post Office (BFPO) address.
   - If **your** address changes **you** must tell **us** as soon as possible as this can affect **your horse**'s cover and premium. Any change to the price of **your** policy will take effect at **your** next renewal.

   **Your** cover can be affected if **you** provide incorrect information about where **you** live.
2. **Ownership of your horse:**
   **You** must be the owner of **your horse** or have **your horse** on **loan:**
   - If **you** own **your horse** - **your** cover will stop immediately if ownership is transferred to another person or organisation.
   - If **you** have **your horse** on **loan** - **your** cover will stop immediately once **your horse** is returned to his/her owner.
3. **Precautions:**
   Throughout the **policy year you** must take all reasonable steps to:
   - Maintain **your horse**'s health.
   - Provide a secure and safe environment for **your horse** to prevent **injury**, **illness**, theft or straying.
   - Control **your horse** to prevent injury to a person or another animal and damage or destruction to any property.

   If **we** state that **you**'ve not taken reasonable steps and **you** disagree, **you** can request that **we** appoint a mutually agreed independent national welfare organisation or **vet** for their opinion. If **you** ask for this, **you** agree to accept the independent opinion and **we**'ll also do the same. **We**'ll pay any costs relating to this.
4. **The person riding or handling your horse**
   **You** must make sure anyone who rides or handles **your horse** is experienced enough and only takes part in the activities shown on **your** Certificate of Insurance.
5. **Providing routine care – what you need to do:**
   **You** must make sure the following care is provided for **your horse**:
   - **Dental care:**
     - **Your horse** must have their teeth checked by a **vet** or qualified equine dentist at least once every 12 months.
     - If **your vet**/dentist treatment recommends any treatment during this check, it needs to take place within the timescales they recommended.
   - **Preventative actions** - **you** must take any actions normally recommended by a **vet** to prevent or reduce the risk of **injury**/**illness**, for example ensuring **your horse** is at a healthy weight.
   - **Vaccinations** - **your horse** must be kept vaccinated against tetanus and equine influenza and given boosters (in accordance with veterinary advice) to maintain their protection. If not, **we** won't cover any amount related to **your horse** not being vaccinated. **Our** vaccination requirements may change during **your policy year**. If they do, **we**'ll contact **you** and explain the new requirements.
   - **Worming** - **you** must follow a veterinary recommended worming programme for **your horse** and keep a record of:
     - The dates and results of any faecal egg worm counts, and/or
     - The dates of worming and the wormer used.

     If **you** don't, **we** can refuse any clam for treatment needed because the worming programme wasn't followed.
6. **Providing timely veterinary attention and following your vets advice:**
   If **your horse**'s unwell **you** must:
   - Arrange for a **vet** to examine and treat **your horse** as soon as possible. If there's a delay in arranging **veterinary treatment** and **we** believe this resulted in additional costs, **we** won't pay the additional costs.
   - Follow any advice **your vet** gives. If **you** don't, and **we** believe this resulted in additional costs, **we** won't pay the additional costs.

   If **we** state the actions above resulted in additional costs and **you** disagree, **you** can request that **we** appoint a mutually agreed independent **vet** for their opinion. If **you** ask for this, **you** agree to accept the independent opinion and **we**'ll also do the same. **We**'ll pay any costs relating to this.

7. **Paying your premium:**
This policy is only in force if **you** pay the premium. If **you** pay by Direct Debit instalments and **you** miss an instalment, **you** must pay the outstanding amount within the timescales stated in the reminders **we** send **you**. If **you** don't, **we**'ll cancel **your** policy back to the last day **you**'ve paid for cover. All cover will stop from that date and no further claims will be paid.

8. **The changes we can make during the policy year:**
**We**'ll only change the cover **we** provide during the **policy year**, if:
   - **You** decide to change **your** cover.
   - **You** didn't tell **us** about something when **we** previously asked.
   - **You** provided **us** with inaccurate information when previously asked (regardless of whether or not **you** thought it was accurate at the time).

   **We**'ll only change **your** premium during the **policy year**, if:
   - **We** find out new information that affects the premium.
   - **You** decide to change **your** cover.

   **We** can also change the way **we** communicate with **you** if **you**'ve used inappropriate, aggressive or threatening language against a member of **our** staff. For example, **we** can refuse to speak with **you** over the telephone and only communicate in writing.

   Any other changes will only be made to **your** policy at renewal. The changes **we** can make at the renewal of **your** policy are explained in '*Renewing your policy*' on page 6.

9. **Keeping us informed of certain information**
Throughout **your** policy **you** need to tell **us** about certain information. The things **you** need to tell **us** about are detailed in **your** Certificate of Insurance and it's important **you** check any new documents **we** send to understand the information **we** need. **You** must give **us** full and accurate information, if **you** don't it can affect **your** cover and whether **we** pay claims.

10. **Providing information**
**You** agree:
    - To give **us** any information and documents **we** ask for to administer **your** policy and deal with **your** claim.
    - That any **vet** or professional who **you**'ve consulted with about **your horse** has **your** permission to give **us** any information **we** ask for about him/her.

    If a charge is made for this, **you** must pay the charge.

11. **If you're a member of vet staff**
If **you**'re a **vet** or a registered vet nurse, **you** can treat **your** own horse but if **you** want to claim, **you**'ll need to:
    - Send **us** the relevant clinical notes to confirm the **veterinary treatment** needed, and
    - Have another **vet** or registered vet nurse countersign the claim form.

12. **Other insurances**
**We** won't pay any claim for an incident that's covered by any other insurance policy. If **you** can claim under any other cover, **you** need to report the incident to the other insurer and give **us** their name and address and **your** policy and claim number with them.

13. **Legal rights against another person**
If **you** have any legal rights against another person in relation to **your** claim, **we** can take legal action against them, in **your** name, at **our** expense. **You** must give **us** all the help **you** can and provide any documents related to the claim that **we** ask for.

14. **Horses on loan**
If **you** have the horse on **loan you** may want to tell the owner:
    - The cover **you** have.
    - That any claim for the horse's value will be paid to **you**, not to the owner.
    - **We** may ask for any **veterinary history** they have for the horse.

15. **Law and language:**
    - The laws of England and Wales apply to this insurance contract.
    - Unless **we** agree otherwise the language of the policy and all communications relating to it will be in English.

## General exclusions that apply to all sections of your policy

1. **Your horse's age – there's no cover under this policy if your horse is:**
   - Less than 30 days old, or
   - 25 years or older at the start of **your policy year**. At the renewal after **your horse**'s 25th birthday, his/her cover will change to the **injury** only Veteran plan and all cover for **illness** will stop.

2. **Laws and regulations – all sections of your policy don't cover any amount:**
   - If **you** break the **UK** or Republic or Ireland laws or regulations, including those relating to animal health or importation.
   - If a government or another official body orders that **your horse** must be vaccinated against an **illness** as part of a compulsory mass vaccination programme. **We** won't pay any costs relating to the vaccination itself or any complications that happen due to the procedure taking place. For the purpose of this insurance, 'a mass vaccination programme' means a programme of the compulsory vaccination of a species, or a selected group within a species, with the aim of protecting that group, people or other animals from an **illness** or another risk.

- If **your horse** is confiscated or destroyed under the order of any government, public or local authority or any other authority.
- Incurred because the Department for Environment, Food and Rural Affairs (DEFRA) or the Department of Agriculture, Environment and Rural Affairs (DAERA) or the Animal and Plant Health Agency (APHA) has put restrictions on **your horse**.
- Connected with, or resulting from, a Criminal Court Case or an Act of Parliament.

3. **War risks and civil commotion – all sections of your policy don't cover any loss or damage caused by, or resulting from:**
   - War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection or military or usurped power.
   - Riot, Civil Commotion, strikers, locked out workers, persons taking part in labour disturbances or Malicious Persons.
4. **Nationalisation - all sections of your policy don't cover any loss or damage caused by, or resulting from:**
   Nationalisation, confiscation, requisition, seizure or destruction by the Government or any public authority.
5. **Terrorism - all sections of your policy don't cover any loss or damage caused by, or resulting from:**
   - Any Act of Terrorism, regardless of any other cause or event contributing concurrently or in any other sequence to such Act of Terrorism.
   - Any action taken in controlling, preventing or suppressing any Act of Terrorism, or in any other way related to such Act of Terrorism.

   An Act or Terrorism (Terrorism) means, acts of persons acting on behalf of, or in connection with, any organisation which carries out activities directed towards the overthrowing or influencing, by force or violence, of His Majesty's government in the United Kingdom or any other government de jure or de facto.
6. **Radioactive contamination, Biological or Chemical Materials – all sections of your policy don't cover any loss or damage caused by, or resulting from:**
   - Ionising radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel.
   - The radioactive, toxic, explosive or other hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof.
   - Any weapon or other device utilizing radioactive material and/or matter and/or ionising radiation and/or atomic or nuclear fission and/or fusion or other like reaction.
   - The radioactive, toxic, explosive or other hazardous or contaminating properties of any radioactive matter.
   - The actual or threatened malicious use of pathogenic or poisonous biological or chemical materials regardless of any other cause or event operating or contributing concurrently, independently or in any other sequence to cause the loss or damage.
7. **Disease transfer - all sections of your policy don't cover:**
   Any claim that results from a disease transmitted from animals to humans.
8. **Notifiable diseases - all sections of your policy don't cover:**
   Any amount that results from a notifiable disease. A notifiable disease is one that legally must be reported to the Animal and Plant Health Agency (APHA), even if it's only suspected an animal has it. Further information on these can be found www.gov.uk/government/collections/notifiable-diseases-in-animals.
9. **All sections of your policy don't cover any amount caused by or resulting from:**
   The pressure waves of an aircraft, spacecraft or anything else travelling at sonic or supersonic speed.

## Fraud

Fraud increases the price **you** and all policyholders pay.

If **you**:

- Provide **us** with false information at any time,
- Make a false or exaggerated claim with **us**, or
- Make any claim with **us** that involves **your** dishonesty,

**We** can:

- void **your** policy,
- decline **your** claim,
- inform the relevant authorities/other organisations, and
- record the details on anti-fraud databases.

If **we** pay a claim and subsequently find the claim was fraudulent, **you** must repay **us** the full amount.

'*Void **your** policy*' means:

- **We**'ll cancel **your** policy from the date the fraud occurred and no cover will be provided from that date.
- **We** won't offer **you** any new equine or pet insurance policies that are underwritten by Allianz Insurance plc.
- If **you**'ve claimed, **you** must repay **us** any claim payments that were made from the date the fraud occurred; this is regardless of whether or not all of the claims were fraudulent.
- If any other insurer asks if **you**'ve had a policy void, **you** need to tell them that **your** policy with **us** was void. If **you** don't, this can invalidate any insurance policy **you** hold with any insurer who asks.

# Cancelling your policy

### When you can cancel your policy

**You** can cancel **your** policy at any time, with no charge.

- *If **you** cancel in the first 14 days of **your** cover starting* – **we**'ll refund all of the premium **you**'ve paid.
- *If **you** cancel in the first 14 days after **your** renewal date* – **we**'ll refund any amount **you**'ve paid for cover after that renewal date.
- *If **you** cancel at any other time* – **we**'ll refund any amount **you**'ve paid for cover after the cancellation date.

**You** can find **our** contact details on the back of this booklet.

### When we can cancel your policy

**We** can cancel **your** policy if:

- **You**'ve been dishonest or fraudulent in any dealings with **us**,
- **You**'ve continued to use inappropriate, aggressive or threatening language against a member of **our** staff despite **our** requests to stop, or
- A **vet** or a welfare organisation informs **us** that **you**'ve been negligent towards **your horse**.

**We**'ll give **you** notice in writing either by email or to the address **you** gave **us** and refund any amount **you**'ve paid for the cover after the date **we** received the information that led to **our** decision to cancel.

**We** can also cancel **your** policy if **you** don't make payments when due. For details on this please read point 7 in the 'General conditions' section.

### Cover following cancellation of a policy or removal of a section

If a section of cover is removed from **your** policy all cover in that section stops on the date the section is removed.

If **your** policy is cancelled or comes to an end for any reason, all cover will stop on the date the policy is cancelled/ends and no further claims will be paid. If **you** want **us** to continue to cover an **illness** or **injury** up to the limits on **your** policy, **you** must keep the cover in force and continue to make **your** payments during this time.

The only exception to this is **your** cover for *Third Party Liability* and *Personal accident (if **you**'ve chosen this cover)*. **We**'ll continue to pay up to the **maximum benefit** for the accident/incident that occurred while this cover was in place. It's important to read '*Keeping your policy running after the incident that has led to a claim'* on page 19 and '*Keeping your policy running after the accident that has led to a claim'* on page 23 or further information.

# Making a complaint

**Our** aim is to get it right, first time every time. If **we** make a mistake **we**'ll try to put it right straight away. If **we**'re unable to, **we**'ll confirm **we**'ve received **your** complaint within five working days and do **our** best to resolve the problem within four weeks. If **we** can't **we**'ll let **you** know when an answer may be expected. If **we**'ve not resolved the situation within eight weeks **we**'ll issue **you** with information about the Financial Ombudsman Service (FOS) which offers a free, independent complaint resolution service. If **you** have a complaint, please contact **our** Complaints Team at:

Petplan Equine
PO Box 222
Huddersfield
HD8 1FQ

Telephone: 0345 075 2028
Email: petplan.csm@allianz.co.uk

**You have the right to refer your complaint to the Financial Ombudsman, free of charge - but you must do so within six months of the date of the final response letter.**

If **you** don't refer **your** complaint in time, the Ombudsman won't have **our** permission to consider **your** complaint and so will only be able to do so in very limited circumstances. For example, if the Ombudsman believes that the delay was as a result of exceptional circumstances.

The Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Website: www.financial-ombudsman.org.uk

Telephone: 0800 0234567 or 0300 1239123

Email: complaint.info@financial-ombudsman.org.uk

Alternatively, **you** can contact the Financial Ombudsman Service directly.

Using **our** complaints procedure or contacting the FOS doesn't affect **your** legal rights.

# Financial Services Compensation Scheme

Allianz Insurance plc contributes to the Financial Services Compensation Scheme (FSCS). If Allianz Insurance plc is unable to meet its liabilities **you** may be entitled to compensation under the FSCS. Further information about compensation scheme arrangements is available at www.fscs.org.uk, by emailing enquiries@fscs.org.uk or by phoning the FSCS on 0800 678 1100 or 0207 741 4100.

In the Privacy Notice Summary below you'll see that Allianz is mentioned. Petplan is a subsidiary of Allianz Insurance plc and where we refer to 'we' 'us' and 'our' it means Petplan and Allianz Insurance plc.

## Privacy Notice Summary – how we use personal information

Please find below a summary of our Privacy Notice. The full notice can be found on the Allianz UK website: https://www.allianz.co.uk/privacy-notice.html#pn

If you would like a printed copy of our Privacy Notice, please contact the Data Rights team using the details below.

Allianz Insurance plc is the data controller of any personal information given to us about you or other people named on the policy, quote or claim. It is your responsibility to let any named person know about who we are and how this information will be processed.

"When we refer to "we", "us" and our in this notice it means Allianz Insurance plc, Allianz Engineering Inspection Services Limited, and Pet Plan Limited, who are all part of the Allianz UK Group which includes insurance companies, insurance brokers and other companies owned by the Allianz UK Group.

Please see link for a detailed list of these companies here:
https://www.allianz.co.uk/about-allianz/our-organisation.html#azuk"

**Anyone whose personal information we hold has the right to object to us using it. They can do this at any time by telling us and we will consider the request and either stop using their personal information or explain why we are not able to.**

If you wish to exercise any of your data protection rights, you can do so by contacting our Data Rights team:

Telephone: 0208 231 3992

Email: datarights@allianz.co.uk

Address: Data Rights team,
Allianz Insurance plc
PO Box 5291
Worthing
BN11 9TD

Any queries about how we use personal information should be addressed to Our Data Protection Officer:

Telephone: 0330 102 1837

Email: dataprotectionofficer@allianz.co.uk

Address: Data Protection Officer,
Allianz Insurance plc
PO Box 5291
Worthing
BN11 9TD

## How to contact us

| | |
|---|---|
| **BY TELEPHONE** | 0345 072 8899 |
| **BY EMAIL** | petplanequine.service@allianz.co.uk |
| **IN WRITING** | Petplan Equine<br>PO Box 222<br>Huddersfield<br>HD8 1FQ |
| **WEBSITE** | petplanequine.co.uk |

| | |
|---|---|
| Download a claim form | petplanequine.co.uk/claims |
| Track your claim | petplanequine.co.uk/claims |



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